

Annual report

 International Federation
of Red Cross and Red Crescent Societies

Chernobyl Humanitarian Assistance and Rehabilitation Programme (CHARP)

Appeal No. MAA67002
30 April 2011

This report covers the period from 1 January 2010 to 31 December 2010



BELARUS: Doctor of Brest MDL screens thyroid gland of a woman living in Chernobyl affected area. **Belarus Red Cross**

In brief

Programme outcome: Effective medical, social and psychological assistance is provided to targeted individuals in the regions affected by the Chernobyl nuclear disaster.

Programme(s) summary: During 2010, CHARP continued to provide general medical, social and psychological assistance in the six regions of Belarus, Ukraine and Russia affected by the Chernobyl disaster. The main focus was on thyroid cancer screening in the priority group of people who were aged between 0 and 40 at the time of the Chernobyl accident and live in radiation contaminated areas. The Red Cross mobile diagnostics laboratory teams (MDL) screened 104,049 patients out of which 46 per cent were screened for the first time. Totally 49,409 cases of thyroid pathologies, 47 per cent of all screened, were detected. This fact alone shows that CHARP is providing a vital, life-saving service. Totally 16,468 patients suspected of having different types of thyroid gland cancer were referred to specialised medical institutions. Suspected thyroid cancer cases were confirmed in 189 patients.

The important impact of CHARP activities was provided via psychosocial support focused on diminishing stress and anxiety in the population by delivering accurate information about the long-term consequences of the disaster. Some 32,600 people received psychosocial support from CHARP. At the end of 2010 were supplied over 607,000 tabs of multivitamins to be distributed to children in winter time.

Financial situation: The total 2010 budget is CHF 512,163, of which 93 per cent covered. Expenditure was CHF 424,479. Expenditure against budget was 83 per cent and expenditure against funding was 89 per cent. In 2010 the programme received contributions from the Irish government, the Japanese Red Cross and the Austrian Red Cross.

[Click here to go directly to the financial report.](#)

See also [Chernobyl Humanitarian Assistance and Rehabilitation Programme \(CHARP\) Cross-country Plan 2010-2011](#)

No. of people we help: According to reports from the Red Cross Societies of Belarus, Ukraine and Russia in the period from January to December 2010 about 136,650 people have benefited

directly from CHARP interventions as follows:

- Thyroid gland and breast screening: 89,731 and 14,318 people respectively
- Psychosocial support: 32,600 people

Our partners: CHARP is being implemented by the International Federation of Red Cross and Red Crescent Societies (IFRC) together with the Red Cross Societies of Belarus, Russia and Ukraine in close cooperation with the ministries of health of all three countries.

Context

In 2011 the international community commemorates the 25th anniversary of the Chernobyl accident which led to extensive relocation of people, loss of economic stability, and long-term threats to physical and mental health in current and possibly future generations. In total about seven million people are living in radiation polluted territories. Feelings of worry and confusion, as well as a lack of physical and emotional well-being are still commonplace. Taking into account the limited capacity of the primary health care system in rural areas, International Federation of Red Cross and Red Crescent Societies together with the national Red Cross societies of Belarus, Ukraine and Russia continue implementing the long-term Chernobyl Humanitarian Assistance and Rehabilitation Programme (CHARP). The programme has been implemented since 1990.

The main focus is on providing thyroid health screening and psychological support to the affected population in order to reduce and mitigate the impact of the disaster. The programme activities aimed at identifying thyroid gland cancer and other thyroid pathologies as early as possible among people in the most remote areas. In addition to thyroid screening, laboratory doctors diagnosed and treated other ailments upon receiving patient requests or based on the results of clinical tests, conducted breast screening, carried out HIV preventing activities and provided psychosocial support. These services were rendered by six mobile diagnostic laboratories (MDL), three of which are situated in the Brest, Gomel and Mogilev regions of Belarus, two in Rovno and Zhitomir regions of Ukraine and one in the Bryansk region of the Russian Federation.

The President of Japanese Red Cross and IFRC Tadateru Konoe took part in international meeting of heads of 12 national Red Cross and Red Crescent Societies of Azerbaijan, Belarus, Armenia, Georgia, Kazakhstan, Kyrgyzstan, Moldova, Russian Federation, Turkmenistan, Tajikistan, Ukraine and Uzbekistan which took place in Kiev on 20-21 October 2010 hosting by Ukraine Red Cross. The President visited Chernobyl museum in Kiev and got acquainted with work of Red Cross mobile diagnostics laboratory operating within CHARP. The President met with the Speaker of Ukrainian Parliament and Deputy-Head of Ukraine President's Administration. These officials have invited Tadateru Konoe to take part in the international conference on Chernobyl to be held on initiative of President of Ukraine for commemorating 25th anniversary of Chernobyl disaster in Kiev in April 2011.

In the reporting period the IFRC, as a member of the UN Inter-Agency Task Force (IATF) for Chernobyl-related issues took part in preparing the UN Secretary-General's report on Chernobyl for the 65 Session of the UN General Assembly held in November 2010. The report provided a record of the major activities undertaken within three years since the issue of the last report in 2007 including examining what has been achieved, what fell short, and what challenges lie ahead. The report of the Secretary General served as the foundation for the General Assembly's resolution on Chernobyl.

¹ This type of cancer is caused by the thyroid gland taking up large quantities of radioactive iodine-131. Iodine-131 leads to pathological cell modifications in this organ. This process is exacerbated in areas - such as Belarus, southwest Russia and Ukraine - where iodine deficiency is endemic.

² <http://www.who.int/mediacentre/factsheets/fs303/en/index.html>

³ Thyroid gland is a gland (= an organ) in the front of the neck which is involved in controlling the way the body develops and works. Definition of thyroid (gland) from the Cambridge Advanced Learner's Dictionary. <http://dictionary.cambridge.org/dictionary/british/thyroid-gland>

Progress towards outcomes

Programme purpose: **Effective medical, social and psychological assistance is provided to targeted individuals in the regions affected by the Chernobyl nuclear disaster.**

Component outcome 1: Six mobile diagnostic laboratories have screened 90,000 people for thyroid gland pathologies in the target group of individuals who were 40 years old or younger at the time of the accident and living in contaminated areas.

During 2010, the specialists of six mobile diagnostics laboratories (MDL) working within CHARP screened 104,049 people (annual plan was 90,000 people). Examined persons were aged 0 to 40 at the time of the accident and living in remote contaminated areas. Many people living in those areas have not been screened recently or were not screened at all in the past. Therefore about 46 per cent of those examined were screened for the first time since the disaster.

Among the people screened, mobile medical team specialists detected 49,409 cases of abnormal thyroid scans, i.e. pathologies. This means that about 47 per cent of all screened people have pathologies of the thyroid gland in various stages of development. The three primary thyroid pathologies detected by the medical teams were nodular pathology (19,382 cases or about 39% of all pathologies), diffuse goitre (15,405 cases, or about 31% of all pathologies) and thyroiditis (8,033 cases, or about 16% of all cases). The patients diagnosed with these pathologies are under constant monitoring by Red Cross mobile teams because if left undiagnosed or untreated, there is a risk that these conditions may develop into thyroid cancer.

Totally 16,468 patients suspected of having different types of thyroid gland cancer were referred to specialised medical institutions for in-depth examination and surgery if needed. Suspected thyroid cancer cases were confirmed in 189 patients by cytological examinations; information on these cases was provided by clinics to the Red Cross. These patients have received necessary treatment and are also being monitored by the mobile teams and health care institutions.

In accordance with the updated concept of CHARP those women who had been diagnosed with thyroid nodular pathologies also passed through breast screening. Of 14,318 examined women living in the remote areas 89 per cent were screened for the first time. While conducting breast screening, in addition to examining patients women were also taught how to do self-examinations. Moreover the teams provided HIV counselling to the target group and helped the National Societies organize HIV activities such as peer education and information dissemination.

Component outcome 2: Stress and anxiety linked to radiation is reduced for 30,000 people through psychosocial support.

The important impact of CHARP activities was provided via psychosocial support focused on diminishing stress and anxiety in the population by delivering accurate information about the long-term consequences of the disaster. Through psychological assistance to residents of contaminated remote areas the Red Cross workers helped the population to reduce their risks of radiation exposure and manage stress. These efforts are contributing to healthier lifestyles, combating alcohol and drug abuse as well as risky sexual behaviour.

At the end of 2010, the National Societies of Belarus and Russia organised psychosocial workshops for the mobile medical teams and Red Cross staff and volunteers on methods and tools for providing psychosocial assistance to the victims of Chernobyl disaster. The knowledge obtained at these workshops helped the Red Cross workers and volunteers to better inform the population of the consequences of Chernobyl accident and how to deal with these issues.

In addition, the medical team doctors and Red Cross staff distributed leaflets, gave interviews on local radio highlighting the consequences of the accident, explaining preventive measures against stress and related diseases and social problems, and ways how to cope with crisis situations. In result about 32,600 people received psychosocial support from CHARP.

Component outcome 3: Immunity is improved for 30,000 children living in highly contaminated areas through winter supplies of multivitamins containing the C, D and B groups with iron, folic acid and stable iodine.

Part of the current Japanese Red Cross donation was used for supplying multivitamins containing C, D and B group with iron, folic acid and stable iodine in order to strengthen immunity system of children living in radiation contaminated areas.

That was provided with assistance of Federation's logistics service in Geneva which supplied in November 2010, some 157,500 tabs of multivitamins to Belarus Red Cross and 150,000 tabs to Ukraine Red Cross. Russian Red Cross arranged local procurement of 300,000 tabs because it had been problematic to deliver the consignment from Europe to Bryansk Region.

The National Societies provided the distribution of multivitamins among children in period of March-April months. These are the months when the lack of vitamins in the natural food products is highest. The multivitamins are being distributed by regional/district Red Cross organisations, Red Cross MDLs, volunteers in children institutions: schools, kindergartens, children hospitals etc.

In particular, in Belarus the distribution of multivitamins was provided in Brest Region (Luninets district), in Gomel Region (Bragin and Gomel districts), Mogilev Region (Bykhov, Slavgorod, Cherikov, Krichev, Klimovichi, Chausy district and in Dribin town).

In Bryansk Region (Russian Federation) the multivitamins were distributed in Novozybkov district highly affected by the Chernobyl disaster (contaminated by caesium 137 with density 15 Ci/km²). With assistance of Red Cross activists the vitamins were handed to children and adolescents in kindergartens and schools in the course of prophylactic medical examinations provided annually by local health authorities.

Constraints or Challenges

The main constraint for programme implementation was lack of funding. In particular from January to March there was no response to the CHARP plan for 2010. Therefore IFRC actively sought the necessary funds. As a result from April to June the programme received donations from the Irish government, the Japanese Red Cross and the Austrian Red Cross. This support ensured a successful implementation of the programme. In addition the Irish government also pledged to allocate around CHF 247,000 for 2011. Together with traditional annual support from the Japanese Red Cross this makes a good basis for programme implementation for next year.

Working in partnership

The new CHARP funding strategy adopted in 2009 envisages that the National Societies will seek possibilities to increase local contributions. To reach this goal, the Belarus Red Cross held successful negotiations with the Japanese embassy in Minsk that resulted in donation of around USD 96,000 earmarked for purchasing equipment for mobile medical teams. The Belarus Red Cross arranged procuring equipment such as ultrasound scanners, and blood and urine analyzers. After the Ukraine Red Cross approached the Japanese embassy in Kiev the latter considers supporting CHARP but only in 2011.

A high ranking delegation from the Austrian Red Cross visited Belarus in June. The delegation got acquainted with CHARP activities in Brest region. The visit resulted in the Austrian Red Cross donating around CHF 83,100 earmarked for blood testing. In particular part of this funds have been spent by NSs for supplying equipment and reagents for testing sugar diabetes.

Another visit of Austrian Red Cross delegation to Ukraine and Belarus took place on 29 November – 3 December. The main purpose of this visit was highlighting Chernobyl-related activities of Red Cross in view of upcoming 25th anniversary of Chernobyl disaster (26 April 2011). The delegation consisted of three chief of departments of Austrian Red Cross, Austrian TV team and journalists of three leading Austrian newspapers (10 people altogether). The delegation visited Chernobyl

museum in Kiev and Chernobyl nuclear power plant. A round table meeting was held at Ukraine Red Cross headquarters with participation of four liquidators of Chernobyl disaster and President of Ukraine Red Cross. The correspondents went to the field and got familiarised with work of mobile diagnostic laboratory (MDL) operating within Red Cross Chernobyl Humanitarian Assistance and Rehabilitation Programme (CHARP), filmed and interviewed MDL team, its patients, local population affected by Chernobyl disaster.

As it mentioned above IFRC is a member of the UN interagency task force for Chernobyl. Since its launch CHARP has maintained cooperation with several international agencies, including WHO, UNICEF, UNDP and several NGOs. At present IFRC together with these agencies are implementing the UN Action Plan on Chernobyl for the third decade after the disaster until 2016.

Contributing to longer-term impact

On 31st September 2010 the next annual meeting of the International Chernobyl Coordination Committee (ICCC) was held in Mogilev (Belarus), at HQ of Regional Red Cross Committee. The ICCC is overall coordinative body of the programme, composed of the presidents of the Ukraine and Russian Red Cross, the Secretary General of Belarus Red Cross, and the head of IFRC country representation. One of most important issues discussed was providing sustainability for the programme. The Committee has considered ways of possible mobilizing further support to CHARP from the international community and how to more actively increase local input. The ICCC took a decision to include into CHARP a mobile diagnostics laboratory created by Ukraine RC in Volyn Region with support of German Red Cross. Therefore starting from 2011 CHARP will include seven MDLs (3 labs in Belarus, 3 – in Ukraine and 1 – in Bryansk Region of Russia).

In the connection with 25th anniversary of Chernobyl disaster the IFRC and National Societies will organise a number of events. In particular a regional CHARP round-table meeting is to be held in April 2011. It is planned to issue a printed material about CHARP. It is supposed that numerous mass media (local and international) will highlight Red Cross Chernobyl-related activities. IFRC will take part in the international conference on Chernobyl to be held on initiative of President of Ukraine for commemorating 25th anniversary of Chernobyl disaster in Kiev in April 2011.

Looking ahead

In conformity with the above mentioned UN Action Plan it is foreseen that in the years to come the core activities will remain thyroid cancer screening and psychosocial support. Along with this the Red Cross MDLs will provide screening for breast cancer. In addition the CHARP framework will include HIV and AIDS preventive activities. Even though this disease is not directly linked with the health consequences of the Chernobyl disaster, unhealthy lifestyles are a direct result of the stigma attached with living in the affected areas. HIV rates are rising, particularly in the small towns in Ukraine and Belarus. Working in rural areas the MDL teams can give people important information on HIV and carry out necessary blood testing. This would be a significant support to help the National Societies implement their HIV projects.

One of most important issues will be providing sustainability for the programme. At present the main donors of CHARP remain the Irish Government and the Japanese Red Cross. The International Federation will also approach partner societies and other possible donors for further support to this important programme. In order to provide sustainability, the CHARP strategy also envisages handing over more programme responsibilities to the National Red Cross Societies and gradually integrating the activities into their respective healthcare systems. Although this was a priority for 2010, however due to the fact that Belarus, Ukraine (especially) and Russian Federation have been severely hit by the global financial and economic crises, realistically the programme can not be fully handed over to local governments yet.

How we work

All Federation assistance seeks to adhere to the [Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations \(NGO's\) in Disaster Relief](#) and is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering assistance to the most vulnerable

The IFRC's vision is to:

Inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.

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