Rebuilding Chechnya in 2001

On 9 February 2001, the Government of the Russian Federation approved the Federal Programme of Restoration of the Economic and Social Sectors of the Chechen Republic in 2001. Among the priority tasks are the reconstruction of residential houses, the payment of pensions and the provision of education and job opportunities.

The restoration of the Chechen republic’s health sector envisions the refurbishment of health institutions, ensuring their operation, including adequate equipment, ambulance and drug supplies, as well as appropriate sanitary and epidemiological works. The total related costs will amount to RUR 779 400 000. The estimated bed capacity, subject to the amount of restoration completed in 2001, is 5 860 beds.

Ultimately, it will be possible for as many as 1 650 visits per shift at 11 polyclinics. In addition, 125 feldsher/obstetric clinics will be rebuilt.

Medical equipment will include therapeutic, diagnostic and lab items for functioning in-patient care facilities and those under restoration. Moreover, there are plans for the purchasing of sanitary equipment and household refrigerators. Drugs, medical equipment and ambulance supplies will be distributed between health institutions, in accordance with the volume of care being provided. Meals will also be included in the overall inpatient care costs.

The current epidemiological situation in Chechnya is extremely precarious, with the rising threat of an emergence and spread of acute intestinal infections and the expected revival of natural plague and cholera foci as well as the possible expansion of bacilli beyond natural habitats.

In order to ensure proper sanitation and a disease-free environment, and revive the facilities of the State Sanitary Epidemiological Surveillance Service (SES), it is planned to:

• exercise Sanitary-Epidemiological (San-Epid.) surveillance of the water supply, sewage facilities and food production and catering companies;
• restore the ability of San-Epid. institutions to carry out relevant activities;
• carry out immunization, primarily of children and the IDP population;
• organize testing for cholera for the IDP population and personnel at catering and trading facilities;
• arrange for the coordination of activities of San-Epid. centres of the Chechnya and the neighbouring regions with regard to control over the epidemiological situation; and
• supply relevant devices, materials, disinfectants and drugs for the control of communicable diseases to SES.

Prosthetic Assistance to the North Caucasus

The first coordination meeting on prosthetic assistance to war-injured persons was held by WHO in Vladikavkaz in October 2000. Organizations rendering assistance to war-injured IDPs in the North Caucasus or interested in this kind of activity were invited to coordinate and streamline their efforts. The meeting was attended by representatives from the ministries of labour and social development of North Ossetia and Ingushetia, UN agencies (UNHCR, UNICEF and WHO), ICRC and Handicap International. It was decided, in close cooperation, to upgrade the Vladikavkaz workshop to a regional centre, to strengthen the Vladikavkaz Centre for the Rehabilitation of Disabled Persons and to gradually re-establish the former prosthetic/orthopaedic workshop in Grozny. An action plan outlining the tasks for all participating organizations was agreed on at the meeting.
On 22 February 2001, WHO held a second inter-agency coordination meeting in Vladikavkaz. The objectives of the meeting were to assess progress made according to the action plan agreed on in October and to determine further needs and priorities for both prosthetic workshops in order to improve the manufacturing output of the Vladikavkaz workshop and to re-establish, as soon as possible, the capacity for the repair of prosthetic/orthopaedic items (wheelchairs, crutches etc.) in Grozny.

The progress achieved and the goals to be set for the future are outlined below:

**Assurance of the regular availability of prosthetic components**
WHO continued to deliver prosthetic/orthopaedic material to the Vladikavkaz workshop. Aid included 100 prosthetic appliances (70 lower limb and 30 upper limb prosthesis) purchased from Blatchford Company (Great Britain).

**Identification, registration and transportation of amputees**
WHO has renewed and computerized the system of identification and registration of amputees. The system was enlarged with information from the UNICEF Mine Victim Database. WHO will share its data on mine victims with UNICEF on a regular basis.

All the costs for the transportation of amputees from Nazran to Vladikavkaz and back are covered by WHO, which also helps the amputees cross the Ingushetian/North Ossetian border. When so needed, additional transport is provided by UNHCR. Moreover, UNICEF plans to purchase an additional bus, which will be able to be used for the transportation of amputees.

**Essential equipment for the workshops**
WHO and UNICEF conducted a tender for the purchase of essential equipment, enabling them to increase the manufacturing capacity of the Vladikavkaz workshop and allowing for the introduction of a two-shift working system. The equipment will be ordered in the near future.

Handicap International (HI) compiled a list of priority needs for the Grozny workshop and conducted a tender for the needed equipment to be purchased in cooperation with WHO. HI will also provide orthopaedic material (wheelchairs, crutches, canes, etc.) to orthopaedic departments in different hospitals in Chechnya.

**Training prosthesis technicians**
Staff training is not currently a priority for the Vladikavkaz workshop. The Grozny workshop, on the other hand, is in serious need of immediate prosthetic training. Only two to three orthopaedic technicians are currently available. WHO and HI are considering jointly financing prosthetic training for one person from Grozny. Further training of prosthetic technicians from Chechnya in Russia and France will be sponsored by HI. ICRC is considering supporting the workshop by training the staff at their regional facilities.

**Treatment and rehabilitation**
In November 2000, UNHCR and WHO established a medical consultation centre in Nazran to assist IDPs by arranging referrals for inpatient, out-patient and sanatorium treatment in health facilities in Ingushetia and other regions of the Russian Federation. UNHCR covers the transportation cost to health care facilities. Since its opening, more than 400 IDPs have received consultations through the centre.
UNHCR and WHO purchased training and physiotherapeutic equipment for the Vladikavkaz Rehabilitation Centre for Disabled Persons. UNICEF will follow up and purchase other necessary items. WHO and UNICEF will support psycho-social counseling for the disabled at the rehabilitation centre. The same counseling services will be provided for IDPs at the Vladikavkaz workshop as well.

WHO will continue to sponsor the re-operation of defective stumps at the Vladikavkaz traumatological hospital, a service initiated last year.

ICRC plans to open a prosthetic workshop in Nazran. Activities will be coordinated with the Vladikavkaz and Grozny workshops.

**Demography**

According to the Ingushetian branch of the Ministry of Federal Affairs, Migration and Ethnic Policies, there are 176,000 IDPs from Chechnya living in Ingushetia. As many as 144,375 of them are officially registered with the local authorities. The majority of them are in the Sunzhenskiy District of Ingushetia (DRC. 7 Feb 01).

According to DRC/ASF data, on the other hand, the total number of IDPs in Ingushetia, as of 1 February, was 151,417.

**The health situation**

Several cases of hepatitis A were registered again in a number of villages and areas of compact residence of IDPs in Ingushetia, in January/February 2001. In order to control the situation, the Ministry of Health carried out a passive immunization with immunoglobuline. In addition, forty additional beds were set up at the Department of Infectious Disease at the Nesterovskaya regional hospital. According to MoH/I, the seasonal rise is coming to a close and fewer cases of the disease have been detected.

**Health services**

An increasing number of cases of denial of medical assistance to IDPs in the polyclinics and hospitals of Ingushetia have been reported by some NGOs. The failure of medical institutions of the Ministry of Health to release drugs free of charge have been reported by People in Need Foundation (PINF).

Despite the fact that the special order (53/18 of 16 February 2000) of the MoH (RF)/Federal Fund of Obligatory Medical Insurance obliges health care institutions in the North Caucasus to attend to IDPs from Chechnya, many institutions refuse to provide assistance to IDPs on the pretext that the latter have no federal medical insurance policies (the Russian Red Cross (RRC)).

The All-Russian Centre for Disaster Medicine “Zaschita” opened a new field therapeutic hospital with 50 beds in the village of Slepsovkaya. It works in cooperation and in coordination with the MoH/I. 3500 patients have applied for medical help since the opening of the hospital in February. However, the existing number of beds is not sufficient to cope with the flow of patients. Therefore, Zaschita plans to add 30-50 more beds in the near future.

A team of Zaschita paediatric surgeons examines sick children in IDP settlements, to see if they should be referred to hospital.

Since November 2000, the Zaschita TB field hospital made 8,933 small format X-ray scans (fluorography) in IDP camps and spontaneous settlements. 146 TB patients were evacuated for treatment to other
regions of Russia (e.g. Kursk, Rostov, Moscow, Ryazan).

Hammer Forum covers the transportation expenses of TB patients referred to the Zashita TB field hospital and directed for further treatment to medical institutions in other regions of Russia.

Following the request of RRC, Hilfswerk (Austria) has constructed three medical modules in the Altievo, Plievo and Yandare villages of the Nazran district. These facilities are available to other NGOs as well. PINF, Islamic Relief and RRC, who carry out health-care activities in the same area, are to work out a common schedule to use the medical points.

ICRC continuously provides assistance to five hospitals in Ingushetia as well as supporting two mobile medical teams and one RRC medical post providing IDPs with basic health care. The RRC visiting nurses programme assists bedridden elders with basic medical care. ICRC shower installations, insulated against winter weather, continue to function in IDP camps in Ingushetia.

UNICEF is currently involved in the activities related to the expanded programme on immunisation (EPI) and mother and child health care (MCH) in the IDP camps in Ingushetia. UNICEF is planning to expand its activities in the field of nutrition. Consultations are being held with WHO on the need to fortify bread with iron, in order to assuage anaemia problems among the IDPs.

UNHCR envisages the sponsoring of surgical operations for children in need of eye surgery in the Krasnodar branch of Fiodorov Eye Microsurgery Institute.

Mobile medical teams of World Vision International provide medical assistance to IDPs in the villages of the Malgobek district.

WHO delivered to the Vladikavkaz prosthetic workshop 100 prosthetic appliances (70 lower limb prosthesis and 30 upper limb prosthesis) purchased from Blatchford Company, Great Britain.

Within the framework of the mental health rehabilitation programme in the North Caucasus, WHO, in the beginning of February, delivered the second batch of 1000 teddy bears to Vladikavkaz, to be distributed to children in war-affected areas in Chechnya.

Mine awareness
In January-February, UNICEF conducted an interactive puppet show with mine awareness (MA) messages for children living in the IDP camps in Ingushetia. It was developed together with the Vladikavkaz children’s theatre Sabe.

UNICEF continues to produce MA posters, notebooks and billboards to be disseminated in Chechnya by the ICRC, DRC, PHO, Voice of the Mountains (VoM) and local administrations (OCHA).

One of the principal MA activities of DDG/DCA in Ingushetia is holding MA sessions for the Chechnya IDP children and youngsters aged 7-25 living in Ingushetia. Since the beginning of September 2000, DDG/DCA has conducted MA sessions for more than 13 000 IDP children and youngsters (DRC).

Within the framework of its MA programme in Ingushetia, ICRC conducts presentations and workshops for children in IDP camps, using locally produced teaching material (posters, leaflets). The puppet show “The danger of landmines – the new adventures of Cheerdig” has been developed by ICRC to make children from Chechnya aware of the dangers of landmines and unexploded ordnance. An educational comic book with supplementary games and quizzes is also in the works.

Demography
The total population of the Chechen Republic (as of 27 February 2001) is 980 000 people; 820 000 of them are permanent residents (data provided by the administration of the Chechen republic). Health facilities
The following primary health care facilities function in Chechnya: 32 polyclinics, 52 ambulatory posts and 175 feldsher posts. There are also 52 hospitals and 17 clinical diagnostic laboratories. However, many of
these facilities are not fully operational (data provided by the administration of the Chechen republic). 17 hospitals, 5 ambulatory posts and 29 feldsher obstetric posts are completely destroyed (MoH/RF).

In Grozny, 11 stationary medical facilities (with 3 705 beds) and three polyclinics were destroyed during recent hostilities in Chechnya (MoH/Ch). The following health facilities are currently operational: 8 hospitals, 1 central maternity home, 1 hospital for war veterans and 16 polyclinics (with 1 261 beds) (MoH/RF).

The sanitary-epidemiological service of Chechnya is represented by 14 centres of sanitary epidemiological surveillance in cities and regions throughout the republic and a disinfection station in Grozny (MoH/RF).

In March, Zaschita plans to open a Field Paediatric Hospital with 50 beds at the Goudermes Central District Hospital.

**Human resources**

There are currently 1 738 doctors and 4 350 nurses in health care institutions in Chechnya. 790 doctors and 1 490 nurses work in Grozny (MoH/RF).

According to a MoH/RF order, issued in December 1999, approving a plan on yearly enrolment of 80-100 young people from Chechnya to higher educational institutions of MoH/RF, students from Chechnya filled 70 vacancies in RF medical and pharmaceutical institutions in 2000. The same level of enrolment is planned for 2001 (MoH/RF).

In 2001, approximately 900 students will complete their studies at the federal medical college, which has three departments in Gudermes, Shali and Urus-Martan. The college plans to enrol an additional 600 students this year (MoH/RF).

**TB services**

There are five TB dispensaries (one in Grozny, four in the rural areas) and ten TB offices on the territory of the Chechen Republic. In total, there are 205 TB beds (compared to former 1 095 previously).

There are no laboratories at the TB facilities. This is especially problematic as all bacteriological laboratories have been completely destroyed.

The Republican TB service is staffed with 22 phthisiologists (data provided by the administration of the Chechen republic).

**TB statistics**

There are no statistics from 1999 on the sputum conversion rate for patients treated for TB. At present, there are 4 464 TB patients in the republic.

In 2000, 1 386 new cases of TB were detected passively, only 5% of them were found through active population screening, including 2.5% detected by radiological means. 20 cases have been found by sputum microscopy (data provided by the administration of the Chechen republic).

**TB drugs and reactives**

There is no stock of TB drugs in Chechnya. Nor are there reagents for sputum microscopy (data provided by the administration of the Chechen republic).

**Water and sanitation**

Next to the distribution of water and sanitation materials, including pit latrines and water bladders in the IDP camps in Ingushetia, UNICEF is active, through the implementing partner PHO, in Grozny, where the NGO manages a UNICEF-provided water purification system, producing 120m³ of clean water per day. This water is distributed to health centres, schools and other general distribution sites in town.

Since 1 December 2000, ICRC, which fixed pumping station no. 1 in Grozny, has been distributing chlorinated water to the population of the city from two water tanks (75m³ each), with a daily output of around 330 cubic meters.

OSCE is funding PINF to distribute 5 000 ceramic water filters to the inhabitants of Grozny (UNICEF).
In response to the urgent need for increased mental health and psychosocial support services in the North Caucasus, in October 2000 CARE International launched a psychosocial training and support programme for education professionals working with children affected by the war in Ingushetia and Chechnya.

The overall goal of the programme is to help approximately 30,000 children and their families, who suffer from post-traumatic stress symptoms and other war-related traumatizing events as a result of the recent conflicts in Chechnya and in the Prigorodny district.

**Purpose**
The purpose of the project is to train over 250 education and health professionals in the region in providing psychological assistance to the final beneficiaries.

The programme is organized as a series of workshops, each of which deals with recognizing and understanding trauma in children and finding practical treatment methods. The emphasis throughout the seminars is on participatory learning, sharing experiences and empowering teachers to have a long-lasting effect both on the children that they teach and on the community at large.

**Pilot project results**
The first training seminar took place in Nazran, Ingushetia, from 29 October to 5 November 2000, and the second from 22 to 28 January 2001. During those seminars, 49 education professionals from Chechnya and Ingushetia were trained by a team of one international and four local trainers.

Replication seminars for a further 31 teachers working in tent schools in Ingushetia and in schools in Grozny were carried out in Ingushetia from 1 to 3 December 2000 and from 9 to 11 February 2001.

Through the pilot project, CARE – in partnership with local and international NGOs and the Ingushetian Ministry of Education – trained 80 education professionals from over 40 schools in both Ingushetia and Chechnya. The project served over 10,000 children in the formal and informal education systems.

**CARE activities plan for 2001**
Upon confirmation of further funding CARE plans to:
- Conduct 27 training seminars (6 training of trainers for education and health professionals; 3 lead seminars designed and conducted by an international trainer; 3 specialised seminars designed and conducted by an international trainer; 15 replication seminars designed by the trainers and implemented by local specialists);
- Conduct three supervisory workshops;
- Develop culturally relevant and appropriate training tools and methods;
- Establish a board of advisors for the project improvement;
- Disseminate training materials among education and health professionals;
- Carry out monitoring visits to the schools to assess the lessons learned; and
- Conduct an evaluation after the first project phase and a final evaluation at the end of the project to adapt our response to the needs.

**Expected results for 2001**
- 200 education professionals trained to provide psychosocial assistance to children in schools and kindergartens in Chechnya and Ingushetia;
- 60 health care professionals trained to provide psychosocial assistance to women, children and families in communities in Chechnya and Ingushetia;
- Over 100 schools in Ingushetia and Chechnya have access to the knowl-
edge and application mechanisms of psychosocial aid to traumatized children;

- Culturally relevant training tools and methods disseminated to support coping mechanisms;
- Strengthen the referral system for psychosocial help to children; and
- 3 local partners, strengthened to independently replicate the training modules.

**The team**
Dr. Anica Mikuš Kos, a well-known child psychiatrist from the Slovene Philanthropic Society and WHO consultant, designed the North Caucasus training methodology based on her work on the predecessor project for CARE in Kosovo. She is supported by the CARE international project coordinator, a local project manager, an administrative assistant/translator, a driver/logistician and a security officer.

**The partners**
CARE adapted the project concept to the cultural specifics and needs in the North Caucasus, with a particular emphasis on local partnership, capacity building and sustainability.

As a result, CARE established close partnerships with:

- the Institute for Professional Training of Ingushetia (under the Ministry of Education of the Republic of Ingushetia);
- the Agency for Rehabilitation and Development (ARD) – a Chechen NGO based in Karabulak, with strong experience and expertise in the psychosocial sector,
- the Centre for Peacemaking and Community Development (CPCD) – a British NGO, active in the educational sector in the region since 1995; and
- key international agencies operational in the psychosocial and education sectors, whose collaborators participate in the seminars.

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**SEMINARS & WORKSHOPS**

Training courses on the healthy nutrition of pregnant and lactating women and their families, and the feeding and nutrition of infants and young children were held by WHO in January and February.

Two training courses on the “Healthy nutrition of pregnant and lactating women and their families, and the feeding and nutrition of infants and young children” were held by WHO from 22 January to 27 January and again on 29 January to 3 February 2001 in Kislovodsk. They were attended by 45 participants, including representatives from the ministries of health of Ingushetia and Chechnya, paediatricians, gynaecologist-obstetricians, physicians, hygienists and surgeons, as well as medical doctors and other health professionals working for NGOs in the region. Participants were trained in the basic principles of a healthy diet, evaluating nutritional status and dietary consumption and becoming familiar with modern methods employed in community nutrition.

The “Healthy nutrition of pregnant and lactating women and their families” module, designed for health professionals, was aimed at helping them understand the relationship between nutritional status and food intake as well as to learn about the current dietary guidelines for a healthy adult population, nutritional requirements before pregnancy, during antenatal and lactation periods, factors affecting the food choice of women, the nutritional quality of women’s diet (based on international guidelines) and nutrition-related challenges encountered during pregnancy.

The objectives of the course included a description of specific vulnerable groups and identifying what advice they need as well as the elaboration of an action plan for developing a nutrition and health policy for women in the region.
The purpose of the course the “Feeding and nutrition of infants and young children” was to provide health professionals with theoretical and practical scientific knowledge and skills in the areas of infant and young children feeding and nutrition and breastfeeding promotion.

The objectives of this course included:

- the promotion of an understanding of the problems of the health and nutritional status of children, recommended nutrient intakes (energy, macro and micronutrients), nutrient deficiencies, nutrition-related health problems and diseases in children;
- developing and improving the counseling standard and advice given to breastfeeding mothers, including recommendations on breastfeeding practices;
- developing a standard of counselling for mothers about complementary feeding;
- developing the skills for growth measuring and evaluation with special emphasis on stunting, wasting and obesity;
- developing/improving knowledge on food safety (including microbiological and chemical contamination); and
- discussing the standards of infant and child nutrition in emergency.

The major problems identified for most participants from the North Caucasus region were a lack of previous knowledge on dietary and nutrition status assessment methods, modern dietary guidelines and feeding recommendations, breastfeeding support methods and basic epidemiology and statistics.

The final evaluation of the courses showed that the participants have significantly increased their theoretical and practical knowledge. Moreover, each seminar was completed by working out an action plan for future work, including the training of seminar colleagues in healthy dietary practices.

RATIONAL DRUG USE IN PRIMARY HEALTH CARE

In Kislovodsk, on 13-15 February 2001, WHO conducted a training course entitled “Rational Drug Use in Primary Health Care”. The course was attended by 30 participants (representatives of the Ministry of Health, GPs, paediatricians, medical doctors and health professionals working for NGOs in the North Caucasus) from Ingushetia and Chechnya.

Participants were trained in the basic principles of rational drug use and rational pharmacotherapy practices for essential drugs used in the treatment of common diseases, that can be diagnosed in primary health care.

The main objectives of the training course were to define the concept of rational drug use and discuss the consequences of irrational drug prescription and self-treatment; to describe the concept of pharmaceutical assistance and its potential in improving rational drug use; and to discuss some issues of rational pharmacotherapy as regards the major clinical conditions.
On 19–24 February, a WHO expert in Mother and Child Health (MCH) conducted an assessment mission to Ingushetia, aimed at monitoring the previous activities and identifying elements for further assistance in the area of primary health care. The mission visited health facilities in the Nazran, Malgobek and Sleptsovskaya districts, in Ingushetia, focusing on assessment, follow-up, monitoring and supervision of the following components in primary health care: safe motherhood, perinatal care, antenatal care, EPI, reproductive health and child protection.

On 26 February–2 March WHO and MoH/RF undertook a joint mission to the North Caucasus to assess the current TB situation and control activities in Ingushetia and North Ossetia as well as ways to strengthen the implementation of the ongoing local TB control programmes and to improve coordination.

WHO has established a small information service to assist agencies working in the health sector in the North Caucasus. This service includes an electronic library, in which most manuals are available in English and Russian. Furthermore, hard copies of the English version of the Emergency Health Library Kit are available for copying at WHO–Moscow. The list below includes only the most recent documents.

If you do not have e-mail, please bring a diskette to the library to obtain copies.

Please contact us for a complete list or to contribute: (par@who.org.ru).

New documents

WHO: “Comments on and recommendations regarding the request for drugs for the North Caucasus”. December, 2000;


WHO: Training courses on the healthy nutrition of pregnant and lactating women and their families, and the feeding and nutrition of infants and young children. Khislovodsk. 18 January–5 February, 2001. Assignment Report; and
