



The Red Crescent Society of Kyrgyzstan (RCSK) is conducting vaccination promotion activities, as well as accompanying people to medical facilities for vaccination. Photo credit: Gulnura Abdumanapova/RCSK, July 2023.

Appeal: MDRKG018	Country: Kyrgyzstan	Hazard: Epidemic	Type of DREF Response
Crisis Category: Yellow	Event Onset: Slow	DREF Allocation: CHF 139,117	
Glide Number: EP-2023-000162-KGZ	People Affected: 700,000 people	People Targeted: 70,000 people	
Operation Start Date: 2023-08-31	Operation Timeframe: 3 months	Operation End Date: 2023-11-30	DREF Published: 2023-09-01
Targeted Areas:	Bishkek City, Chuy, Osh, Osh City		

Description of the Event



Map of targeted areas of the DREF operation: Chui province, Bishkek city, Osh province, Osh city

What happened, where and when?

According to the Republican Center for Immunoprophylaxis of the Ministry of Health of the Kyrgyz Republic, since the beginning of 2023, the epidemiological situation in the country for measles and rubella has deteriorated. The first cases were reported in the first epidemiological week in Bishkek city and Chui regions, and, starting from the eighth epidemiological week, it has spread to Osh city and Osh region. Then it has spread to an additional 34 districts in 5 regions.

The government of the Kyrgyz Republic has not officially declared an outbreak. For reference, as per the WHO, the definition of a suspected measles outbreak is five or more measles cases (with dates of rash onset occurring 7–21 days apart) that are epidemiologically linked, and the definition of a laboratory-confirmed measles outbreak is two or more laboratory-confirmed measles cases that are temporally related (with dates of rash onset occurring 7–21 days apart) and epidemiologically or virologically linked, or both).

As of 21 August 2023, 2,743 suspected cases of measles and/or rubella were reported, from which 1,774 were classified as measles (945 laboratory confirmed cases, 323 clinically confirmed cases, and 506 are epidemiologically linked).

Measles incidence per 1 million population for the period of May 2022 to April 2023 is 49.47 cases, which is the

second highest in the WHO Europe region.

The country reported 11 cases of rubella in the period between May 2022 and April 2023, the fourth highest in the WHO Europe region during this period.

On 14 August, the Ministry of Health of the Kyrgyz Republic announced two confirmed deaths due to complications of measles (<https://med.kg/pressCenter/news/61e9431c-4e8a-422c-b550-6a3429742350>). One (1) case was reported in Bishkek (a three-year old child) and one (1) case in Chui region (a one-year old child). In both cases, the children were not vaccinated according to the National vaccination calendar, as parents decided against immunization due to religious reasons.

The distribution of measles cases across the country as of 14 August is as follows:

- Osh region - 609
- Bishkek city - 361
- Osh city - 277
- Chuy region - 165
- Jalal-Abad region - 94
- Batken region - 89
- Talas region - 74
- Issyk-Kul region - 59
- Naryn region - 6.

74% of all cases are registered among children under five years.

The age distribution of reported cases is as follows:

- 31% - under the age of 1 year (218 cases)
- 43% of cases in the age group from 1-4 years (306 cases),
- 14% - from 5 to 9 years (100 cases)
- 4% - from 10-14 years old (27 cases)
- 0.7% - from 15-19 years old (5 cases)
- 5% - from 20-29 years old (36 cases)
- 30 years and older - 16 cases.

Analysis of vaccination status of patients diagnosed with measles:

15% of all cases (107 people) were vaccinated with MMR vaccine: 89 patients were vaccinated with one (1) dose of MMR (measles, mumps, rubella) and 23 patients were vaccinated with two (2) doses of MMR. 85% of all cases (601 people) were not vaccinated.

The main reasons for people not being vaccinated were as follows:

- 223 were not vaccinated due to age
- 224 decided not to be vaccinated
- 62 were not vaccinated due to medical exemptions
- 14 children were not vaccinated due to migration
- 69 had an unknown vaccination status.

In 9 cases, the vaccination status is being specified.

To date, the epidemiological situation remains intense, as the disease continues to spread, with new cases being reported in all regions.

For comparison, 23 cases of measles were reported nationwide in 2022, three (3) cases in 2021 and 733 cases in 2020 in Kyrgyzstan. In 2019, the WHO recognized Kyrgyzstan as a rubella-free country (<https://www.unicef.org/kyrgyzstan/press-releases/european-immunization-week-kyrgyzstan-every-vaccine-dose-matters-protect-you-and>). The country has experienced a large measles outbreak in 2014-2015, when 17,779 measles cases were reported.

Reduced vaccine coverage rates for childhood vaccinations during the COVID-19 pandemic played a key role in the current increase of measles cases in Kyrgyzstan.



The Ministry of Health of the Kyrgyz Republic notes that during the COVID-19 pandemic, routine vaccination coverage has significantly dropped. In 2021, coverage in the Kyrgyz Republic with the first dose of MMR was 93.3%, and coverage with the second dose of MMR was 96.9%. In 2022, coverage in the republic with the first dose of MMR was 94.4%, and coverage with the second dose of MMR was 94.5%.

The vaccine coverage rates for measles-containing vaccines are below the World Health Organization (WHO) recommended levels, especially in Bishkek city, Osh, Batken and Jalal-Abad regions. To reduce the burden of measles, the WHO recommends coverage of $\geq 95\%$ of two doses of Measles Containing Vaccine (MCV) to assure immune response and interrupt the transmission. While the vaccine coverage rates have increased in the past two years, it remains below the pre-pandemic levels.

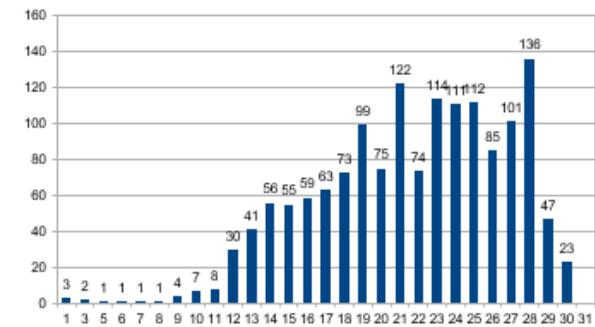
There is a growing vaccine hesitancy in the country. The Republican Immunoprophylaxis Centre has received a growing number of reported cases on vaccination refusals since 2016. In 2021, more than 10,000 refusals have been recorded. Currently, it is estimated that 12,000 refusal forms have been registered with the health facilities across the county.

It is possible that the current numbers of measles cases are underestimated. The number of cases is expected to rise in the weeks, with the start of the academic year in one week time, when schools and kindergartens reopen. Also, the incoming fall and winter seasons with temperature dropping below zero degrees and people remaining indoors for extended periods of time will likely lead to an increased number of cases. During the flu season in the fall and winter, the health services become overstretched dealing with a large number of children with ARI. Compounding the problem is the existing levels of malnutrition among children: 11% of children 0-4 years are stunted (2020), 1% severe wasted and 2% moderately wasted (2015-2020).



RCSK is conducting vaccination promotion activities, as well as accompanying people to medical facilities for vaccination. Photo credit: Tatiana Ryabukhina/ RCSK, July 2023.

Number of measles cases per epidemiological week



According to the weekly registration schedule you can see a decrease in the incidence at 30 and 31 weeks, but some cases are still pending final classification which confirms that measles is not declining, but is increasing every week.

The above graph shows the number of measles cases per epidemiological week. A decrease in incidence at 30 and 31 weeks can be seen. However, some cases are yet to be classified to confirm that the disease is declining.

Scope and Scale

Measles is one of the world's most contagious diseases. One person infected by measles can infect nine out of 10 of their unvaccinated close contacts. It is one of the most severe infectious diseases among children and one of the major causes of their mortality, especially in developing countries. Measles complications, such as pneumonia, diarrhea and encephalitis can occur in up to 30% of persons depending on age and predisposing conditions, such as young age, malnutrition and immunocompromising conditions. The measles outbreak can result in severe complications and deaths, especially among young and malnourished children. There is no specific treatment for measles, and most people recover within two to three weeks.



The current situation has already affected the health and wellbeing of 1,744 children as of 21 August. On 14 August, the Ministry of Health of the Kyrgyz Republic published information that two deaths from complications of measles have been registered.

The country experienced a large measles outbreak in 2014-2015, when 17,779 measles cases were reported.

Some of the affected children have suffered from a severe course of the disease and experienced prolonged hospitalizations. The most at risk groups in the current context are under-immunized children (children with zero doses or with partial vaccination with measles-containing vaccine). The most affected regions are Chui and Osh regions and Osh and Bishkek cities. Osh and Bishkek cities are the two main cities of the country, with a large mobile population.

Previous Operations

Has a similar event affected the same area(s) in the last 3 years?	No
Did it affect the same population groups?	No
Did the National Society respond?	No
Did the National Society request funding from DREF for that event(s)?	No
If yes, please specify which operations	-

Lessons learned

While the RCSK does not have available lessons learned from its previous outbreak responses for measles from years back, it has a rich experience from its recent response to the COVID-19 pandemic and its ongoing work on COVID-19 vaccine promotion. The National Society (NS) has conducted a nation-wide perception survey on COVID-19 vaccination in November 2022, where it also included some questions related to exploring people's perception around routine immunization. The current operation design was guided by the findings from that survey.

Current National Society Actions

Health	The RCSK has two ongoing health-related projects where the immunization components are included (COVID-19 vaccine promotion project and epidemic and pandemic preparedness component under the ECHO Programmatic Partnership Project). As the situation evolved, the RCSK adjusted its planned project activities to respond to the increased risk communication needs and vaccine promotion activities. Among other things, the RCSK conducted the following activities in this regard: - Developed training materials for volunteers on routine immunization. - All project staff and volunteers received additional training on vaccine-preventable diseases. - The National Society organized the deployment of mobile teams of the
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	Republican Center of Immunoprophylaxis. In total, the RCSK deployed 75 trained volunteers for these activities to date since the start of its response.
Coordination	The National Society, together with the IFRC Health Manager, approached the Republican Center of Immunoprophylaxis, the main leading agency under the Ministry of Health for immunization, to express their intentions to support the government efforts to contain the current surge of cases and coordinate its response activities. Regional branches of RCSK held meetings with representatives of regional health authorities. During the meetings, the offer of assistance by RCSK was very much welcomed by the authorities and appreciated such proactive approach by the RCSK in responding to the current situation. The RCSK closely coordinated its activities with the religious leaders and conducted training of religious leaders on the importance of vaccination in order for them to be able to convey this information to their congregation during the Friday prayers.
Community Engagement And Accountability	In addition to the above described activities, the National Society conducted TV and radio broadcasts on the topic of routine immunization and active informational work was carried out with the caregivers and parents with small children.

IFRC Network Actions Related To The Current Event

Secretariat	IFRC is present in the country and is part of the in-country movement coordination team. The IFRC Country Cluster Delegation (CCD) in Central Asia is currently working with the RCSK on identification of the needs and development of the DREF application. The IFRC CCD in Central Asia is furthermore facilitating tailored technical support and advocating for mobilizing international support to programmes and operations led by the NS.
Participating National Societies	Swiss Red Cross, German Red Cross, Italian Red Cross and Turkish Red Crescent are part of the in-country Movement Coordination platform. The American Red Cross has approached the IFRC Country Cluster Delegation with their offer to support the outbreak response immunization (ORI) campaign which is planned by the government of the Kyrgyz Republic with the support of the Global Measles & Rubella Partnership. The discussions are ongoing.

ICRC Actions Related To The Current Event

The ICRC has been present in the country since 1992. ICRC helps victims of violence, visits detainees, promotes International Humanitarian Law (IHL), renovates and supplies health facilities, works with the authorities on the issue of missing persons, and helps train the Red Crescent Society of Kyrgyzstan. The country is covered by the regional delegation in Uzbekistan.

Other Actors Actions Related To The Current Event



Government has requested international assistance	No
National authorities	In response to this situation, the Republican Center for Immunoprophylaxis (RCIP) of the Kyrgyz Republic (RCI - main technical agency under the Ministry of Health responsible for national immunization programme) has conducted the following activities: - From April 2023, it intensified its vaccination activities throughout the country among unvaccinated children from one (1) to six (6) years old. - On 28 March 2023, a regional meeting was held in Osh with the participation of RCIP specialists. - On 10 April 2023, a meeting of the operational headquarters under the Ministry of Health of the Kyrgyz Republic on the increase of cases of measles was held with the adoption of appropriate measures. - On 15 April 2023, representatives of the operation center visited Osh region to intensify the response measures. - On 28 April 2023, a meeting of the Verification Committee for measles and rubella was held with an analysis of the epidemiological situation for measles and rubella. - On 9 June 2023, a meeting of the operation center under the Ministry of Health on the situation with measles and rubella in the country was held. - On 14 June 2023, an operation center held a meeting in Bishkek with the participation of the City Health Department, deputy directors of the Family Medicine Centers and specialists of the Republican Clinical Infectious Diseases Hospital. - The communication plan for the current measles situation was approved by the Ministry of Health of the Kyrgyz Republic on 18 August. - The government applied to GAVI on 20 July 2023 for their support towards the supplementary immunization activities (SIA) in 5 regions (Batken, Jalal-Abad, Talas, Issyk Kul, Naryn). The decision is pending by GAVI. If successful, the campaign will be carried out in October 2024 and will be targeting 509,722 children. - On 4 August, the government requested support from the Global Measles & Rubella Partnership and this request was approved on 16 August for delivery of additional vaccine doses to support outbreak response immunization (ORI) activities in September 2023. The campaign is targeting 9 months to 84 months-old children (under 8 years) in 16 districts of 4 regions (Osh Oblast, Bishkek City, Osh City & Chui Oblast). The total number of the target group is 509,272 children. The ORI is planned to start at the end of September 2023 and will continue for two weeks. The supply of vaccines to support these immunization activities is being shipped to the country.
UN or other actors	UNICEF in Kyrgyzstan and WHO offices have been closely following up with the Ministry of Health of the Kyrgyz Republic on the current situation. The country, with technical support from WHO and UNICEF, is developing the National Immunization strategy (NIS) for 2025-2030. This Strategy specifies the country's immunization priorities and objectives, identifies the obstacles and organizes the sequence of interventions to get there, within a defined time-frame. Both IFRC and RCSK have been invited to be a part of this strategy development process. In July 2023, the government of the Kyrgyz Republic applied to the GAVI requesting additional measles -containing vaccine doses to bring the current

situation under control. The decision by GAVI is pending and if approved, the supplementary immunization is planned in October 2024. The Global Measles & Rubella Partnership committed additional vaccine doses for the MOH for the immunization campaign in September 2023 in selected 4 regions.

Are there major coordination mechanisms in place?

The Republican Center of Immunoprophylaxis established an operation center to coordinate the efforts in response to this situation. The RCSK remains in close coordination with the RCI and organized several meetings to coordinate its response activities.

The first coordination meeting among the development partners on the current situation is planned for the week of 28 August. The IFRC and NS have close consultations with the WHO and UNICEF and expressed their interest in being involved in coordination with other organizations.

Needs (Gaps) Identified



Community Engagement And Accountability

There is growing vaccine hesitation in the country and widespread misconception and distrust in vaccines, including the COVID-19 and childhood vaccinations. The Republican Immunoprophylaxis Centre has received a growing number of reports of vaccination refusals since 2016. In 2021, more than 10,000 refusals have been recorded.



Health

In addition to growing vaccine hesitancy, the most immediate need identified by the RCSK are:

- Lack of awareness among the parents and caregivers of children under 8 years, especially among under-immunized or zero-dose children, on the importance of vaccinating their children with measles-containing vaccines. According to the surveys conducted to date in the country, the main profile of caregivers who refuse vaccinations for their children is the people living in urban areas, people who have completed secondary school education or higher education, and people who belong to various non-traditional religious groups. Approximately, 30% of all households in Kyrgyzstan are female-headed households who may have additional barriers to access to immunization services and these gender dimensions need to be considered.
- Lack of capacities of the local health facilities to conduct social mobilization activities at a scale during the mass vaccination campaigns.

Any identified gaps/limitations in the assessment

The RCSK conducted a perception survey on COVID-19 vaccination in November 2022, which included segments on routine immunization. However, the team feels that there has not been a sufficient exploration of people's perceptions around childhood vaccinations and with the technical support of IFRC, the NS is planning to conduct the second iteration of the same perception survey, but this time focused exclusively on the routine immunization. UNICEF Europe and Central Asia Regional Office (ECARO) conducted "Behaviour insights research on drivers influencing childhood immunization-related behaviours in Kyrgyzstan" to understand the factors influencing people's childhood immunization-related choices and practices in Kyrgyzstan. It will provide government and decision-makers with insights into the barriers and drivers of immunisation among priority target groups and enable them to design and implement evidence-based interventions for high and equitable immunisation coverage. The report has not been officially published, but the draft report was shared with the IFRC and RCSK teams for their working use to inform the design of this operation.

Operational Strategy



Overall objective of the operation

The overall objective of the operation is to reduce the impact of the current increase of measles cases on the most vulnerable, at-risk groups with the aim of reducing morbidity and mortality in coordination with the government health structures.

The operation aims to reach a total of 70,000 people in the selected communities through improving the awareness of parents and caregivers of children aged 9-84 months (under 8 years) on the importance and safety of measles vaccination, supporting social mobilization efforts during the planned immunization campaign in September 2023 and tackling vaccine hesitancy among the parents and caregivers of zero-dose and under-immunized children.

Operation strategy rationale

This DREF allocation aims to deliver humanitarian assistance to at risk communities under the following strategic areas:

1. Vaccination campaign: Support the outbreak response immunization (ORI) activities of the Ministry of Health in selected 4 locations through the social mobilization of trained Red Crescent volunteers during the two-week period at the end of September 2023.
2. Working with the parents and caregivers of zero-dose and under-immunized children to reduce their vaccine hesitancy and encourage them to vaccinate their children against measles.
3. Public education to improve people's awareness on the importance of vaccinating their children against measles, through active engagement of communities.

Targeting Strategy

Who will be targeted through this operation?

The DREF operation targets the following groups:

- 1) Groups most at risk for measles - children from 9 months to 84 months-old children (under 8 years) in the most affected regions (Chui region, Bishkek city, Osh city, and Osh region). 509,272 children
- 2) Vaccine - hesitant parents and caregivers who have refused vaccination (zero -dose children and under-immunized children)
- 3) Parents of preschool children and school-aged children (0 and 1st grade),
- 4) Teachers of kindergartens and 0 and 1 classes,
- 5) Community Leaders,
- 6) General population.

The target groups 3-6 as listed above are the same as those indicated in the Ministry of Health's communication plan for the current measles situation. The target group is the same group that is targeted for the outbreak response immunization (ORI) campaign scheduled in September 2023.

The above groups in the selected regions are estimated to be around 700,000. The awareness campaign plans to cover up to 10% of the total group, or 70,000 people.

The selected regions and cities for this operation (Osh and Chu regions and Bishkek and Osh cities) are the most affected regions and are the same locations where the ORI campaign will be conducted.

Explain the selection criteria for the targeted population

Groups most at risk for measles are the children from 9 month to 84 months-old children (under 8 years) in most affected regions, especially those who are under-immunized or zero-dose children.

The local health facilities maintain a list of parents and caregivers who have refused to vaccinate their children. The local Red Crescent (RC) branches have a high level of trust of the regional health authorities in the targeted regions



and cities and will be given temporary access to this list. Based on this list, the trained RC volunteers under the guidance of the local health facilities can approach the families with zero -dose and under-immunized children.

Therefore, this intervention will specifically prioritize targeting the parents and caregivers of these under-immunized and zero children aged 9 to 84 months (under 8 years) with tailored messages to address their vaccine hesitations, and provide accurate information on childhood vaccines.

According to the surveys conducted to date, the main profile of caregivers who refuse vaccinations for their children is the people living in urban areas, people who have completed secondary school education or higher education, and people who belong to various non-traditional religious groups. The intervention will be targeting the country's two most populous cities (Bishkek City and Osh City) and surrounding regions (Osh and Chui regions) where the currently the majority of measles cases are concentrated.

Total Targeted Population

Women:	56,000	Rural %	Urban %
Girls (under 18):	-	%	%
Men:	14,000	People with disabilities (estimated %)	
Boys (under 18):	-	%	
Total targeted population:	70,000		

Risk and security considerations

Please indicate about potential operational risk for this operations and mitigation actions

Risk	Mitigation action
Major political unrest and escalation of the armed conflict in border areas. One of the targeted regions for this operation (Osh region) is located in the south of the country, close to the conflict-prone border areas.	RCSK closely monitors the border situation and will take appropriate preparedness measures.
Lack of measles-containing vaccines in the country.	The RCSK will closely coordinate activities with the Republican Center of Immunoprophylaxis and monitor the availability of vaccines in the country.
Large or medium-scale disaster in the country.	RCSK closely monitors weather forecasts, supports preparedness measures and in urgent case will activate the organization's "no-regret early action" protocols based on IFRC early warning systems guidelines in order to take effective measures.

Please indicate any security and safety concerns for this operation

The security of the RCSK staff and volunteers is of high importance. The RCSK team in the field will monitor the security updates before visiting communities.



Planned Intervention

	Health	Budget	CHF 89,780
		Targeted Persons	70000
Indicators	Target		
Percentage of zero -dose children aged 9-84 months who have been vaccinated after their caregivers received information sessions by RCSK	10		
Number of people reached through social mobilization for vaccination campaign	70000		
Number of Red Crescent volunteers who have been deployed for outbreak response	150		
Priority Actions:		• Refresher training for staff and volunteers of RCSK on vaccine-preventable diseases, with a focus on risk communication on measles and rubella. As a part of the training, the volunteers will be provided with additional skills in providing psychological first aid where needed, as well as safe home care, and health promotion activities. • Information sessions targeting vaccine-hesitant parents and caregivers of children aged 9-84 months in the selected regions and cities. • Round table meeting with stakeholders involved in the current response; • Organize large-scale vaccine promotion campaigns in kindergartens and schools in all 4 targeted locations, and campaigns in new settlements around Bishkek and Osh cities with the involvement of mobile vaccination teams (the mobile vaccination trucks and vaccination teams provided by the RCIP). • Communication training for medical workers in vulnerable communities (feldsher posts) • Organize social mobilization of Red Crescent volunteer during the ORI campaign targeting the children aged 9-84 months in selected 16 districts of Osh and Chui regions and Osh and Bishkek cities. • Facilitate the establishment or strengthen the existing groups (where it exists) a group of active parents and caregivers who promote childhood vaccination among children on social media and other public forums (through sharing their positive vaccination experiences and dispelling myths around vaccination).	

		Budget	CHF 23,963
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Community Engagement And Accountability

Targeted Persons

20000

Indicators

Target

Number of community perception and feedback reports produced on a monthly basis

3

Number of people reached with RCCE activities

20000

Number of IEC materials distributed

Priority Actions:

1.
Addressing the vaccine hesitancy and mass media activities:
a) Attracting bloggers and social media influencers to promote vaccination among parents and caregivers of small children;
b) Involve mass Media agencies in risk communication on the current situation and the importance of the measles vaccination and health promotion (through radio broadcasts and TV segments).
2.
The RCSK will collect and respond to feedback and use it to guide the response throughout a multi-channel feedback mechanism. An assessment will be carried out through Focus Group Discussions to understand the communities' information needs and perceptions about the current surge of cases, allowing them to guide the operation. Based on these results, information, education, and communications (IEC) materials will be produced with key messages and disseminate information based on the community's information needs.
The following channels will be used for the feedback gathering:
a) Promoting the helpline in affected communities for inquiries and feedbacks related to the current outbreak.
The National Society has an existing helpline, which is available on all three main service providers (3 mobile operators: O! MegaCom, Beeline) and is being used by all RCSK' projects. If the helpline receives a call with a question related to immunization, it will be redirected to an immunization specialist. In turn, the specialist can answer to the question, share up-to-date information about vaccination, or redirect to a medical provider or vaccination points. All the expenses for running the hotline by other projects run by the RCSK.
b) Using the social media groups such as WhatsApp for collecting feedback from the Red Crescent volunteers engaged in the social mobilization.
The NS maintains a WhatsApp group where all the RC volunteers involved in the social mobilization for COVID-19 and routine immunization activities are included. This group serves as a platform for the volunteers to seek clarifications by the immunization expert of the RCSK and collect feedback (questions, biases, sugges-



tions, etc.) from the volunteers, that help to fine-tune the activities of the project.

c) collecting feedback from community members during the household visits and information sessions by the RC volunteers (either in KOBO or paper forms).

d) conducting open-mic sessions:
To better reach the audience, live radio and TV broadcasts on vaccination will be conducted with the involvement of health professionals.

All questions received during the live broadcasts (both radio and TV) will be recorded in the feedback collection form.

e) using different social media channels to communicate to the public regarding the importance of vaccination and collect feedback from the public.

The RCSK actively uses different social media channels (Instagram, Facebook, etc.) to disseminate accurate information about vaccination and dispel myths.

	National Society Strengthening	Budget	CHF 25,375
		Targeted Persons	155
Indicators		Target	
Number of lessons learned workshops held		1	
Number of RCSK staff and volunteers involved in the operation		154	
Number of volunteers insured			
Priority Actions:		• Conducting lessons learned workshop at the end of RCSK' response • Involvement of RCSK staff and volunteers in the emergency response • Dedicated staff to support the timely and effective implementation of the DREF operation: Operations Manager (100%), Field Officers (2) (100%), Finance Manager (50%), Consultant (HQ) (35%)	

About Support Services

How many staff and volunteers will be involved in this operation. Briefly describe their role.

150 volunteers and 4 staff of the RCSK will be involved in this operation. The roles of volunteers will be:

- social mobilization during the immunization campaigns
- educating the targeted groups on the importance of vaccinating their children against measles and other childhood illnesses.

Currently, the RCSK health team is implementing two related projects such as COVID-19 vaccine promotion project

and the Pilot Programmatic Partnership project funded by ECHO (one of the five pillars of which is focused on pandemic and epidemic preparedness) and the current DREF operation will capitalize on the capacities developed under those two projects for the implementation of the activities. The current DREF response will be implemented by the RCSK health department (8 staff members in the department).

If there is procurement, will it be done by National Society or IFRC?

IFRC expects the RCSK to lead procurement of items as per their and national procurement regulations. IFRC will ensure that the Federation's procurement standards and procedures are duly adhered to.

How will this operation be monitored?

Monitoring and evaluation will be an integral part of the operation and will be carried out involving the assisted people and other stakeholders utilizing participatory approaches throughout the operation's timeframe. Regular internal operation updates (biweekly or monthly) will be developed by the implementing team of the RCSK Branches, feeding to the RCSK headquarters and further distributed to key stakeholders as necessary.

Monthly financial and operation progress reports will inform of the key operation's achievements and planned activities for the next period. The reports will reflect the numbers of people assisted disaggregated by gender, age and disabilities if possible. Additionally, meetings with key stakeholders, performance reporting, field visits to follow progress on implementation of activities will be done on a regular basis.

In addition, the RCSK will hold a lesson learned workshop at the end of the operation to evaluate key achievements and challenges in order to improve the National Society response operations in the future.

Regular coordination meetings will be held with the regional health authorities to determine the level of increase in the vaccine coverage rates following the risk communication and outreach activities by the Red Crescent volunteers.

Please briefly explain the National Societies communication strategy for this operation.

The RCSK has experienced communications specialists at its headquarters in Bishkek, which has been sharing information on the crisis, its impact and actions undertaken and planned by the National Society and other stakeholders through various media outlets, including social media. The RCSK will continue to update population and stakeholders on the operation progress. Stories and photographs that depict the situation and response as well as challenges will continue to be shared both locally and internationally on different platforms, including through local mass media, social media, the RCSK and IFRC social media accounts among others. The operation's communications strategy will focus on targeted people, their needs and challenges, as well as on preparedness measures that can help communities to prepare for future outbreaks and epidemics.



Budget Overview



DREF OPERATION

MDRKG018 - Red Crescent Society of Kyrgyzstan Kyrgyzstan Epidemic 2023 (Measles situation)

Operating Budget

Planned Operations	113,742
Shelter and Basic Household Items	0
Livelihoods	0
Multi-purpose Cash	0
Health	89,780
Water, Sanitation & Hygiene	0
Protection, Gender and Inclusion	0
Education	0
Migration	0
Risk Reduction, Climate Adaptation and Recovery	0
Community Engagement and Accountability	23,963
Environmental Sustainability	0
Enabling Approaches	25,375
Coordination and Partnerships	0
Secretariat Services	0
National Society Strengthening	25,375
TOTAL BUDGET	139,117

all amounts in Swiss Francs (CHF)



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