



The Red Crescent Society of Kyrgyzstan (RCSK) is conducting educational activities for parents of under-immunized children on the importance of measles vaccination in Aravan district in Osh region. Photo credit: RCSK.

Appeal: MDRKG018	Total DREF Allocation: CHF 139,117	Crisis Category: Yellow	Hazard: Epidemic
Glide Number: EP-2023-000162-KGZ	People Affected: 80,000 people	People Targeted: 80,000 people	
Event Onset: Slow	Operation Start Date: 2023-08-31	New Operational End Date: 2023-12-31	Total Operating Timeframe: 4 months
Additional Allocation Requested: -		Targeted Areas: Bishkek City, Chuy, Jalal-Abad, Osh, Osh City	

Description of the Event



Map of the targeted areas of the operation.

What happened, where and when?

According to the Republican Center for Immunoprophylaxis (RCI) 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. Later, it has spread to an additional 34 districts in five (5) regions.

As of 13 November 2023, according to the Republican Center for Immunoprophylaxis, 3,618 cases of measles have been detected since the beginning of 2023.

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

- Bishkek city - 1,076 cases,
- Osh city - 333 cases,
- Osh region - 695 cases,
- Batken region - 96 cases,
- Chui region - 562 cases,
- Jalal-Abad region - 650 cases,
- Talas region- 95 cases,
- Issyk-Kul region- 72 cases,
- Naryn region - 39 cases.

In terms of age distribution, 88% or 3,195 cases are children under 10 years old. By vaccination status, 87% or 3,140 cases were unvaccinated for various reasons. Active circulation of measles virus is observed in Bishkek, Jalal-Abad and Chui oblasts, where transmission occurs among unvaccinated children in institutions (schools, kindergartens, etc.). (Source: <https://med.kg/pressCenter/news/eebaed63-4ed7-4e9a-ab1f-18c1851c231b?locale=ru>)

On 30 October, two secondary schools in Jalal-Abad city were closed following the registration of measles cases. The region's

epidemiological services decided to hold educational processes in an online format.

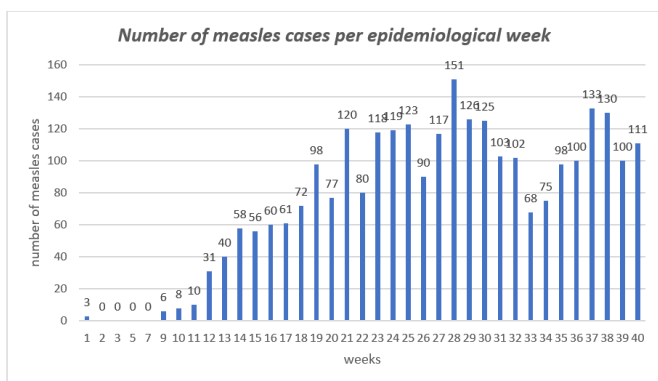
For comparison, 23 cases of measles were reported nationwide in 2022, three (3) cases in 2021 and 733 cases in 2020 in Kyrgyzstan. In 2019, the WHO recognized Kyrgyzstan as a rubella-free country (Source: <https://www.unicef.org/kyrgyzstan/press-releases/european-immunization-week-kyrgyzstan-every-vaccine-dose-matters-protect-you-and>).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

As expected, the number of cases started to rise from September, with the start of the academic year, when all schools and kindergartens reopened. Also, as the temperature is dropping below zero degrees and people are remaining indoors for extended periods of time, the number of cases is increasing. 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).



Number of measles cases per epidemiological week.



Thanks to the joint efforts of RCSK and health authorities, a child with zero dose in Bishkek city is receiving his first vaccination. Photo credit: RCSK.

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.

As of 13 November 2023, according to the Republican Center for Immunoprophylaxis, 3,618 cases of measles have been detected

in 2023. As of 2 November, since the start of the outbreak, in total, three children died from measles in Kyrgyzstan, according to the Republican Immunoprophylaxis Center. The ages of the deceased children are one, four, and 13 years old. (Source: <https://med.kg/pressCenter/news/139badcd-f759-4c96-8f39-8b900a4e4bab>. <https://ru.sputnik.kg/20231102/kyrgyzstan-kor-deti-smert-1080137174.html>).

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, Osh and Jalal-Abad regions, and Osh and Bishkek cities.

Summary of Changes

Are you changing the timeframe of the operation	Yes
Are you changing the operational strategy	No
Are you changing the target population of the operation	Yes
Are you changing the geographical location	Yes
Are you making changes to the budget	No
Is this a request for a second allocation	No
Has the forecasted event materialize?	Yes

Please explain the summary of changes and justification:

To date, approx. 55% of total funding has been spent and, overall, the response activities are on track. However, the epidemiological situation of measles in the country is evolving and new measles hotspots have appeared that require the modification of response activities, and, accordingly, the extension of the operation timeframe with an additional one month, until 31 December 2023.

In order to control the outbreak, the initial government strategy was to conduct the outbreak response immunization in the four most affected locations of the country, namely Osh city, Osh region, Bishkek city, and Chui region. Consequently, the initial response strategy targeted these areas. As a result, between 18 to 29 September, 440,343 children were vaccinated in these areas, which represents 76% of the initial target group (all children from 9 months to 84 months, inclusive). This is far less than the targeted coverage rate, which, as per the World Health Organization's (WHO) recommendation amounts to a coverage of $\geq 95\%$ of two doses of Measles Containing Vaccine (MCV) to assure immune response and interrupt the transmission.

A large number of cases started appearing in other regions, notably in Jalal-Abad region, with 650 cases recorded as of 13 November since the start of the outbreak (latest available data disaggregated by region from the Ministry of Health [MoH]). The 650 cases in Jalal-Abad region represent nearly 1/5 of all measles cases in the country reported up to 13 November. Consequently, the MoH has shifted its immunization focus to Jalal-Abad and immunizing children of the same age group (i.e. from 9 to 84 months) as in other locations, using the remaining vaccine reserves.

Considering the abovementioned developments of the situation, the following changes to the response will be made:

a) Geographical change: In addition to the four original targeted locations, Jalal-Abad is added as a fifth location targeted under this DREF operation. The activities implemented in this location will be the same as in the other four locations and be funded by the budget savings of the operation.

b) Timeframe extension: the operation will be extended by an additional month until 31 December 2023, which will enable the RCSK to finalize the activities in the additional location, Jalal-Abad. In addition, as the original timeline in some aspects of the operational priorities is being delayed due to a lack of digitalized / online systems available for the registration of vaccine refusals by health services, this timeframe extension will allow RCSK to reach this target group as well. The additional HR costs related to this one-month extension are to be covered by RCSK's own resources.

c) Shifting National Society capacities to the newly affected area by reducing the number of volunteers mobilized in Bishkek city by ten (10) and adding ten (10) trained volunteers to the new location (Jalal-Abad city).

Current National Society Actions

Community Engagement And Accountability	RCSK conducted TV and radio broadcasts on the topic of routine immunization, in addition to active informational work which was carried out with caregivers and parents with small children.
Health	<p>The RCSK has two ongoing health-related projects where immunization components are included: the COVID-19 vaccine promotion project, as well as the epidemic and pandemic preparedness component under the EU DG ECHO Programmatic Partnership Project, where the immunization components are included. 75 volunteers from these two projects were mobilized for supporting social mobilization activities during the immunization campaigns.</p> <p>As the situation has evolved, the RCSK adjusted its planned project activities to respond to the increased need for risk communication and vaccine promotion activities.</p>
Coordination	<p>The RCSK' project team is working closely with the Republican Center of Immunoprophylaxis, the main leading agency under the Ministry of Health for immunization, to support the government's 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.</p> <p>In parallel, RCSK is coordinating its risk communication and mass media activities with the Republican Center of Health Promotion (agency under the Ministry of Health). The Republican Center provided technical support in selecting the bloggers who promoted vaccinations among their followers and the larger audience, using social media.</p> <p>In reaching out to families with zero-dose and under-immunized children, RCSK works closely with Center of Family Medicine.</p>

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. It has been decided not to seek additional assistance from the ARC for this campaign.

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	Since the start of the outbreak, 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 been coordinating all activities in response to this outbreak. It set up the operational center under the Ministry of Health of the Kyrgyz Republic to steer and coordinate the response, provide an analysis of the situation and mobilize additional vaccine doses for conducting outbreak response immunization campaigns. With the supply of MMR vaccine doses from the Global Measles & Rubella Partnership (through the UNICEF), the MOH carried out the outbreak response immunization in four most affected locations. As a result, between 18 to 29 September, 440,343 children were vaccinated with MMR vaccine in these areas, which represents 76% of the initial target group (all children from 9 months to 84 months, inclusive). The government's application to GAVI for additional vaccine doses in 2024 is still pending a decision by GAVI. The MOH has also vaccinated 90% of its health workforce with the MMR vaccine.
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. UNICEF supplied the vaccine doses provided by the Global Measles & Rubella Partnership and supporting the RCI with risk communication activities.

Are there major coordination mechanism in place?

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

Needs (Gaps) Identified



Community Engagement And Accountability

While it was widely reported that vaccine hesitation in the country has been growing in the past years, with the number of vaccine refusals averaging 10,000 per year according to the Republican Immunoprophylaxis Centre, the recent reports from the same agency show that the situation is getting much worse. Between January and September of 2023, Kyrgyzstan recorded 17,000 cases of vaccination refusal, according to the Republican Center for Immunoprophylaxis. From these refusals, 47% cited religion as the main reason for refusal (previously up to 70%). Another 49% of people refused due to concerns about the quality and safety of vaccines, mainly in areas where the population is active on social networks; previously this figure was 30%. (Source: <https://privivka.kg/novosti/brifing-v-bishkeke/>)



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.
- 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 is finalizing a perception survey to understand better the people's perceptions of the importance of childhood vaccinations. The results of the study will be available in the first week of December 2023. With the technical support of its partners such as UNICEF, RCI is conducting a root cause analysis of the current outbreak. The results of the analysis will be available towards the end of November and will inform the next steps and strategies of the outbreak response.

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 80,000 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 5 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, Osh region, Jalal-Abad city). 602,000 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 above groups in the selected regions are estimated to be around 800,000. The awareness campaign plans to cover up to 10% of the total group, or 80,000 people.

The selected regions and cities for this operation (Osh, Jalal-Abad and Chu regions and Bishkek and Osh cities) are the most affected regions. Jalal-Abad city is added as the additional, fifth location considering the evolving epidemiological situation.

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 trained Red Crescent volunteers have been supporting the health facilities in digitizing and updating these records, by contacting the families and encouraging them to vaccinate their children.

This intervention prioritizes targeting the parents and caregivers of zero-dose and under-immunized children aged 9 to 84 months (under 8 years) with tailored messages to address their vaccine hesitations and provide accurate information on childhood vaccines.

Total Targeted Population

Women	61,000	Rural	-
Girls (under 18)	-	Urban	-
Men	19,000	People with disabilities (estimated)	-
Boys (under 18)	-		
Total targeted population	80,000		

Risk and Security Considerations

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

Risk	Mitigation action
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.
Major political unrest and escalation of the armed conflict in border areas. Some of the targeted regions for this operation (Osh region and Jalal-Abad City) are 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.

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



National Society Strengthening

Budget: CHF 36,292

Targeted Persons: 155

Indicators

Title	Target	Actual
Number of lessons learned workshops held	1	-
Number of RCSK staff and volunteers involved in the operation	154	155
Number of volunteers insured	-	-

Progress Towards Outcome

Staff selected to support the timely and effective implementation of the DREF operation:

- one (1) Operations Manager (100%);
- two (2) Field Officers (100%);
- one (1) Financial Manager (50%);
- one (4) Consultant (HQ) (35%).

- 150 active volunteers have been selected in Bishkek city, Osh, and Chui oblasts, including a mix of newly recruited volunteers and volunteers previously involved in RCSK activities.
- During the vaccination campaign, which took place from September 18 to 29, the RCSK's officer in charge of this operation participated in the activities together with volunteers.
- On 25 October, a monitoring visit was conducted at the Chui branch. During this visit, a focus group was held with volunteers, where they shared the challenges they faced and the successes achieved in the implementation of DREF activities. Additionally, a meeting was held with immunologists who presented the outcomes of their collaborative work with RCSK.
- On 19 October, the Operations Coordinator conducted monitoring visits with volunteers to settlements in Bishkek where significant target groups reside.



Health

Budget: CHF 78,862

Targeted Persons: 80,000

Indicators

Title	Target	Actual
Percentage of zero -dose children aged 9-84 months who have been vaccinated after their caregivers received information	10	7

sessions by RCSK		
Number of people reached through social mobilization for vaccination campaign	70,000	44,507
Number of Red Crescent volunteers who have been deployed for outbreak response	150	150

Progress Towards Outcome

Progress in September - October 2023:

1. With the participation of specialists from the Republican Center for Immunoprophylaxis and local family medicine centers, trainings on routine vaccination were conducted for 130 volunteers from Chui and Osh oblasts and Bishkek city (Chui oblast - 50, Osh oblast & Osh city - 50 and Bishkek city - 30 volunteers). Following the training, the volunteers started participating in the main activities of the operation.
2. 150 volunteers conducted information sessions on vaccination among the population and assisted medical workers at vaccination points. They actively participated in the vaccination campaign from 18 to 29 September 2023, organized by the Republican Center for Immunoprophylaxis. Volunteers offered psychological first aid to children before and after vaccination procedures and assisted the vaccinators with simple tasks such as organizing queues, entering patient data into the database and others.
3. As part of social mobilization activities for immunization, 44,507 people were reached, including hesitant parents, refusers of vaccination, community leaders, religious communities, and parents of children attending kindergartens. Active caregivers were selected to inform their peers in the parent networks on social media about the importance of vaccinating their children against measles.
4. Large-scale vaccination activities were conducted among parents and children in Bishkek city, Osh and Chui oblasts. These activities were conducted in kindergartens and elementary schools, especially those with the lowest measles vaccination rates. Specialists from family medicine centers have educated parents about the dangers of measles, how it is transmitted, and how it can affect their children later in life. Animators were also involved using games to teach children about vaccinations, measles and how not to be afraid of doctors who give vaccinations.
5. The trained volunteers also actively reached out to parents and care givers of children with zero- or partial doses, encouraging them to vaccinate their children as a part of the outbreak response immunization. There is no centralized or digitalized database of all vaccine refusal forms completed by these parents and the records are kept at the facility level in medical journals. The volunteers spent a lot of time digitizing these records, establishing or updating these records, following up with these families to encourage them to vaccinate their children.

During the two-month implementation, a total of 197 children from this category received vaccinations in Bishkek, Chui, and Osh oblasts, representing on average 6% of all those who have been approached from this group by RCSK volunteers individually. While the numbers may look small, this is a significant achievement, considering that precisely the zero-dose children are at the highest risk of deaths and complications if they get sick with measles. The volunteers had to reach out to these families multiple times through different channels, visit them at their homes and conduct information sessions, and accompany them to vaccination points where it was needed. These children started receiving their first vaccinations in their lives, and, hopefully, their parents and guardians will continue with this practice for other vaccinations.



Community Engagement And Accountability

Budget: CHF 23,963

Targeted Persons: 20,000

Indicators

Title	Target	Actual
Number of community perception and feedback reports produced on a monthly basis	3	1
Number of people reached with RCCE activities	20,000	6,785
Number of IEC materials distributed	-	1

Progress Towards Outcome

1. A mechanism has been developed for field officers and volunteers to keep records and collect information in order to receive timely information on activities, maintain better communication, and see any existing problems at an early stage. Volunteers are constantly given feedback in offline meetings and also in discussions in the group on WhatsApp, where they constantly share information about the work done, what difficulties they face during the activities, and how they solve these difficulties.

2. As part of the routine vaccination training, volunteers were also trained on the Community Engagement and Accountability (CEA) component. The training covered what CEA is, why community engagement and ownership is important for epidemic and pandemic preparedness and response, communication risks, and how to provide feedback to the community.

3. A mechanism for volunteers to receive feedback from the population (questionnaire) in KOBO has been developed. In the future, this questionnaire will be used by volunteers in their activities. To ensure that volunteers who cannot use KOBO, a print version of the questionnaire was also prepared.

4. In order to better work with the media, close coordination has been established with the press service of the Ministry of Health, who, in turn, will assist RCSR with producing articles, radio broadcasts and live broadcasts on local TV channels on the topic of vaccination in order to reach the population with essential and accurate information.

5. An information campaign is currently underway among bloggers who post about measles outbreaks on their Instagram pages. Ten bloggers who have been vetted by RCSR as the most trusted by their communities and who themselves adhere to vaccination (for example, vaccinated their children against measles already) have been recruited to participate in the campaign. Their Instagram stories include information about vaccination sites, who to contact with questions, and how to protect children from this highly contagious disease. While not all ten bloggers have started their awareness campaign yet, according to the media plan, they will be posting stories on Instagram in November.

- RCSR has established a partnership with the media. As such, the media outlets post informative and promotional articles about measles, share updates on the disease's spread, and promote RCSR's activities on their Instagram, Facebook, and TikTok accounts, as well as general news sites and radio.

- Joint press release by the IFRC and RCSR was published on both of their official websites, which can be accessed through the below links:

-- IFRC: <https://www.ifrc.org/article/measles-crisis-kyrgyzstan-red-crescent-volunteers-take-lead>

-- RCSR: <https://www.redcrescent.kg/ru/press-center/news/novosti/krasnyy-polumesyats-podderzhivaet-kampaniyu-po-immunizatsii-po-borbe-s-koryu-v-kyrgyzstane/>

About Support Services

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

150 volunteers and four (4) staff of the RCSR are involved in this operation. The volunteers support social mobilization during the immunization campaigns and educate 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 DG 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?

RCSK has been conducting procurement of items as per their own procurement regulations, in adherence with IFRC' procurement standards and procedures.

How will this operation be monitored?

Monitoring and evaluation are an integral part of the operation and are carried out involving the assisted people and other stakeholders utilizing participatory approaches throughout the operation's timeframe. Regular internal monthly operation updates are developed by the project team and shared with the IFRC Regional Office for Europe.

Meetings with key stakeholders and field visits are done on a regular basis to monitor the implementation progress.

RCSK is planning to organize its 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 are 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

RCSK has utilized social media throughout the operation to show the impact of actions undertaken by the National Society in this project. One example is the story of Adina, mother of four small children: https://www.instagram.com/reel/Cyh6esZl2z_/?igshid=MzRIODBiNWFIZA%3D%3D

The media outlets have amplified the posts promoting the RCSK's activities on their Instagram, Facebook, and TikTok accounts (RCSK: https://www.instagram.com/reel/Cyh6esZl2z_/?igshid=MzRIODBiNWFIZA%3D%3D).

IFRC and RCSK released a joint press release on both of their official websites

(IFRC: <https://www.ifrc.org/article/measles-crisis-kyrgyzstan-red-crescent-volunteers-take-lead>;

RCSK: <https://www.redcrescent.kg/ru/press-center/news/novosti/krasnyy-polumesyats-podderzhivaet-kampaniyu-po-immunizatsii-po-borbe-s-koryu-v-kyrgyzstane/>).



DREF OPERATION

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

Operating Budget

Planned Operations	102,825
Shelter and Basic Household Items	0
Livelihoods	0
Multi-purpose Cash	0
Health	78,862
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	36,292
Coordination and Partnerships	0
Secretariat Services	0
National Society Strengthening	36,292
TOTAL BUDGET	139,117

all amounts in Swiss Francs (CHF)

Contact Information

For further information, specifically related to this operation please contact:

National Society contact: Ekaterina Orekhova, Coordinator, e.orekhova@redcrescent.kg, +996779894599

IFRC Appeal Manager: Seval Guzelkilinc, Head of Country Cluster Delegation for Central Asia, seval.guzelkilinc@ifrc.org

IFRC Project Manager: Nurlan Jumaliev, Programme Manager, nurlan.jumaliev@ifrc.org

IFRC focal point for the emergency:

Oyungerel Amгаа, Health Manager for Central Asia, oyungerel.amgaa@ifrc.org, + 996 700 55 88 30

Media Contact: Corrie Butler, Regional Communications Manager, corrie.butler@ifrc.org

[Click here for the reference](#)