Highlights of the period

- The UN Secretary-General reduced the UN Security Phase in the Chechen Republic and neighboring Kurskoi district of Stavropol Krai from Phase V to IV. This opens up new opportunities for UN presence and project activity in Chechnya and the North Caucasus.

- Update to the 2006 Inter-Agency Transitional Workplan for the North Caucasus (TWP) was launched in Moscow on 5 July.

- The first Educational Forum “Critical cardiology issues” was held in the Chechen Republic on 10-13 September.

Health update

- A significant deterioration in the epidemiological situation for Crimean-Congo hemorrhagic fever (CCHF), registered in the Southern Federal District of Russia in spring 2006, continued throughout summer.

- WHO mid-year analysis of demographic data in the republics of the North Caucasus proves that maternal and infant mortality indicators in all republics of the North Caucasus remain high.

Full details are contained in this report.

Upcoming events

- Results of the World Food Programme (WFP) Vulnerability Assessment and Mapping (VAM) survey conducted in Chechnya and Ingushetia in August 2006 will be presented in Moscow, Nazran and Grozny in mid November.

- 2007 Inter-agency Transitional Workplan for the North Caucasus (TWP) will be launched in Moscow on 7 December.

- Implementation of the EU-funded Project on Strengthening Primary Health Care, run by WHO, starts in the North Caucasus in December.
Health Action in the North Caucasus Republics

**Highlights**

*Reduction of UN Security Phase in Chechnya.*

The UN Secretary-General reduced the UN Security Phase in the Chechen Republic and neighboring Kurskoi district of Stavropol Krai from Phase V to IV. This opens up new opportunities for UN presence and project activity in Chechnya and the North Caucasus. For health sector projects it will permit provision of more direct activities, including training courses inside Chechnya through participation of WHO experts and consultants, frequent project monitoring, better data gathering and close contacts with local state health experts.

On 5 July, launch of Update to the 2006 Inter-Agency Transitional Workplan for the North Caucasus (TWP) was held in Moscow. The Update focuses on four crosscutting issues that are of central importance to realization of the goals of the Transitional Workplan. Those issues include the security situation, changes in the Food Security and Agriculture Sector, IDP durable solutions, and socioeconomic recovery.

*Interagency Workshop on 2007 Transitional Workplan for the North Caucasus,* held on 19 September 2006 in Nazran, brought together the representatives of the South Federal Okrug, the republics of the North Caucasus (NC), federal ministries, UN agencies, NGOs and the ICRC. The workshop defined the objectives to be spelled out in the 2007 Transitional Workplan for NC and the key areas for interagency cooperation. The Federal Government representative, Mr. Pochinok, Deputy President Plenipotentiary in the Southern Federal Okrug, presented the priorities of the federal government with regard to recovery and development in the North Caucasus, which included support to the educational system, with a focus on pre-school education; assistance to orphans and children with disabilities; support for agricultural development; job creation; building the capacity of local governance structures; support to the rehabilitation of communal infrastructure; support to small businesses; and long-term solutions for IDPs.

*First Educational Forum "Critical cardiology issues" was held in Grozny.* Following the request of the Ministry of Health of the Chechen Republic, a group of leading specialists from the State Research Center for Preventive Medicine, headed by the Director, Chief Cardiologist of the RF Ministry of Health and Social Development, Academician R.G. Oganov, held the first educational forum on critical cardiology issues in Grozny on 10-13 September 2006. The World Health Organization (WHO) facilitated and financially supported the organization of the forum.

A three-day program covered basic up-to-date trends in cardiology, and included such topics as: main reasons for the outburst of cardiovascular diseases and prevention and treatment of arterial hypertension and ischemic heart disease, diagnosis and treatment of metabolic syndrome, modern aspects of arterial hypertension diagnosis and treatment, importance and efficiency of setting up health schools for cardiology patients and dietetic correction of atherosclerosis, modern approaches to diagnosis and treatment of lipid metabolism disorder and non-coronarogenic myocardium diseases, cardiac rhythm disorders and cardiac insufficiency.
All in all, some 250 doctors – general practitioners and cardiologists from all districts of the Chechen Republic attended the forum.

Speaking to the Vice-Prime Minister of the Chechen Government Mr Kh. Vaikhanov, academician R.G.Oganov stressed the necessity to reconstruct a cardiological center, which would satisfy all modern requirements. He has also focused on the necessity to train and re-train Chechen doctors in the leading Russian medical institutions.

Both parties agreed to continue cooperation in the field of education and scientific activities. In particular, future plans include a research on monitoring risk factors and cardio-vascular diseases and holding a scientific and practical conference for general practitioners.

**Health situation**

A significant deterioration in the epidemiological situation for Crimean-Congo hemorrhagic fever (CCHF), registered in the Southern Federal District of Russia in spring 2006, continued throughout summer. The first cases of CCHF were registered in mid April in Stavropol region, and were followed by more cases in the Republic of Kalmykia, Rostov region and other areas. By the end of August, 41 cases of Crimean-Congo haemorrhagic fever (CCHF), including one fatality, have been recorded in 12 districts of the Stavropol region. For comparison, in 2005, 38 cases were recorded in 15 areas of the region. As in previous years, tick bites are the main route of infection, accounting for 61 per cent of all cases of CCHF. 28% of patients exposed to infection by tick bites are employed in agriculture and animal husbandry. A total of 7770 people in the region sought treatment for tick bites. This is 1500 fewer than during the same period of 2005. At the same time, 334 people admitted to hospitals with suspected CCHF exceeded by 46 per cent the number admitted to hospitals in 2005 on suspicion of CCHF infection. Numerous cases of CCHF were also registered in the Republic of Kalmykia, the Rostov region, the Astrakhan and Volgograd areas, and in the Republic of Dagestan.

**2006 mid year state health sector performance in Chechnya.** The most important problems for the state health sector remain to be: poor and low logistic base of state health facilities (low funding, provision of drugs, instruments, equipment, etc.); high levels of infant and general mortality; increasing population morbidity; strong shortage of staff, especially in rural area and specialised health services and absence of multi-profile, specialised dispensaries and hospitals.

In 2006, the number of hospital beds in Chechnya has increased from 7848 in 2005 to 8429. There is an increase of paediatric hospital beds by 17.4 in 2006 which is still 2.7 times lower than average in RF. In 2006 more than 79.000 people received hospitalised care (10.000 people more than in 2005). The number of paediatric consultations has increased from 275.563 in mid 2004 and 285.059 in mid 2005 to 336.473 in mid 2006. The increase is reported due to better registration and home visits. Children morbidity is 267.6 (per 1000 children population) with 235.2 in 2005. Children chronic morbidity is 470.5 with 426.8 in 2005.

**Update of implementation of national health priority plan in Chechnya.** In the first six month of 2006 the MoH of Chechnya has reached the following results in implementation of the national health priority plan program components:

- **Additional salary payments to the eligible groups of health workers such as family practitioners, district physicians, pediatricians and district physician and pediatrician nurses** – as of June 8, some 25 million rubles have been paid out in salaries to the registered 1,042 health workers. Over the first four months of 2006 the number of district physicians and pediatricians increased from 220 to 280, the number of district physicians and pediatrician nurses increased from 588 to 753.

- **Training and re-qualification of family practitioners, district physicians and pediatricians** - training and re-qualification of Chechen state health experts took place on the basis of Rostov state medical university. As of June 2006, 75 doctors (57 of them - through WHO support) and 18 family practitioners received training.
• **Supply of diagnostic equipment to the ambulatory-polyclinic facilities** - by the end of 2006 it is expected to receive 273 units of diagnostic equipment, including 64 ultrasounds, 102 ECGs, 48 sets of laboratory equipment, 15 sets of x-ray, 44 sets of endoscopes. By mid year, the MoH received 17 sets of endoscopes and 10 sets of laboratory equipment.

• **Provision of emergency ambulances, including reanimation ambulances** - it is expected to receive 54 emergency ambulances and 1 newborn reanimation ambulance in 2006. The month of supply is November 2006.

• **Immunization** - in 2006 there are plans to immunize some 245,733 people against Hepatitis B; 66,953 - rubella; 18,650 - polio and 171,872 - influenza. By mid year, the MoH provided vaccination for Hepatitis B to 81,272 people. Rubella, polio and influenza vaccines have not been timely supplied. As of May 2006, none out of 160,000 people eligible for additional immunization have received rubella vaccination. Out of 245,660 people requiring Hepatitis B vaccination, 90% were covered by the first round and 31.8% - by the second round of vaccination.

Within HIV/AIDS prevention, the Republican AIDS centre received 15 HIV test systems and 20 packs of ART drug “Retrovir”. It is expected to cover 90,000 people by HIV testing in 2006. By mid year, more than 38,191 people got HIV tested in the Republic.

• **Additional dispenserization of population (35-55 years old)** - in 2006-2007 it is expected to carry out additional dispenserization of people working in state and municipal structures, education, health, culture and research facilities. There are plans to provide general medical observation to some 81,943 people. MoH is gathering data from all Chechen districts.

• **Additional medical observation of people working in hazardous environment** - the Chechen MoH identified 456 people working in hazardous conditions. Their medical observa-

• **Provision of medical care to pregnant women in state and municipal health structures** - in 2006 it is planned to issue and pay out 27,000 newly introduced birth certificates. As of June 2006, 9286 birth certificates have been paid. 274 gynecologists and 22 neonatologists are registered working in Chechnya.

• **Salary increase payments to FAP staff, doctors, feldshers and nurses of emergency ambulance service** - it is expected to cover salary increase payments to FAP staff, doctors, feldshers and nurses of emergency ambulance service. The MoH completed staff registration and identified 1358 eligible medical staff.

• **Provision of high technology medical care** - MoH plans to refer 1087 patients for specialised out-of-town medical treatment in II-IV quarters of 2006. In the first quarter of 2006, 281 people got referred for such treatment.

**MoH of Chechnya 2007 priorities** are formulated as follows: to continue rehabilitation of health care facilities focusing on PHC level with diagnostic services; various training courses for health workers and equipment technicians; provision of drugs to welfare beneficiaries; provision of equipment and consumables; physical observation of general health status of population in rural area; MCH programs (including prevention of anemia and iodine-deficiency, etc.); promotion of healthy lifestyles, prevention of HIV/AIDS, sexually transmitted diseases (STD) and reproductive health among youth and adolescents (including equipment for STI dispensary in Grozny); and strengthening capacity of health information systems.
1. **Mother and Child Health**

<table>
<thead>
<tr>
<th></th>
<th>North Ossetia</th>
<th>Chechnya</th>
<th>Ingushetia</th>
<th>RF (2005)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Birth rate (per 100000 population)</td>
<td>5,6</td>
<td>18,0</td>
<td>7,1</td>
<td>10,3</td>
</tr>
<tr>
<td>Maternal mortality (per 100000 live births)</td>
<td>76,3</td>
<td>52,9</td>
<td>87,1</td>
<td>23,4</td>
</tr>
<tr>
<td>Infant mortality (per 1000 births)</td>
<td>10,7</td>
<td>17,7</td>
<td>37,7</td>
<td>10,7</td>
</tr>
<tr>
<td>Natural increase</td>
<td>- 0,4</td>
<td>15,5</td>
<td>5,3</td>
<td>- 5,5</td>
</tr>
</tbody>
</table>

**WHO** mid-year analysis of demographic data in the republics of the North Caucasus proves that maternal and infant mortality indicators in all republics of the North Caucasus remain high. Maternal mortality indicators in all the republics are critical. Over the first six months of 2006 maternal mortality in North Ossetia exceeded the 2005 federal indicator more than threefold. It also exceeds last year’s republican indicator by 51%. In Chechnya, maternal mortality is twice as high as RF average and exceeds last year’s republican indicator by 18%. In Ingushetia, maternal mortality has increased twofold and exceeds 2005 RF average more than threefold. It is unlikely that by the end of the year the figures will suffer any dramatic changes. The reasons for that are poor health of women of childbearing age and numerous complications during pregnancy and at child birth. According to MoH/I, 85% of pregnant women suffer from gynecological diseases, extragenital and other pathologies. 80% of pregnant women are anemic; 31,4% suffer from urinary tract diseases, 3,6% have blood circulation disorders. 63% of deliveries are pathologic, resulting from late histoses, bleeding, placental preposition and other reasons. According to MoH/Ch, the overwhelming majority of women at childbirth die of obstetric embolism and extragenital pathologies.

Infant mortality indicators in the North Caucasus republics vary. In North Ossetia they do not exceed the RF average, but are 16% higher than last year’s republican indicators.

In Ingushetia, infant mortality exceeds the RF average 3,5 times and last year’s republican indicator - twofold. Infant mortality in Chechnya increased by 15,6% compared to 2005 and exceeds the RF average by over 60%. Main reasons for infant mortality are various conditions of perinatal period, depending not only on women’s health but also on the quality of obstetric services. Analysis of infant mortality reasons is complicated as no proper pathomorphology services are available. The critical situation in Ingushetia results from a number of reasons, where the lack of proper obstetrics facilities is the crucial one.

**WHO** continued implementation of Integrated Management of Childhood Illnesses (IMCI) programme in Chechnya. In July, the agency conducted a ten-day training course for 20 health workers (mainly paediatricians, feldshers, and nurses) in Vedeno district. In August, four one-day trainings on IMCI components were held for 62 PHC workers (mainly ambulatories staff) of Sunzha and Nazran districts of Ingushetia and Prigorodny district in Oktyabrskoe village in North Ossetia. In August, WHO also conducted a five-day training course on Essential antenatal care and breastfeeding for 20 Ingush gynaecologists and obstetricians in Nazran, and held a a two-day audit of earlier introduced Making Pregnancy Safer practices in selected maternity wards and hospitals in the Republic of North Ossetia. In September, three one-day training courses on IMCI components were held for 58 health workers in Nazran city hospital, Malgobek.
2. Epidemiology and immunization

Within its Expanded Programme for Immunization (EPI), UNICEF completed the procurement of 314,180 disposable syringes for 5 district hospitals in Chechnya and 16 health facilities in Ingushetia. The distribution of the syringes complements the efforts of the local Ministries of Health in implementing the National Immunization Calendar as well as promoting the safety of immunization practices for children in both republics. UNICEF also procured and distributed 9,600 safety boxes to 17 district-based health facilities in Chechnya and 9 health facilities in Ingushetia. These items were distributed with the purpose of safe disposal of used syringes, thus, allowing health staff to conduct immunization in a safe manner. UNICEF also focused on upgrading the population’s awareness of the benefits and importance of immunization, through the distribution of information materials to beneficiaries in Chechnya and Ingushetia. Within the framework of the same project, UNICEF designed and printed 20,000 specific notebooks for paediatricians, containing basic anthropometry and psychometric information for young children – to be distributed to specialists working in MCH facilities in Chechnya and Ingushetia, and distributed to primary beneficiaries in various health facilities in both republics. 20,000 posters on immunization, carrying important messages for mothers and other primary child care providers.

3. Mental health

Following the approval of a Plan of Action by the UNICEF-supported Psychosocial Steering Committee in Chechnya, and with the aim of creating two complementary psychosocial networks for children – a school-based methodological one and a rehabilitation one –, UNICEF has identified the premises for the future centres in Grozny and in the following districts of Chechnya: Argunsky, Shelkovskoy, Shalinsky, Kurchaloiisky, Achkhoi-Martanovsky and Urus-Martanovsky. UNICEF has assessed the physical state of the premises of all 14 centres envisaged and selected a company that will conduct all required renovation works. In the meantime, UNICEF continued the procurement of the equipment and materials that will be provided to the centres – which will be delivered upon completion of the renovation works.

In the framework of its psychosocial rehabilitation project in Chechnya UNICEF has subcontracted the NGO SERLO, which will, inter alia, ensure the monitoring of all project-related activities, including the establishment of the two complementary networks of school-based and rehabilitation centre-based networks in Chechnya, the training of psychologists and the distribution of equipment as well as materials.

On 2-6 August, UNICEF organized – in cooperation with ‘Harmony’, the Saint Petersburg’s Institute for Psychotherapy and Counselling, the 4th training for trainers on school counselling, targeting psychologists from Chechnya. A group of 22 school psychologists, representing different districts of Chechnya, participated in the training, which focused on ‘working with children experiencing loss’.
**Water and Sanitation**

On 1 September, **UNICEF, PHO** and the Chechen local water provider Grozvodokanal handed over to the latter the management of the water purification and distribution project at water base WNS-1. WNS-1 with its material resources, including the water reservoirs, 2 water treatment units, spare parts, water tanks, bladders and trucks will be now fully managed by Grozvodokanal. PHO will continue running the second water treatment base and its corresponding delivery network till the end of 2006 and on 1st of January 2007, this part of the programme will also be passed to Grozvodokanal.

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**Other news**

Three issues of the "Bulletin for health care managers in Russia", published by WHO Zdravinform health data base project and WHO Documentation centre in Moscow in June-September 2006, highlighted the issues of Sexually Transmitted Infections (STI), occupational health and re-structuring in-patient healthcare system. The bulletin can be obtained at http://zdravinform.ru.

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**List of abbreviations:**

- ACF: Action Contre la Faim
- CDH: Central District Hospital
- CPR: Cardio-pulmonary resuscitation
- DOTS: Directly Observed Therapy Short Course
- DRC: Danish Refugee Council
- EPI: Expanded Programme on Immunization
- FAP: Feldsher/obstetric post
- GP: General practitioner
- HI: Handicap International
- ICRC: International Committee of the Red Cross
- IDPs: Internally displaced persons
- IMC: International Medical Corps
- IMSMA: International Management System for Mine Action
- IR: Islamic Relief
- IRC: International Rescue Committee
- LSG: Lets Save the Generation
- MCH: Mother and Child Health
- MDM: Médecins du Monde
- MoH I: Ministry of Health of the Republic of Ingushetia
- MoH RF: Ministry of Health of the Russian Federation
- MoH Ch: Ministry of Health of Chechnya
- MSF-B: Médecins sans Frontieres-Belgium
- MSF-F: Médecins sans Frontieres-France
- MSF-H: Médecins sans Frontieres-Holland
- PHO: Polish Humanitarian Organization
- PTSD: Post-traumatic stress disorder
- OCHA: United Nations Office for the Coordination of Humanitarian Affairs
- SARC: Saudi Red Crescent Society
- SES: Sanitary Epidemiological Surveillance
- STI: Sexually Transmitted Infections
- TAC: Temporary accommodation centre
- UNICEF: United Nations Children's Fund
- UNHCR: UN High Commissioner for Refugees
- UXO: Unexploded ordnance

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