Health Action
– in the North Caucasus

NEWSLETTER ON EMERGENCY PREPAREDNESS AND RESPONSE, APRIL/MAY 2002

On 29 May 2002, the governments of Chechnya and Ingushetia endorsed a programme for the return of internally displaced persons (IDPs) from Ingushetia to Chechnya. It includes several measures to create the proper facilities and will last for several months. The programme implies the provision of safe passage and employment for returnees. Plans call for the creation of ten centres of temporary accommodation of IDPs in Grozny by the end of the summer and the dismantling of tent camps in Ingushetia.

Workshop on health reporting and outpatient treatment

On 14 May, WHO held a workshop in Nazran, Ingushetia, entitled “Standardized health reporting policy and provision of treatment in outpatient practice”. Topics included the basic principles and problems of medical statistics, PHC classifications and their role in clinical epidemiology, the assessment of drug supply needs and the UNICEF policy for procuring and supplying essential drugs.

The workshop was a part of promotion of WHO’s concept of the rational use of essential drugs. Its goal was to improve the republican PHC system and emergency humanitarian medical relief in the North Caucasus. It was designed for personnel from NGOs and international agencies who run health care projects in the region, particularly projects that provide medicines. Nineteen participants attended the workshop, including medical coordinators from 16 organizations, including RI MoH, UNICEF, UNHCR, MSF–F, MSF–H, MDM, Islamic Relief and World Vision.

By the end of the day, several major suggestions emerged on ways to improve existing practice:

- Ministries of health and NGOs need to hire personnel with statistical backgrounds and to train existing staff in medical statistics, which remains one of the weakest points in health care management by these organizations.
- Regular provision and exchange of information (submitted on standard reporting forms and later analysed by qualified professionals) is needed to bring overall medical statistics into conformity with the templates in both Ingushetia and Chechnya.
- A revised outpatient statistical card, convenient for both MoH and NGO use and based on existing Russian Federation MoH recommendations, should be developed as soon as possible. Several NGOs should test a draft of this card in PHC practice before its widespread introduction.

Medical staff should be trained to use a standard approach in calculating medicinal needs and rational use of drugs. The existing prescription practices of MoH and NGO physicians should also be monitored.

IMC course in child development and evaluation

On 10–12 April 2002, International Medical Corps (IMC) held a child development course for its staff in Nazran. The sessions were conducted by a trainer from the Centre for infants’ follow-up under the Moscow Research Institute of Paediatrics and Child Surgery. Thirty-two doctors and nurses participated in the training, which covered three topics:

1. stages of psychomotor development in children under five;
2. methods of assessing psychomotor development with evaluation scales; and
3. physical development of children under five.

The participants were asked to answer a number of questions on the course topics beforehand. While many questions did not cause any difficulty, the participants had problems answering others. The exercise showed that about 90% of the participants were familiar with the standards and methods of child development evaluation as well as with the causes leading to delays in physical development. However, it also revealed that 80–85% of the participants encountered difficulties in evaluating the physical development of the newborn. These problems were thoroughly discussed during the course, and specific clinical cases were analysed. The final tests showed that the majority of participants successfully mastered the training material.

**IMC training in infant nutrition**

From 6 to 8 May 2002, IMC held a three-day training course in Nazran on infant nutrition, attended by 33 participants.

The course included pre-training and post-training tests to assess the participants’ knowledge. The test results identified specific topics that the participants had difficulty with:

- hormonal regulation of lactation;
- supporting breastfeeding women and building up their confidence;
- contraindications to breastfeeding;
- energy requirements for breast-milk supplements;
- nutrition of low-weight and sick babies;
- treatment of iron deficiency in infants.

All topics were discussed thoroughly, and specific cases were analysed.

One training exercise was the development of leaflets for mothers on the healthy nutrition of infants. In creating the leaflets, the participants displayed much creativity and did a good job of summarizing and presenting the course material. The final test demonstrated that the IMC medical professionals increased their mastery of the training topics from 74.6% to 98.4%, indicating a high level of training efficiency.

IMC has also initiated PHC training for its 12 medical personnel and 3 MoH representatives, who will participate one week each month for six months. The first session was held 20–24 May in Nazran, and the second is scheduled there for 17–21 June. The main objective of the training is to teach and properly certify family physicians. The training is being conducted in cooperation with the Department of Family Physicians of the Moscow Medical Academy.

**Other courses**

Training for neonatologists, gynaecologists, obstetricians and obstetric nurses from state medical institutions in Chechnya and Ingushetia was held in Moscow on 22–26 April 2002. The WHO/UNFPA course on essential newborn care and breastfeeding was facilitated by the WHO Child Health Development (CHD) programme Coordinator and the Chief Neonatologist of the Russian Federation MoH, and held on the premises and with the support of the Moscow Research Institute of Paediatrics and Child Surgery. Eleven medical specialists from Ingushetia and five from Chechnya attended. The course was the second in a series conducted as part of the joint WHO/UNFPA education project; the first course was held in August 2000 in Stavropol.

In Nazran, on 18 April 2002, MSF–H conducted its third course on the needs-based supply system for head doctors and nurses from medical facilities they support in Ingushetia. The first two training courses were held on 26 March for the Nazranovski district and on 28 March for the Sunzhenski district. The training on 18 April was for personnel from Malgobeck district and Karaboulak. The purpose was to explain how the needs-based supply system functions, how the stock needs to be managed, how to gauge monthly consumption, etc. It also reinforced understanding and collaboration between MSF–H and MoH staff. In all, 37 participants were trained, 18 from Nazranovski, 9 from Sunzhen- ski, 3 from Karaboulak and 7 from Malgobeck.
Demography
According to the latest DRC/ASF survey data as of 30/04/2002, the number of IDPs staying in Ingushetia is 139,556 persons. Vulnerable IDPs: pregnant and nursing women, children under one year old, children under three years old, invalids, elderly without adequate support, orphans, half-orphans and people fully dependant on humanitarian assistance total 24,446.

Health facilities
The Ingushetian Republican Centre for HIV/AIDS Prevention and Control was founded in 1996. The main activities of the centre are the clinical and laboratory diagnosis of HIV, epidemiology monitoring and HIV control.

The centre registered 8 new cases of HIV infection in 1999 and 58 in 2000. Since the beginning of 2002, 42 new cases of HIV infection have been registered in the Republic of Ingushetia. There are now 272 HIV-infected patients in the republic. The increase in infected patients is attributable to the growth of intravenous drug use in Ingushetia, as 95% of the registered cases are active drug users.

An immunology lab was set up in the centre at the end of 2000. At present it is not operational, due to a lack of testing equipment and reagents. The full set of equipment was supposed to be purchased as part of the local budget, but the funds have yet to be allocated. The cost of the needed equipment is approximately US $5000. This laboratory equipment would allow the determination of CD4 and CD8 cell counts in infected patients. HIV evaluation and the prescription of antiretroviral drugs are impossible without such counts.

The centre’s inability to determine HIV status is one of the main reasons the federal government has refused to allocate free antiretroviral drugs to Ingushetia. Due to funding limitations, the AIDS centre cannot purchase these drugs itself.

On the other hand, the PCR ( polymerase chain reaction) lab is fully equipped and staffed with well-qualified personnel. The lab can diagnose the following infections: chlamydiosis, mycoplasmosis, ureaplasmosis, cytomegalovirus and toxoplasmosis.

The centre needs two testing systems (Hoffmann–La Roche) per year to be able to detect HIV blood concentration. The purchase of these systems would enable the centre to carry out the quantitative detection of HIV RNA.

A full assessment of the HIV situation in the region will be conducted by WHO and IOM experts at the end of June to determine not only medical and equipment needs, but also the best social and educational approach to prevention in the region.

AIDS center building in Nazran
HIV/AIDS

In 2001, the HIV situation in North Ossetia continued to worsened, with 89 new cases of HIV infection in the republic. This total is 2.1 times the number in 2000. An additional 10 residents of North Ossetia were diagnosed as HIV-positive in other regions of the Russian Federation. Seven HIV deaths were registered in 2001.

The total number of registered HIV cases for the observation period was 168 cases. Currently, there are a total of 104 HIV cases registered at local dispensaries, including residents who have moved to other regions. Due to the absence of antiretroviral therapy, dispensary patients receive only symptomatic medical treatment.

Tuberculosis

In May, 216 patients received treatment as part of the joint WHO/RF MoH/RI MoH TB Control and Prevention Programme in Ingushetia. During the last two months, implementation proceeded as follows:

- WHO staff visited all districts of the republic and discovered that almost all medical personnel understand the registration rules and follow WHO treatment recommendations. The laboratories have started to identify TB cases by means of smear analysis with Ziehl-Nielsen staining. However, the lack of containers for smear collection restricts further progress.
- Visits to health posts and FAPs revealed that the staff of outpatient clinics and FAPs are well prepared to carry out the continuation phase of treatment.
- Anti-TB drugs have begun to be delivered to FAPs, and the first patients began to receive continuation treatment under medical supervision.
- Control visits to IDP camps confirmed that the continuation treatment is being provided by the health posts there as well, and district TB doctors started visiting IDP camps on a weekly basis using vehicles provided by WHO.

From 26 to 31 May 2002, two WHO experts paid a regular supervisory visit to Ingushetia to review programme implementation. The major task of the visit was to monitor key programme activities (diagnosis, reporting and treatment) and to evaluate the ongoing programme by reviewing and interpreting epidemiological indicators. In order to ensure the efficacy of diagnostics via direct sputum microscopy, the experts reassessed laboratory needs for personnel, equipment, and training for laboratory staff. Drug needs and reserve stock were also reviewed and medicines in short supply noted.

On 27 May, WHO experts met with the RI Minister of Health, who affirmed the new republican government's interest in further implementation of the TB programme and guaranteed continued support. On 31 May, the Minister of Health chaired a special coordination meeting with the head doctors of the republic's largest hospitals to discuss problems in developing the programme further.

A purchase of ten additional prefabricated modules has been initiated to supplement the capacity of the republic's TB dispensary.

Health assistance

- The ACDM Zaschita mobile medical unit has been providing medical assistance to the population of the Bela, Satsita, Sputnik, Alina and Bart camps in the Sunzheński district. The mobile team, staffed by a general practitioner and a surgeon, visits these camps daily.
- UNICEF growth charts continue to be distributed, in collaboration with WHO field staff, to the NGOs working with children's preventive health care programmes. The charts are used to record growth and development. Each child is weighed regularly and the weights are then plotted on a graph, providing a picture of the child's growth pattern and allowing for earlier intervention if the child's growth slows.

EPI

The Republic of Ingushetia MoH reports that it lacks a number of vaccines required to immunize the resident population of Ingushetia, as well as the Chechen IDP population, against TB, tetanus and other diseases.

A UNICEF assessment of the cold-chain situation in Ingushetia, conducted at the request of the RI
MoH, showed that 25–30 units of cold-chain equipment are needed in addition to the 55 already distributed, in order to maintain vaccine safety in the republic’s medical institutions.

Two IMC mobile medical units responsible for the immunization programme cover 35 spontaneous settlements in the republic and provide services through 10 immunization rooms located in medical institutions of Sunzha and Nazran districts. Of all the children whose vaccination status was identified as not complying with their age, over 80% were immunized. One of the main problems the programme faces is that children change residence often.

The Saudi Red Crescent Society, in cooperation with Sunzha District Polyclinic, vaccinated for polio in the IDP camp Satsita. The vaccination was carried out as part of the vaccination programme conducted by RI MoH.

**Mental health**

The regular mental health coordination meeting was held by WHO in Nazran on 29 May 2002. Twelve NGOs from Ingushetia and Chechnya participated. WHO outlined its plans for the coming summer:

- Courses will be held on stress relief for medical doctors and nurses from Ingushetian and Chechen NGOs (the tentative dates are 29 July–2 August).
- There will be further distribution of recreational materials, sports equipment and games to psychosocial rehabilitation centres.
- IDP children’s festivals in Ingushetia and Chechnya will be jointly sponsored by WHO and UNICEF. One festival will be held in Camp A in Ingushetia on 13 July 2002, with 60 IDP children coming from psychosocial rehabilitation centres across Ingushetia to take part. Two other July festivals will take place in Chechnya: in Znamenskoe and Grozny.

WHO also reported the signing of two new contracts with PINF and SERLO, its implementing partners in the psychosocial rehabilitation sector.

MDM informed the meeting of the opening of a youth centre in Camp Sputnik for adolescents 15–25 years old, with classes in health education for specific age groups and various cultural, art and sports activities. Special attention will be paid to the psychological problems of adolescents.

In addition to its psychosocial work with children, ARD has extended its work with adolescents beyond the frame of its vocational programme. To give them an opportunity to develop their creativity and talents, adolescents will now be taught painting and other skills, as well as sports and dancing.

The DRC psychosocial rehabilitation centre in Camp A opened an indoor sports facility and expanded its programmes for adolescents, e.g. by setting up classes in sewing. A new programme on chemical and alcohol abuse for interested adolescents will also start soon.

Several NGOs reported difficulties in hospitalizing IDP psychiatric patients in Ingushetia. In most cases they are declined any assistance and forced to live with their families and local communities, though some are socially dangerous and need to be isolated from the rest of the population.

The next Mental Health Coordination Meeting is planned for 19 June 2002.
locations covered, contact numbers and names. The directory will be used as the main supplement to all health sector maps prepared by OCHA.

**Water and sanitation**

Over 500 m$^3$ of potable water is supplied to Grozny daily by PHO, the UNICEF implementing partner. Water trucks now make five distribution rounds every day. During April to May, 7000 jerry cans holding 25 litres apiece, and 5670 holding 10 litres apiece were distributed to the public and private sectors. PHO and UNICEF continue to construct latrines, with plans to build 40 double pit latrines in all.

Garbage removal from hospitals is also being continued. The sewage truck has been operating in both public and private areas since the beginning of April.

The Grozny SES is conducting 50 quality tests of supplied water every month.

**Mine awareness**

ICRC helped organize a group of students from higher educational institutions for joint work on a mine awareness (MA) programme for teenagers. The group will edit an ICRC magazine, which is scheduled to be published twice a year, and design MA billboards.

In April and May, HI continued to assist people with disabilities and to support medical facilities in Chechnya and Ingushetia. HI donated 80 adult wheelchairs, 70 children’s wheelchairs and 15 walkers to people who had lost their mobility. To improve the hygienic conditions of disabled and wounded persons confined to bed, 227 hygienic kits were distributed that included a leaflet informing people how to prevent bedsores. HI also provided some basic materials and equipment, including osteosynthesis material and portable x-ray machines, to strengthen trauma units in four Chechen hospitals.

UNICEF and MSF-H distributed mine risk education posters to medical institutions across Chechnya.

The Danish De-mining Group (DDG) continued to inform the population on the danger of mines and UXO (unexploded ordinances). Two Mine Awareness teams were working in Achkhoy-Martanovsky district of Chechnya. According to the preliminary assessment in the district, the majority of people were not aware of the right behaviour in mined areas.

DDG/DCA instructors cooperated with many organizations and worked at bus-stations, markets and in other public places. They explained to people how to protect themselves from mines, using posters, leaflets, booklets, calendars, containing the main points of MA sessions.

At the same time, via sessions, instructors collected the information on cases of mine explosions involving humans.

DDG/DCA also continued conducting MA trainings for Chechen teachers.

**Demographic situation**

According to MoH/ChR data, the demographic situation in Chechnya is worsening: the population (especially working age) is decreasing. Thus, in 1991 the population of the republic was 1,306,000 people. In 2001 it decreased to 715,000 people (252,988 of them were children). However, the concrete number is unknown and varies depending on the source of information (e.g. the latest DRC report of 30/04/2002 refers to the figure of 786,104 persons, with 140,961 inner IDPs, the vulnerable part of population totalling 121,210 people).

The birth rate continues to decrease. In 2001 there were 12,872 children born, compared to 13,786 in 2000. The number of children per fertile woman has fallen from 2.0 to 1.7. In order to provide for the basic replacement of the population, this figure should be 2.2.

The decreasing birth rate is explained by a decrease in the number of births, rather than in the number of fertile women. Over 80% of the
Chechen women who plan to bear children suffer from at least one disease.

One significant factor in the falling population figures in Chechnya is the high level of violence leading to death, especially in people of working age. The medical institutions of Chechnya registered 814 cases of gun and landmine injuries in 2000, and 1020 such cases in 2001.

**Health facilities**

In 2001 there were 55 hospitals, 34 polyclinics, 46 ambulatories and 187 FAPs (local ambulatory points) operational in Chechnya.

For the same year, the total number of beds in medical institutions was 4876, of which 1020 were in Grozny and 3362 in rural areas. Of the total, 1087 were for surgical operations, 1332 for general medicine, 987 gynaecological/obstetric, 609 paediatric, 195 TB and 351 for other infectious diseases. The majority of hospitals and polyclinics still need repairs and often function without running water, sewerage systems or proper heat.

The Russian Federation MoH decree of 16 May 2001 and the Federal Fund of Obligatory Medical Insurance ensure medical services to the Chechen population in medical facilities of other RF regions. The majority of referred patients were sent to the Republic of Dagestan: Rostov, Stavropol and Krasnodar oblasts; and Moscow. Last year these neighbouring regions accepted about 4000 Chechens to whom medical care could not be provided in Chechnya.

**Rehabilitation of health services**

According to the data of the RF MoH Commission on Rehabilitation of Health Services in the Chechen Republic:

- the rebuilding of 62 medical buildings whose reconstruction began in 2001 was carried over into the current year for completion;
- 76 health facilities are scheduled to be rebuilt and renovated in 2002, ready to be used in full;
- an audit of reconstruction and reparation activities in 2001, for which 58 million roubles were allotted by the RF MoH, uncovered some violations in unjustifiably high reimbursement claims for material costs (about 5–6% falling in the category of overexpenditures);
- medical equipment purchases in 2002 will be limited to 30–40 million roubles, approved only for renovated health facilities and only after definitive completion of construction;
- facilities targeted for reconstruction include eight district sanitary-epidemiological centres, four of which are scheduled to become fully functional in 2002; the RF MoH has set aside 40.7 million roubles to carry out reconstruction and subsequent outfitting of equipment.

**SES services**

There were originally 14 sanitary-epidemiological surveillance (SES) services in Chechnya, of which the central republican SES as well as the district SES services in Grozny, Groznensko-Selsky and Shatoi have been completely destroyed. Of six district laboratories equipped to do bacteriological analyses, in Gudermes, Shalinskii, Achkoi-Martan, Urus-Martan, Grozny and Naurski, only the last one retains the capacity for chemical work-ups. Only 55% of the needed SES staffing is available.

In 2001 there were 51 280 registered cases of infectious diseases, compared to 53 742 cases in 2000. These cases predominantly affect children. In 2001 the number of paediatric cases was 32 386, or 63.1% of the total, a significant rise from 2000, when children accounted for 12 231 of the infectious disease cases, or 22.8%.

Overall, 21 infections showed an increased incidence and 17 a decrease. Gastroenteric infections ranked first and acute respiratory infections (ARI) second, with hepatitis A being another major concern.

As to the total epidemiological picture, cancer/oncological conditions were ranked first followed by neurological, cardiovascular and ophthalmologic diseases.
**Human resources**

The number of doctors and medical personnel in Chechnya is much lower than required. In 2001, Chechen medical facilities were staffed with 1738 doctors and 51,430 nurses, or 44% and 60% of the numbers required, respectively.

The Russian Federation MoH Commission on Rehabilitation of Health Services in the Chechen Republic reports that in 2001, 425 Chechen students were admitted to medical universities and more than 500 young Chechen doctors entered post-graduate courses. The Ministry of Health of the Russian Federation offered to the MoH of the Chechen Republic was offered 1292 places for formal on-the-job training lasting 1–6 months in different medical institutions. However, many of the opportunities were not used, mainly due to financial hardships experienced by MoH.

At the end of the 2002 school year, 139 Chechen medical students will graduate. It is of the utmost importance to secure appropriate local inducements for them to return to work in Chechnya.

**Expanded Programme on Immunization**

In 2001, a cold-chain centre was set up in Hospital No. 9 in Grozny, with UNICEF support. A national and seasonal calendar of vaccinations has been introduced and 200,000 immunization cards printed by UNICEF were delivered for distribution. UNICEF also delivered to the centre 160,000 syringes that had been urgently requested by MoH of the Chechen Republic for EPI.

On the whole, only about half of the republic’s children have been protected by vaccination and revaccination, the one exception being newborn TB and polio vaccinations, for which the coverage is much higher. The vaccination service is reported to be working normally: 89,000 vaccinations were provided in the first quarter of 2002, to a total population of children under five that is estimated at 60,000.

The vaccination and revaccination rates are as follows:

- polio – 55%
- diphtheria – 36% of adult population
- measles – 33.8%
- TB – 50% of the general population, 96% of the newborn
- flu – 51%.

**Mother and child health**

In 2001, the overall morbidity rate in women of reproductive age was 44 per 1000, up considerably from 16 per 1000 the year before. The prevalence equalled 72.6 compared to 56.2 in 2000. The number of abortions increased by 40.3% as compared to 2000.

Nine cases of maternal mortality were registered in Chechnya during 2001. The main reasons for mortality were toxaemia, bleeding and sepsis. None of the diseased women were monitored by medical facilities. The numbers of mammary, cervical, uterine and ovarian malignancies also increased.

Medical assistance to children was provided in 22 medical facilities of Chechnya. The total number of available hospital beds was 604, or 18.4% of the total number of beds in Chechnya, compared to 32.9% in the RF.

There are 191 paediatricians in the republic, or 41% of the number needed. There are no specialized beds for prematurely born infants or newborn infants with pathologies.

**Tuberculosis**

In 2001 there were only 195 TB beds (in Gudermes, Shali and Hospital No. 3 in Grozny) out of 1195 previously available TB beds in Chechnya. Only 6 out of 39 x-ray units are now available, although these 6 are in need of repair.

**General TB indicators in recent years (per 100,000 population)**

<table>
<thead>
<tr>
<th></th>
<th>1991</th>
<th>2000</th>
<th>2001</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Morbidity</td>
<td>56.3</td>
<td>178.4</td>
<td>270.2</td>
<td>76.0</td>
</tr>
<tr>
<td>Mortality</td>
<td>8.3</td>
<td>26.0</td>
<td>28.6</td>
<td>17.2</td>
</tr>
<tr>
<td>Prevalence</td>
<td>250</td>
<td>638</td>
<td>718</td>
<td>264</td>
</tr>
</tbody>
</table>

In 2001, 1335 new TB cases were detected, including 71 children. The total number of registered patients with active TB was 4771 (compared to 1386 in 2000); over 15,000 children and youth were listed as TB contacts.
X-ray examination was performed on 42,855 people. Mantoux testing was performed on 13,213 children, of whom 2,624 had positive reactions. Of the TB patients in need of hospitalization, 14.6% were hospitalized.

The MoH ChR TB control programme for the year 2002 was presented to the Chechen government for approval.

**Expanded Programme on Immunization**

The Republican Cold Centre in Grozny received from UNICEF a total amount of 160,000 syringes for the EPI, urgently requested earlier by MoH/Ch. The vaccination service in Chechnya is reported to work normally: 89,000 vaccinations were reportedly provided in Chechnya in the first quarter of 2002, for a total population of under 5 estimated at approximately 60,000 children.

**Medical assistance in schools**

Teaching staffs in Chechnya report a complete lack of basic medical assistance in many schools. Most schools have neither a nurse position nor a room for medical examination and treatment. They also report the lack of any first aid kits to provide emergency assistance to injured children, and a dearth of information on vaccination programmes.

**Mental health**

In May, WHO renewed its agreement with the Chechen Association of Psychiatrists and Narcologists (APNC) that runs Malkh, the children’s psychological rehabilitation centre in Grozny. Once again, the agreement provides for the continuation of community-based psychosocial rehabilitation for some 120 Chechen children and adolescents. It also seeks to strengthen and expand the volunteer mental health network by providing relevant training and appropriate advice and education for the parents of traumatized children.

Another agreement providing psychosocial rehabilitation to Chechen children was also renewed, this one with the People in Need Foundation (PINF). The project envisages support to four psychosocial rehabilitation centres for about 500 children and adolescents in Grozny schools.

Yet a third agreement of this type was prepared with SERLO, a Chechen NGO previously supported by OSCE, to support psychosocial rehabilitation centres for about 200 children and adolescents in the two IDP tent camps in Znamenskoye.

All these projects were started in May and will run through the end of December 2002.

WHO also facilitated and co-sponsored the participation of the director of SERLO and the head of Malkh in a Barcelona conference entitled “Integral psychosocial rehabilitation within and with the community”.

**Health assistance**

- Distribution of 1000 infant hygiene starter kits, supplied by UNICEF were started in Chechnya with the arrival of the first 200 kits, which were handed over to Sunzha District Maternity hospital for further distribution to beneficiaries.

- Hammer Forum has been assessing the overall situation and conditions at several medical facilities in Chechnya. The NGO has finalized preliminary activities and begun medical provision to Polyclinic No. 4 in Chernoretch’e, its branch in Aldy and Hospital No. 1 in Znamenskoe. In addition, the organization also started supplying drugs to Hospital No. 3 in Grozny. Polyclinic No. 3 in Grozny will begin treating patients in June, following completion of minor cosmetic repairs.

- An American NGO, In His Fields, is taking care of the orphans at the Lamb Children’s Rehabilitation Centre in Gikala, Grozny.
The centre is a private orphanage caring for 30 children between the ages of 2 and 14 who suffer from various diseases, including TB and cerebral palsy. It provides the children with clothing, food, education and medical assistance. The staff includes a teacher and a full-time nurse.

- The ICRC, in cooperation with the RRC and the MoH of the Chechen Republic, continues to implement the PHC programme started in March 2002. Assistance is provided to 23 primary medical care structures (polyclinics, ambulatories and FAPs) in Shali and Urus-Martan districts. The structures with qualified medical personnel (polyclinics and ambulatories) are supplied with medicines. The FAPs, where no qualified staff is available, are visited and supported by two RRC mobile medical teams. RRC also runs a fixed medical post in Grozny.

**News in brief**

From 15 to 17 May 2002, a delegation of EU Troika Ambassadors visited Chechnya and Ingushetia. Ambassadors from Denmark and Spain to the Russian Federation and the Head of the EU delegation to the Russian Federation assessed the situation in Chechnya. In Grozny, they met representatives of local civilian and military authorities and discussed the observance of human rights in Chechnya, possibilities for the return of IDPs, international humanitarian assistance and the social and economic reconstruction of the republic.

WHO signed a collaborative agreement with the Hammer Forum in which the NGO agrees to provide basic medical health care in Grozny, Chechnya. The main activities covered by the project will be providing preventive and therapeutic paediatric medical care through selected medical points, as well as providing essential drugs for the treatment of common and endemic diseases, identifying major health problems in target populations, etc. The project will last from 1 May to 31 September 2002.

---

**HEALTH AGENCIES IN ACTION**

**Let’s Save the Generation**

The NGO Let’s Save the Generation (LSG) was founded on 1 June 2001 with the goal of providing humanitarian aid to disabled children, orphans and other socially vulnerable groups.

LSG is an implementing partner of UNICEF in its Mine Action Programme. As part of this programme, children from various IDP camps and spontaneous settlements in Ingushetia are taken to Vladikavkaz every Wednesday to see the interactive theatre performances of the Russian Drama Theatre. During the bus rides there and back, LSG instructors make presentations to the children in their native language on how to prevent accidents resulting from mines and unexploded ordnance (UXO), handing out information booklets and chocolates.

LSG gathers data on children in Chechnya and Ingushetia who are victims of mines and UXO in order to provide them with medical and psychosocial aid.

Last September, the group distributed wheelchairs, canes, crutches and stationery supplied...
by UNICEF to victims in both republics. It also distributed mattresses, blankets and sets of bed linen from UNHCR. Jackets and high boots, received from Civil Assistance, were handed out by LSG monitors to IDPs in Camp Bella and other compact settlements in Ingushetia.

LSG has established close working relations with the human rights centre Memorial. With help from Memorial, the Forum of Resettlement Organizations and EMERCOM, LSG began to support an initiative of the organization Uralsky Dom in January 2002 by providing assistance to orphans, single-parent children and mine victims. The group has given jackets and soft toys to children in Ordzhonikidzevskaya, and provided assistance to the orphanage Dom Nadezhdy (Home of Hope) in Karaboulak.

The NGO won Your World in the Window, a small grant competition, for a project proposal on the psychosocial rehabilitation of disabled children. As part of the project, LSG conducted monitoring and developed a database on disabled children who were mine victims. The organization established a new rehabilitation centre for Chechen handicapped children in three tents of Camp Bella. A solemn opening ceremony took place on 18 April 2002, with the participation of many UN agencies and NGOs working in Ingushetia. WHO donated soft toys, books and craft materials to the new centre.

The centre’s rehabilitation programme will include art and folklore groups as well as sports and entertainment events. Regular counselling will be provided by a psychologist and an assistant, who will try to help the disabled children overcome their sense of physical inferiority and rejection, develop tolerance for society, focus less on their misfortunes and cultivate positive emotions and friendly attitudes toward others.

The centre will be open four days a week and will employ seven employees: a manager, a counsellor, a lawyer, an accountant and three monitors.

### Water and sanitation

Several NGOs report an increasing number of insects and rodents, especially rats, in many IDP settlements and camps. The local SES claims to have no resources to perform the needed disinfection and deratization. WHO has ordered disinfectants from a supplier in Stavropol krai, and they are on their way to Ingushetia.

At the end of May, UNICEF distributed 1000 kg of chloramine powder to beneficiary institutions and the IDP community in Ingushetia.

### Mine action programme

UNICEF, in partnership with Voice of the Mountains, continues to run a mine risk educational programme at schools in Chechnya and Ingushetia. Over 5000 children received such education during April and May. Educational units were accompanied by the handing-out of mine awareness booklets and other materials.

UNICEF is also continuing its programme of assisting child mine victims at the Vladikavkaz orthopaedic/prosthetic workshop and providing injured women and children with corsets. In April and May, over 50 children were treated at the centre, with half completing prosthetic fitting, while more than 100 new corsets were distributed.

The Vladikavkaz physical rehabilitation centre also assists mine victims on an ongoing basis. During the last two months, about 30 patients received massage, physiotherapy and therapeutic ultrasound treatment there.

At both facilities, psychologists hired by UNICEF provide counselling to women and children affected by mines and UXO.

In the same two months, over 750 IDP children from camps and spontaneous settlements in Ingushetia attended UNICEF’s interactive theatre.
performance in Vladikavkaz, focusing on mine awareness (MA). As mentioned above, the other collaborating partners include the Russian Academic Theatre and Let’s Save the Generation (LSG).

UNICEF purchased and handed over to the Physical Rehabilitation Centre in Vladikavkaz a haematological analyser.

The vocational training for mine victims in Ingushetia ended in the end of May. The trainees have successfully passed their exams in computer applications and English language.

CARE International, through its local implementing partner, the NGO New Education, launched a new psychosocial rehabilitation project for child mine and UXO victims from Chechnya. Thirty of these children have started a two-month round of visits to the psychological counselling centre in Vladikavkaz.

The UNICEF IMSMA database, maintained with the support of NGO partners Voice of the Mountains and LSG, presently contains information on about mine and UXO casualties.

Also during April and May, 14 amputees received new prostheses from the Vladikavkaz prosthetic centre as part of the WHO programme of assistance to adult Chechen IDPs that was resumed this year. WHO will provide prostheses for 11 more adults. Another 11 Chechen IDP amputees referred by the Grozny prosthetic workshop also received new prostheses during this period, with funds the Grozny workshop received from the Federal Ministry of Labour and Social Development.

Following the decision to make changes in its Child-to-Child programme, ICRC developed additional materials and modified its teaching programme. Meetings of the Mine Victims Club organized by the ICRC seek to involve mine victims in the MA programme, in order to ensure an objective assessment of the programme strategy while providing some psychological rehabilitation to mine victims.

In the Bottlikh and Novolak regions of Dagestan, the ICRC is realizing two programmes. The MA programme includes presentations for children and adults, the distribution of comic books, game sheets and Find the Safest Way to children, and the distribution of posters, comic books and leaflets to adults. The Child-to-Child programme tries to teach children how to share information with others about the danger of mines and ways to avoid them. The latter programme also continues to be implemented in North Ossetia.

The ICRC has also produced “Ascend”, a second children’s comic book about mines and UXO. While the first comic book aimed at raising children’s awareness about mine danger, “Ascend” aims to reinforce knowledge that children already have and motivate them to pass MA information on to others. The Child-to-Child programme has also developed auxiliary materials for children, including puzzles, rebuses, crosswords, posters and games.

From 26 May to 6 June, HI held a two-week training course in the republican hospital in Nazran for personnel from four Chechen trauma units, on post-operation practices. After two days with surgeons and nurses, the training focused on practical sessions in functional rehabilitation for the nurses. Two prosthetic specialists from Argun and Urus-Martan, previously trained by HI in France, served as facilitators along with the French facilitator.

The presidential elections in Ingushetia, held on 7 and 28 April, were won by Murat Zyazikov, a Federal Security Service general and the Deputy Envoy of the Southern Federal District. The inauguration took place in Nazran on 23 May 2002.

The first round of presidential elections coincided with the celebration of World Health Day, which had the theme “Move for health”.

To provide more information, WHO distributed information advocating physical activity as an incontestable part of a healthy lifestyle.
From 10 to 11 April, a donor delegation from the US State Department, including representatives from the Bureau for Population, Refugees, and Migration (BPRM) and the US Embassy in the Russian Federation, visited Ingushetia. The delegation visited BPRM-funded NGO programme sites in the Nazran area, including a mobile medical clinic and a psychosocial training facility. As usual, the mission also met with the humanitarian community. The donors expressed appreciation for the good coordination among the NGOs and the complementarity of their programmes.

From 17 to 19 April, OCHA facilitated a visit of four journalists from newspapers and broadcasting agencies in Sweden, Holland and Germany, acquainting them with the humanitarian situation of Chechen IDPs and with the UN activities assisting them.

On 15 and 16 April, UNSECOORD organized a two-day course on First Aid for UN agencies and their partners in Nazran. There were 45 participants, including 23 UN staff and 22 ICRC, SHA and other NGO staff. The training was conducted by two doctors from Global Voyager Assistance (GVA) Moscow.

On 18 May 2002, the Minister of Health of the Republic of Ingushetia held a meeting with all United Nations agencies and NGOs operating in the health sector of the republic. The participants had been briefed on the agenda of the meeting at the Russian Federation MoH on 25 April 2002, when the situation in Ingushetia had been the main topic of discussion. The general feeling in that meeting acknowledged the worsening predicament of medical services in Ingushetia. The May meeting in Ingushetia focused on issues such as maternal and child health (MCH), HIV/AIDS, the republic’s epidemiological situation, blood transfusion centre problems and TB. MoH requested the agencies and NGOs to consider the possibility of emergency assistance in a number of areas.

**UPCOMING EVENTS**

On 20 and 21 June 2002, WHO and PHO will hold a joint two-day training course in Nazran entitled “General hygiene and hygiene in hospitals” for 25 epidemiologists from Chechen hospitals. This course had been previously scheduled for late May.

From 24 to 28 June 2002, WHO will run five one-day training courses in Nazran on “Infectious disease reporting systems for epidemic prevention”. The courses will involve about 150 PHC staff from different regions of Ingushetia and Chechnya and from relevant NGOs in Nazran.
Health Action in the North Caucasus is a newsletter of the Emergency Preparedness and Response programme (EHA) at the World Health Organization Regional Office for Europe. The information is compiled by the WHO Humanitarian Assistance Programme in the North Caucasus, the Russian Federation.

All rights are reserved by the organization. The document may, however, be freely reviewed abstracted, reproduced or translated in part or whole, but not for sale or for use in conjunction with commercial purposes. This newsletter is not an official WHO publication. The views expressed in it do not necessary represent stated policy of WHO.

Correspondence should be addressed to:
Russia Office of the WHO Special Representative of the Director General in the Russian Federation
28, Ostozhenka,
119034 Moscow
The Russian Federation
Attn: Irina Tarakanova [i.tarakanova@who.org.ru]
Tel.: (+7) 095 787 21 52/12
Fax: (+7) 095 787 21 19

Editors: Jeffrey V. Lazarus [jla@who.dk], Dr Mark Tsechkovski [m.tsechkovski@who.org.ru] and Irina Tarakanova [i.tarakanova@who.org.ru]

For more information about WHO emergency preparedness and response programmes, please contact:
Dr Jan Theunissen [jth@who.dk]
Dr Edouard Kossenko [kossenkoe@who.ch]

The newsletters of the Emergency Preparedness and Response programme (EHA) can be found at http://www.euro.who.int/emergencies.