

# *North Caucasus Emergency Health Update No.7 13 January 2000*

Health assistance to the population affected by the emergency.  
Compiled by WHO.

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## Profile of IDP population

Number of internally displaced (IDPs) and their locations, as reported by federal and regional governmental authorities, up to 12 January:

Population profile	Number of IDPs
IDPs from Chechnya in Ingushetia	150,000 - 185,000
<a href="#">IDPs who have returned</a>	35,000 - 70,000
IDPs from Chechnya in Dagestan	7,000

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The above numbers are changing constantly as people move to other republics or to the northern parts of Chechnya. The United Nations estimates that at least 75% of IDPs in Ingushetia are living with host families.

According to various sources of information, 15,000-40,000 civilians still remain in Grozny.

Both in Ingushetia and Dagestan, women and children make up an overwhelming majority of the IDPs.

[According to the UNHCR household survey, 78% of the IDPs are women and children.](#)

### Latest news:

[Both sides of the conflict are accusing the other of using chemical weapons.](#)

[Chechen President Aslan Maskhadov calls for a ceasefire because of critical level of chemical contamination in Grozny, “resulting from the Russian air bombardment of a chemical plant in the city and the use of chemical weapons by Russian forces”.](#)

[Russian federal forces categorically deny this and say that chlorine released by Chechen rebels poses a hazard for civilians trapped in Grozny.](#)

[It seems, however, that both sides agree on the reality of hazardous release of chlorine or other chemicals.](#)

## 1. Details of programme activities and health situation

New additions are highlighted in blue.

Health areas	Chechnya	Ingushetia	Dagestan	North Ossetia
<b>Vital statistics</b>	NA	CMR < 1 per 10,000 per day (based on data provided by MOH/I)	N/A for IDPs as a specific category	N/A for IDPs as a specific category
<b>Communicable diseases (including immunization)</b>	<p><u>Areas under federal control:</u> According to the Ministry of Health, Russian Federation (MoH/RF), vaccines have been sent to the republic and vaccinations have started.</p> <p><u>10 January 2000</u> About 4,400 IDPs are living in two tent camps in the village of Znamenskoe. More than 5,000 IDPs are accommodated in the private sector.</p> <p>Thirty-six passenger cars were delivered to the village of Sernovodsk to accommodate IDPs. In total, 1,500 IDPs live in passenger cars and in a hostel and more than 6,600 stay in the private sector in this area. (Press Release of the Federal Migration Service of Russia).</p>	<p>So far 16,577 persons have been vaccinated in accordance with the Russian vaccination schedule.*</p> <p>Data received from the Ministry of Health of Ingushetia: <u>As of 27 December</u></p> <p>61 cases of viral hepatitis; 2712 cases of ARI, 278 of which hospitalised;</p> <p>2548 cases of pediculosis; 505 cases of scabies.</p> <p>In a household survey of IDPs in host families and spontaneous settlements, the most prevalent disease reported was ARI (17% of the IDP population). IDPs reported 13 cases of measles; 63% of the IDP children had been vaccinated against polio, and 38% against measles/diphtheria. On average, the vaccination was administered one year ago. (UNHCR Household Survey of host families and spontaneous</p>	<p>A number of infectious diseases increased during the first nine months of 1999 compared with the same period in 1998, according to data supplied by the Dagestani Ministry of Health.</p> <p>Infectious diseases not encountered for many years are re-emerging: tularaemia, anthrax, rabies, malaria. (MoH/D)</p> <p>Over 9 months of 1999:</p> <p>The number of cases of acute dysentery increased by 2,3 times (for example, in Makhachkala the number of cases of acute dysentery increased threefold, in Kaspiisk – twofold, in Kizilyurt, it increased by 7,3 times, in Kochubei - from 0 to 11 cases);</p> <p>-viral hepatitis A has increased by 1,2 times. 84 cases were registered (its diagnosis is complicated as there are no test systems available);</p>	

Health areas	Chechnya	Ingushetia	Dagestan	North Ossetia
		settlements, 11-13 December 1999)	<p>-36 cases of measles were registered with an outbreak of 29 cases in Tsuntinsky region;</p> <p>-288 cases of epidemic parotitis;</p> <p>-105 patients with brucellosis were hospitalized;</p> <p>-59 cases of tularemia were registered. This disease has not been registered in the republic for more than 10 years.</p> <p>-HIV: there are presently 71 HIV-infected patients registered.</p> <p>-STDs: morbidity rate with syphilis was 48,6. (MoH/D)</p>	
<b>Drugs and supplies</b>	<p>Information on requested assistance from MoH can be obtained from the WHO Office in Moscow, e-mail: <a href="mailto:i.tarakanova@who.org.ru">i.tarakanova@who.org.ru</a></p>	<p>More than 40% of health care facilities lack cold chain equipment. (UN Rapid Assessment Mission).</p> <p>Lack of hepatitis A and rubella vaccine. (State Sanitary Inspection Department, MoH/RF)</p> <p>Information on requested assistance from MoH can be obtained from the WHO Office in Moscow, e-mail: <a href="mailto:i.tarakanova@who.org.ru">i.tarakanova@who.org.ru</a></p>	<p>50% of the medical facilities do not have cold chain equipment (UN Rapid Assessment Mission)</p> <p>Tuberculin for Mantoux testing, ORS, polio and measles vaccine, requested by MoH.</p> <p>Information on requested assistance from MoH can be obtained from the WHO Office in Moscow, e-mail: <a href="mailto:i.tarakanova@who.org.ru">i.tarakanova@who.org.ru</a></p>	

<b>Health areas</b>	<b>Chechnya</b>	<b>Ingushetia</b>	<b>Dagestan</b>	<b>North Ossetia</b>
<b>Health services</b>	<p>Over the past years medical facilities in Chechnya have been severely destroyed.</p> <p>According to the regulations of the MoH/RF, Chechen residents are entitled to medical assistance in RF clinics outside Chechnya. All clinics in North Caucasus are instructed not to refuse Chechen IDPs.</p> <p><u>Areas under federal control:</u></p> <p>MoH/RF is presently elaborating a program on reconstruction of medical facilities in the northern regions of the Chechen republic.</p> <p>The All-Russian Centre for Disaster Medicine “Zaschita” (MoH) is planning to set up a temporary TB dispensary within the premises of Nadterechny Central Republican Hospital.</p> <p><u>Centres of state sanitary epidemiological inspection work in Naursky, Nadterechny, Schelkovsky regions.</u></p>	<p>The health care system of Ingushetia, normally providing for about 350,000 inhabitants, is now faced with an additional 200,000. The extra workload on an already exhausted service, with depleted stocks of drugs and expendables, represents a formidable task.</p> <p>According to the MoH /Ingushetia, the main problem today is to control the sanitary and epidemiological situation in the IDP camps.</p> <p>In preparation of epidemics, the profile of 115 general medical beds have been changed to infectious - in addition to 165 existing beds earmarked for infections.</p> <p>In six IDP camps there are eight medical points. (UNHCR, 18 November 1999)</p>	<p>According to local authorities, 17 medical facilities were completely destroyed during the military action.</p> <p>More than 78% of X-ray units are obsolete. (MoH/D)</p>	
<b>Mental health</b>	<p>CPCD runs a psychological rehabilitation centre for children traumatized by war. This activity has been relocated to camps in</p>	<p>CPCD works with psychological rehabilitation in IDP camps in Ingushetia.</p>	<p>The number of social diseases and drug addiction is growing, as well as borderline functioning.</p>	

<b>Health areas</b>	<b>Chechnya</b>	<b>Ingushetia</b>	<b>Dagestan</b>	<b>North Ossetia</b>
	<p>Ingushetia as the local staff left Chechnya.</p> <p>Since 1995, MDM have been working in Chechnya and are currently working with mentally disabled people, particularly those traumatized by war. MDM supplies psychotropic medication, assists in reconstruction of state psychiatric institutions, and renders medical aid in IDP camps.</p>	<p>MDM is presently working in Ingushetia with mentally disabled people, particularly those traumatized by war.</p> <p>7% of the IDPs had relatives who had been killed or injured in Chechnya,</p> <p>15% of IDP family members remained in Chechnya.</p> <p>13% of the IDPs indicated that they had witnessed harassment of women,</p> <p>8% of the IDP children are separated from their parents and under the care of friends and relatives. (UNHCR Household Survey of host families and spontaneous settlements, December 11-13,1999)</p>	<p>The amount of mental disorders is also growing.</p> <p>(MoH/D)</p>	
<b>Non-communicable diseases</b>		<p>All assessment missions have reported on exacerbation of chronic illnesses.</p>	<p>There are a considerable number of cases of diabetes mellitus. Insulin- dependent forms account for 13% of a general number of cases, while in the RF they account for only 7%.</p> <p>There are also a large number of cases of thyroid gland disease, resulting from iodine deficiency.</p>	
<b>Nutrition</b>		<p>The displaced population is affected by food insecurity. The</p>	<p>60% of pregnant women have severe anaemia during the last</p>	

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		lack of sufficient food makes children and women vulnerable to a significant deterioration in nutritional status (UN Rapid Assessment Mission).	trimester. One third of newborns affected (MoH/Dagestan)	
<b>Tuberculosis</b>	<p>As the TB clinic was destroyed in the 1992-95 war, no treatment has been available in recent years so that needs have been accumulating. A large number of IDPs are therefore now seeking medical assistance in Ingushetia.</p> <p>No data are available on incidence rates for recent years.</p>	<p>Tuberculosis is of great concern to the health authorities. There is a general lack of equipment and expendables for the present screening system with fluoroscopes (X-rays), and a lack of TB drugs.</p> <p>According to the MoH, 61 persons with infectious TB have been detected, 38 of whom are hospitalized.</p> <p><u>Republican TB Dispensary</u></p> <p>Badly needs medications, equipment, expendables.</p> <p>As of Dec 27, 1999:</p> <p>8608 IDPs in 6 IDP camps were examined for TB</p> <p>177 cases of inactive TB were found, 108 IDPs were suffering from</p> <p>infectious TB. (MoH/I)</p>	<p>The TB incidence rate for the first nine months of 1999 is reported at 62.2, down from 77.7 in 1998.</p> <p>(MoH/Dagestan)</p> <p>In recent years, Tuberculin has been in short supply. (MoH/D)</p>	<p>Incidence rate in 1998: 105.5 per 100,000. So far in 1999 the number of registered TB cases are three times higher than in 1998 (MoH/RF official data).</p>
<b>Water and sanitation</b>	<p>Centres of state sanitary epidemiological inspection in the Naursky, Nadterechny and Schelkovsky regions exercise sanitary and bacteriological/</p>	<p>There are insufficient water and hygienic items available. The quality of drinking water is poor. Water is brought to camps, (to some, irregularly) but there are</p>	<p>Dagestan has a general problem with the quality of the drinking water. Waterborne infectious diseases are common, including typhoid and hepatitis A.</p>	

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	<p>sanitary and chemical control over drinking water in centralized water pipelines.</p>	<p>no reservoirs to store water.</p> <p>In many IDP camps, there are no garbage containers, insufficient numbers of toilets, no hot water, no showers, no detergents, no disinfectants, no facilities for washing clothes.</p> <p>Some 20% of the IDPs have no close access to running water and only every fourth family has a jerry can. On average, 19 people share one latrine/toilet and, in a few families, this figure hovers between 50 and 70 people. (UNHCR Household Survey for host families and spontaneous settlements, 11-13 December, 1999)</p>	<p>Many medical facilities in rural areas have no water supply (MoH/D).</p>	
<p><b>Women's and children's health</b></p>		<p>Relief agencies report numerous cases of breastfeeding disorders among IDP women with infants.</p> <p>Since 1 October, IDPs in Ingushetia have given birth to 1067 newborns, 38 of whom were either stillborn or died perinatally (estimated perinatal mortality: 36,9).</p> <p>Up until 14 December, the number of vaccinations performed by MoH/I among IDPs were:</p>	<p>For the first nine months of 1999, there has been a significant increase in maternal mortality. MMR was 46.5 in 1998 while for the first nine months of 1999, it was 57.6.</p> <p>Perinatal mortality is fairly stable around 14.5</p> <p>(MoH, Dagestan)</p> <p>The amount of treatment and diagnostic equipment for obstetric aid is insufficient; there are no modern contraceptives.</p>	

<b>Health areas</b>	<b>Chechnya</b>	<b>Ingushetia</b>	<b>Dagestan</b>	<b>North Ossetia</b>
		Polio: 4,712 Diphteria/Tetanus/ Pertussis: 6,316 Diphteria/Tetanus: 2,478 BCG: 667 Mumps: 712 Measles: 842	The number of complicated deliveries has increased. Only 32,8% of women in childbirth have uncomplicated delivery. The number of spontaneous abortions has reached 15,2. The number of gynecologic diseases is growing.  (MoH/D)	

## 2. Activities of health agencies in North Caucasus

ORGANIZATION	CURRENT ACTIVITIES	ASSESSMENT	RESULTS
<p>All-Russian Centre for Disaster Medicine "ZASCHITA" (MoH/RF)</p>	<p><u>Ingushetia:</u> Seven aid posts in areas with IDPs and a field hospital in Ordzhonikidzevskaya. Three mobile cabinets for TB, TB drugs, vaccines against diphtheria, tetanus and pertussis. Vaccinated more than 24.000 people with diphtheria, pertussis, tetanus, polio and measles vaccines. Psychological aid to IDPs. Temporary in-patient departments in preparation for epidemics of influenza and acute respiratory diseases. Procured 20,5 tons of medicines and medical equipment and 2,12 tons of disinfectants, one reanimation car for the Republic of Ingushetia.</p> <p><u>Chechnya, area under federal control:</u> Three special medical units working in the hospitals of Nadterechny, Schelkovsky and Naursky regions. Three disinfectant and shower sets. Sent a mobile team of specialists TB specialists, psychiatrists, oncologists). Provided 7 sanitary cars . Two TB specialists have been sent to the Naurskaya central republican hospital, where a TB department is set up. Procured 18,525 tons of medical equipment, 7,12 tons of disinfectants and equipment from German field hospitals (with subsequent transfer to medical institutions) 1,2 tons of vaccines against diphtheria, pertussis, tetanus, polio and measles have were prepared for shipment to Mozdok.</p>	<p>Three central district hospitals of the northern regions of the Chechen Republic are in need of medical equipment for the total sum of USD 373,300.</p> <p>To render medical assistance to IDPs in Ingushetia, drugs and expendables for the total sum of USD 95,200 are needed.</p> <p>In Grozny and neighbouring areas, plans to:</p> <ul style="list-style-type: none"> <li>-send teams of specialized medical assistance with necessary equipment and specialized units of sanitary epidemiological service to preserved medical and sanitary and epidemiological institutions in Grozny and the neighbouring area;</li> <li>-set up reserve beds in medical institutions in neighbouring areas;</li> <li>-form reserves of medical property, disinfectants, vaccines, diagnostic means and nutrient media;</li> <li>-assist in buying medical items, drugs and sanitary cars; to monitor their delivery;</li> <li>-assist in reconstruction of health care facilities in Chechnya.</li> </ul>	

CPCD	<p>Provides psycho-social assistance to children in four IDP camps in Ingushetia (1 in Sleptsovskaya, 3 in Karabulak). Runs a psychological rehabilitation centre for children in Grozny, temporarily closed down. Supports the Grozny orthopedic and prosthetic centre, providing equipment, materials, etc.</p> <p>Provides relief aid (shelter, clothing, food, blankets), medical equipment and supplies to the hospitals in Chechnya. Has assisted in reconstructing state medical institutions in Chechnya.</p>		
ICRC/Russian Red Cross	<p>Has provided medical supplies to health facilities in Grozny, Gudermes and Urus Martan, and supported hospital no. 9 in Grozny. Several relief convoys.</p> <p>Medicine and medical supplies were provided to hospitals in Makhachkala, Buinaksk and Khasavyurt.</p> <p>In December 1999, RRC has established 1 stationary and 2 mobile medical points in Ingushetia and 1 stationary medical point in Dagestan.</p>	<p>Will supply a stock of emergency materials and drugs to the principal hospitals of the Chechen Republic.</p> <p>Plans to run reception centres outside the North Caucasus, which will provide basic first aid, legal counseling, health and other services to IDPs.</p>	
MDM	<p>Is providing medical assistance to six camps of IDPs in Chechnya with 11 medical staff (2 in Grozny, 2 in Gudermes, 2 in Argun) covering about 4,000 persons.</p> <p>Started on 9 November to provide emergency medical care and mental health care in five IDP camps in Ingushetia. (Severny, Sputnik in Sleptsovskaya, and Karabulak (3)) with 35 medical staff, covering about 21,000 persons.</p> <p>Provides psychotropic medication to psychiatric hospitals of the towns Darbankhi, Zakan-Yourt and</p>		

	to polyclinics and medical points rendering psychiatric aid, assists in reconstructing state psychiatric institutions, renders medical assistance in IDP camps.		
UNFPA	UNFPA's counterpart, the Stavropol Russian Family Planning Association, will send an assessment mission to Ingushetia in January to do a rapid reproductive health assessment. Will discuss the needs and requirements with local medical workers. Will further procure the most necessary supplies and equipment and bring it to Ingushetia. Will also conduct necessary training for local medical personnel and distribute the RH supplies.		Stavropol Russian Family Planning Association will be UNFPA's partner in distribution and coordination of activities .
UNDP		Is planning projects creating new settlements for IDPs with the relevant social infrastructure: capacity building in medical services, communications and education; and involvement of IDPs in public works. These activities will be carried out in close cooperation with WHO and IOM and Federal and Regional Employment and Construction Services.	
UNICEF	Has provided 15 WHO new emergency health kits (i.e. medical supplies covering 150,000 people for 3 months) to Ingushetian hospitals.  One truckload of medical supplies to Mozdok.  CDC, Atlanta will supply 3, 500 000 dosages of Oral Polio Vaccine for North Caucasus' children.  Provided the third shipment of basic kits (i.e. medical supplies covering 150,000 people for 3 months).		

<p>WHO</p>	<p>WHO is continuing and intensifying its programmes in the north Caucasus, such as TB capacity building in the area and support to a prostheses workshop in Vladikavkaz, North Ossetia, providing lower limb prostheses to amputees from Chechnya, North Ossetia, Ingushetia and Stavropol krai.</p> <p>A workshop on “Health as a bridge to peace” has been postponed due to the upsurge of the conflict.</p> <p>In order to perform rapid assessment missions, collect information and coordinate the activities of international humanitarian organizations, monitor and evaluate the situation in the health sector, WHO has strengthened its presence in Moscow with an emergency public health expert, and has established a field presence in Stavropol.</p>		<p>In cooperation with UNHCR, WHO organized a weekly training course on direct microscopy for laboratory workers from Stavropol. UNICEF supplied 25 binocular microscopes as part of the effort to assist in effective and accurate TB diagnostics. Dec 21-24, training seminars for 90 doctors took place in Stavropol.</p> <p>Interagency health coordination meetings were held in Moscow on 17 December 1999 and in Stavropol on 21 December. A WHO information centre on the north Caucasus has been set up at <a href="mailto:who@iom.int">who@iom.int</a> (see Annex 1 below) Minutes from the meetings in Moscow and in Stavropol are available from the Information centre.</p>
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**Abbreviations:**

- CPCD – Centre for Peacemaking and Community Development
- ICRC - International Committee of Red Cross
- IFRC – International Federation of Red Cross and Red Crescent Societies
- IOM - International Organization for Migration
- MDM – Médecins du Monde
- MSF – Médecins sans Frontières
- MoH/RF – Ministry of Health , Russian Federation
- MoH/I – Ministry of Health, Republic of Ingushetia
- MoH/D – Ministry of Health, Republic of Dagestan
- MoH/C – Ministry of Health, Republic of Chechnya

***This information bulletin is compiled by WHO Emergency Health Coordinator for North Caucasus, intended for public information. It is not an official WHO document. Please be aware that the situation in the area may change rapidly. For corrections and updates, please contact [who@iom.int](mailto:who@iom.int)***

Find previous issues of this bulletin at <http://www.who.dk/Ch/Cor/welcome.htm>

## Annex 1

# WHO INFORMATION SERVICE

for international health agencies, rendering assistance to North Caucasus

WHO has established a small information service to assist new agencies coming in to work/review the possibilities to work in the health sector in the North Caucasus. We can provide you with Ministry of Health's detailed requests for assistance, WHO guidelines, assessment reports, useful addresses etc.

Also, if your organization has reports you think would be useful for others, and you would like to share them, we would be happy to include them on the list. Inquiries to: [who@iom.int](mailto:who@iom.int)

If you do not have e-mail, please bring a diskette for copies.

### Some of the available reports:

- List of useful addresses
- Minutes from health coordination meetings in Moscow and Stavropol
- Handbook for NGOs in North Caucasus
- Guidelines for drug donations (available also in Russian)
- WHO Essential Drug List
- WHO: Declaration of cooperation. Mental Health of Refugees and Displaced Populations in Conflicts and Post-conflict situations (available also in Russian).
- WHO: Mental Health of refugees (only hard copies in Russian available)
- WHO: Tool for the Rapid Assessment of Mental Health Needs of Refugees and Displaced populations (available also in Russian).
- Vaccination schedule of the Russian federation
- UNHCR's household survey of IDPs in host families and spontaneous settlements
- Infant feeding in emergencies/A guide for mothers
- North Caucasus Emergency Health Update
- List of requests for assistance from MoH/RF, MoH/D, MoH/I