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Strengthening of the coordination of humanitarian and disaster relief assistance of the United Nations, including special economic assistance: strengthening of international cooperation and coordination of efforts to study, mitigate and minimize the consequences of the Chernobyl disaster

Optimizing the international effort to study, mitigate and minimize the consequences of the Chernobyl disaster

Report of the Secretary-General*

Summary

The present report is submitted in accordance with General Assembly resolution 58/119 of 17 December 2003 on the strengthening of international cooperation and coordination of efforts to study, mitigate and minimize the consequences of the Chernobyl accident. In that resolution, the General Assembly requested the Secretary-General to submit to it at its sixtieth session a report containing a comprehensive assessment of the implementation of the resolution, including proposals on how better to focus international cooperation to promote long-term development in Chernobyl-affected areas, bearing in mind exceptional Chernobyl-related needs.

The report reviews the activities undertaken by the funds, programmes and agencies of the United Nations and other international actors to provide assistance to communities affected by the Chernobyl accident. In line with the United Nations shift in strategy from a humanitarian approach to an emphasis on sustainable development, the report focuses on initiatives that revive community self-reliance. It also describes the consensus established in 2005 by Chernobyl Forum, a collaborative effort by eight United Nations bodies and the Governments of the three most affected countries, to assess definitively the health, environmental and socio-economic impact of Chernobyl.

* The submission of the report was delayed to take into account the findings of the Chernobyl Forum.

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Contents

I. General situation

1. Nineteen years after the accident at the Chernobyl Nuclear Power Plant on 26 April 1986, hundreds of thousands of people in Belarus, the Russian Federation and Ukraine continue to suffer the consequences. Radiation has in most areas receded to natural background levels, and the vast majority of the population need not live in fear of serious health consequences due to radiation released during the accident. However, the accident has caused elevated levels of thyroid cancer among people who were children at the time of the accident, with some 4,000 Chernobyl-related cases diagnosed and treated since 1986. In the wake of the accident, hundreds of thousands of people were displaced from their native towns and villages, and millions in the region were left traumatized by lingering fears about their health.

2. The region has not recovered the livelihoods lost as a result of the nuclear accident. Chernobyl-affected communities have struggled to cope with the broader economic, political and social changes that have occurred in the region during the transition period that followed the dissolution of the former Soviet Union in 1991. Farming villages have struggled to overcome the stigma associated with produce from contaminated regions, and also to develop viable income sources in new market conditions. A severe mortality crisis, particularly among adult males, across much of the Commonwealth of Independent States (CIS) has heightened widespread perceptions of ill health in the Chernobyl-affected regions, promoting resignation and even fatalism among local residents. Generous benefit provision to Chernobyl area residents has inadvertently promoted a passive culture of dependency while also posing an unsustainable burden on the budgets of the three most affected countries.

3. Over the years it has become apparent that the residual problems associated with Chernobyl have moved into the mainstream of the mandates and development priorities addressed by the United Nations system and the larger international assistance community, namely, poverty and lack of economic opportunity; inadequate health care; and environmental degradation. Those issues are at the heart of the development agenda established by the Millennium Development Goals.

4. In response, United Nations agencies have over the past three years been implementing activities designed to promote a new recovery strategy for the affected territories. The key elements of this strategy include a shift from emergency humanitarian assistance to a long-term development approach; empowerment of individuals and communities; targeted assistance to the most affected groups; and a policy of promoting a return to normality among the affected populations. Compared to the scope of the need, those efforts rest on modest financial resources, in conditions in which Chernobyl is unfortunately often seen as an old problem. This approach needs to change if the challenges facing the region are to be overcome.

5. The three countries most affected by Chernobyl — Belarus, the Russian Federation and Ukraine — continue to shoulder most of the burden of the Chernobyl legacy (for the reports of the three affected States regarding their efforts to overcome the consequences of Chernobyl, see annexes I-III). Under the circumstances, international organizations need to approach the Chernobyl challenge with humility and to focus their efforts above all on advocacy, applying

expertise from successful development initiatives elsewhere and pilot and seed projects that, if successful, can be readily replicated on a larger scale.

II. Coordinating a new development approach

6. In 2002, the United Nations adopted a new strategy on Chernobyl. This was mapped out in a report entitled "The human consequences of the Chernobyl nuclear accident: a strategy for recovery", which was commissioned by the United Nations Development Programme (UNDP) and the United Nations Children's Fund (UNICEF), with the support of the Office of the Coordinator for Humanitarian Affairs of the United Nations Secretariat and the World Health Organization (WHO). The recommendations contained in that report have guided the response of the United Nations system to the consequences of the Chernobyl accident in the years since its publication. Aiming to break away from patterns of dependency and passivity unwittingly induced by years of Government support for those affected by Chernobyl, the report recommended a shift from emergency humanitarian assistance to aid aimed at fostering self-reliance and sustainable development.

7. In line with this new strategy for recovery, responsibility for coordination of Chernobyl issues across the United Nations system was shifted in 2004 from the Office for the Coordination of Humanitarian Affairs to UNDP. A ceremony marking this transfer was held during commemorations of the eighteenth anniversary of the Chernobyl accident, when the UNDP Administrator formally assumed the role of United Nations Coordinator of International Cooperation on Chernobyl from the Under-Secretary-General for Humanitarian Affairs. The logistics of this transfer, including responsibility for the United Nations Chernobyl Trust Fund and the website entitled "The United Nations and Chernobyl" (http://www.un.org/ha/chernobyl), will be completed in 2005.

8. UNDP has recognized the need to maintain the practice established under the Office for the Coordination of Humanitarian Affairs of convening regular meetings of the Chernobyl Quadripartite Coordinating Committee, consisting of the United Nations Coordinator of International Cooperation on Chernobyl and the Ministers of Belarus, the Russian Federation and Ukraine who hold responsibility for the mitigation of the consequences of the Chernobyl accident. Such high-level coordination of Chernobyl policies and activities will be crucial in the lead-up to the twentieth anniversary in April 2006. UNDP will also resume regular meetings of the Inter-Agency Task Force on Chernobyl as a means of ensuring effective communication and coordination on the part of the many United Nations agencies involved in Chernobyl efforts, and also as a measure to promote coherence and efficiency in resource mobilization efforts. To respond effectively to the day-to-day challenges of Chernobyl, the UNDP Administrator will also make use of the coordination capacities of the United Nations Development Group.

9. In exercising its coordination role, UNDP plans to draw heavily on the experience already amassed by its country offices in Belarus, the Russian Federation and Ukraine in designing programmes aimed at promoting economic development and community self-sufficiency (see paras. 11-19 below). It also aims to build synergy among the three countries by promoting subregional coordination, drawing on best practices from relevant development success stories in other regions and giving high visibility to measures that yield results in reviving community spirit and

economic vitality, with an eye to encouraging greater donor commitment to the cause of Chernobyl recovery.

III. Ongoing international assistance efforts

10. United Nations country teams are working in each country to implement the recommendations of the 2002 strategy for recovery. Those efforts are supported by broader agency initiatives tailored to the shared needs of Chernobyl-affected populations in all three countries. International assistance falls into five main categories: (a) community-based development; (b) infrastructure; (c) health care and healthy lifestyles; (d) radiation mitigation and standard setting; and (e) reactor safety.

Community-based development

11. In Belarus, United Nations assistance for Chernobyl recovery efforts is channelled mainly through the mechanisms of the Cooperation for Rehabilitation (CORE) programme, which draws on the report entitled "The human consequences of the Chernobyl nuclear accident: a strategy for recovery" and the 2002 report of the World Bank entitled "Belarus: Chernobyl review" as its conceptual basis. Jointly with the Government of Belarus, the programme was launched in October 2003, when the first 11 co-signatories subscribed to the CORE Declaration of Principles. Since then the programme has grown to include 29 members, including UNDP, the United Nations Educational, Scientific and Cultural Organization (UNESCO), UNICEF, the United Nations Population Fund (UNFPA), the Organization for Security and Cooperation in Europe (OSCE), the European Commission, several European Union member States and the Swiss Agency for Development and Cooperation, as well as a number of international non-governmental organizations dealing with Chernobyl, and the local authorities of the participating districts.

12. The CORE programme operates as a joint initiative of local, national and international partners and donors focusing (at least initially) on four affected districts, Bragin, Chechersk, Slavgorod and Stolin, and on pilot projects in four priority areas: health care and surveillance; economic and social development in rural areas; culture and education of young people and preservation of the memory of Chernobyl; and radiological quality (developing a system aimed at enabling local residents to monitor their own surroundings). UNDP executes a support project for the CORE programme in partnership with the Chernobyl Committee of Belarus and the Swiss Agency for Development and Cooperation.

13. The CORE programme offers promise in promoting a new development approach in the Chernobyl-affected regions of Belarus by providing a genuine opportunity for local communities to contribute directly to improving the conditions in which they live and creating sustainable livelihoods for local households. To date, the CORE programme has helped create and support 18 large- and 53 small-scale project initiatives, all aimed at encouraging self-sufficiency at the local level. Such efforts are designed to create a solid foundation for longer-term development projects. As of mid-2005, the programme had mobilized more than €3.5 million for project implementation against total budgeted project needs of some €6.6 million.

14. In the Russian Federation, Chernobyl-affected territories are viewed as a model area for piloting new regional and local mechanisms of economic recovery,

investment promotion and employment generation. With financial support from the Office for the Coordination of Humanitarian Affairs, the UNDP Russian Federation office is helping to establish a business promotion centre and microcredit facility in the Bryansk oblast. Projects will benefit from efforts in community mobilization and rural development piloted elsewhere in the Russian Federation and the region.

15. In Ukraine, United Nations support to Chernobyl is delivered primarily through the UNDP Chernobyl recovery and development programme, which supports the Government of Ukraine in promoting long-term social, economic and environmental recovery in Chernobyl-affected areas. Through the programme, UNDP is applying an area-based development approach, which draws on experience from other parts of the world afflicted by conflict or crisis. With an emphasis on community empowerment, the programme helps local residents organize their own self-governing community institutions and then manage their own recovery efforts. The programme works at the grass-roots level in the four oblasts most affected by Chernobyl. By mid-2005, the programme covered nearly 100 villages in 16 districts and had implemented more than 70 community projects. Addressing the needs of children and youth and promoting employment and job creation opportunities are given high priority.

16. UNDP Ukraine also provides advisory and capacity-building support to bring local authorities and communities together for joint recovery and development activities. As a result, resources mobilized for community-based projects come from multiple sources: communities (20 per cent), local governments (40 per cent), UNDP/Chernobyl recovery and development programme (30 per cent) and other sponsors (10 per cent). As community members increasingly take charge of their own recovery, the burden on the State administration is significantly reduced and a new forward-looking mentality emerges among the affected population.

17. The Chernobyl recovery and development programme also supports policy and institutional change aimed at encouraging a shift from extensive social benefit provision to more fiscally sound measures targeting the truly needy and spurring the creation of new livelihoods. A pilot project under way in Ukraine could potentially serve as a model for a subregional effort aimed at providing policy advice to the Governments of Belarus and the Russian Federation.

18. The community-based approach introduced in Ukraine has met with an enthusiastic response from donors, demonstrating that it is possible to overcome the donor fatigue surrounding Chernobyl. Between 2003-2005, UNDP raised more than $3 million for the programme, including $1.2 million from the United Nations Trust Fund for Human Security funded by the Government of Japan; $1.2 million from the Canadian International Development Agency; $274,000 from the Swiss Agency for Development and Cooperation; $287,000 from the United Nations Special Volunteer Fund; and $110,000 from the Office for the Coordination of Humanitarian Affairs. During the Ukrainian President’s visit to Japan in July 2005, Prime Minister Junichiro Koizumi and President Viktor Yushchenko praised the programme.

19. Early successes in Ukraine have led the United Nations country teams in Belarus and Russia to consider applying the “area-based development” concept as well. Planning is in the early stages, but the United Nations office in Belarus is already examining the possibility of engaging United Nations Volunteers to support participatory community-based development in Chernobyl-affected regions.

20. In a similar effort to help local residents gain new skills and access information, in 2003, the Swiss Agency for Development and Cooperation launched a project to provide Internet services to Chernobyl-affected areas in Belarus, the Russian Federation and Ukraine, particularly to schools and teachers. The project also provides regular international workshops and computer summer camps. In Belarus, UNICEF supported new preschool models and helped develop educational preschool programmes with a special focus on Chernobyl-affected areas.

Infrastructure

21. The World Bank has focused its Chernobyl recovery activities on Belarus. In July 2002, the Bank published a comprehensive study of the economic and social impact of the accident after 16 years entitled "Belarus: Chernobyl review". The review is consistent in its findings with the United Nations 2002 strategy for recovery. Focusing on agriculture, health, infrastructure and environment, the study recommends streamlining and reorienting government spending on Chernobyl-related efforts.

22. Since the publication of the review, the World Bank has redoubled its efforts to prepare a project that would address the needs identified in the report and improve the living standards of Chernobyl-affected populations. Initially focused on agriculture and forestry, the proposed post-Chernobyl recovery project was reoriented, at the Government's request, to improvements in infrastructure services, particularly heat and water. The project now aims to improve the provision of heat and hot water by addressing inefficiencies in the system. The project focuses on (a) improving energy efficiency through the replacement of outdated equipment and addressing leakage prevention and insulation needs in buildings; and (b) extending gas supply to households with wood-burning stoves. The project will intensify discussions between the World Bank and the Government on streamlining Chernobyl expenditures, and also serve as a first step towards other activities focusing on Chernobyl and Belarus.

23. The World Bank has intensified its cooperation with other actors in Belarus and has discussed cooperation with UNDP and other multilateral and bilateral agencies. The International Atomic Energy Agency (IAEA) has agreed to provide advice on any aspects of radiation that arise with regard to Bank project activities. IAEA has also indicated that, at the Government's request, it will direct some activities under its technical cooperation programme to address energy efficiency (see para. 41 below).

Health care

24. Efforts in health care focus on documenting the health impact of radiation; detecting and treating the thyroid cancer that has resulted from exposure to radioactive iodine in the first days after the accident; and improving the provision of health care in Chernobyl-affected regions and propagating healthy lifestyles — an approach that aims not only to teach people how to reduce radiation exposure but to counter more potent health threats, such as tobacco and alcohol abuse and poor diet. The findings of the Chernobyl Forum (see paras. 54-58 below) suggest that Governments and international agencies may need to revisit their assumptions about the population's health-care needs and shift resources towards more targeted

monitoring of high-risk populations while improving broader primary and preventive medicine.

25. The International Federation of Red Cross and Red Crescent Societies (IFRC), together with the national Red Cross Societies of Belarus, Ukraine and the Russian Federation, continue to run the Chernobyl humanitarian assistance and rehabilitation programme with the aim of identifying thyroid cancer and other thyroid pathologies in remote areas with poor health care, and providing referrals for further treatment. The programme serves 90,000 persons annually from high-risk groups.

26. Six mobile diagnostic laboratories — three in Belarus (Brest, Gomel and Mogilev), two in Ukraine (Rivne and Zhytomyr) and one in the Russian Federation (Bryansk) — render those services. Over the past two years, the programme has improved its early detection capabilities with on-the-spot fine needle biopsies carried out by the mobile laboratory in the Brest region. The aim is to expand this service to other regions. However, donor interest in the programme has steadily declined, raising concern about the programme's sustainability. To revive discussion on ongoing needs, IFRC plans to bring together its member national societies and other international organizations and government representatives for a round-table discussion.

27. Since the Chernobyl accident, WHO has attempted to understand the health consequences of acute and chronic radiation exposure and to provide scientifically based guidelines and recommendations on major Chernobyl-related health matters, working in cooperation with the three affected countries, and with international expert groups and WHO collaborating centres. Over the past two years, WHO has engaged actively in the work of the Chernobyl Forum, together with IAEA, to establish a factual, scientifically sound account of Chernobyl's impact on health (see paras. 54-58 below).

28. The Chernobyl tissue bank, established in 2000, is an international project to collect thyroid tissues from cancer patients who, as children or adolescents, were exposed to Chernobyl fallout. Such materials and patient data are essential for good molecular cancer epidemiology, especially for radiation-induced thyroid cancers. The project is currently supported by the Governments of the Russian Federation and Ukraine (but not by the Government of Belarus). Funding is provided by the European Commission, the National Cancer Institute of the United States of America and the Sasakawa Memorial Health Foundation of Japan. WHO contributes to the project as an active member of the Management and Scientific Committees.

29. In Belarus, the Chernobyl telemedicine project, a five-year joint project of WHO and the Sasakawa Memorial Health Foundation, was completed in June 2004. The project was designed to improve the provision of medical care by helping to establish a telecommunications infrastructure, develop telepathology (remote diagnosis) and promote tele-education. The project established special network links between expert centres worldwide and medical institutions in Minsk and Gomel, in cooperation with the Belarusian Centre for Medical Technologies; developed telepathology software and trained specialists, in cooperation with the Belarusian State Medical University; and developed tele-education software for medical students and doctors, in cooperation with the Belarusian State Medical University and Gomel State Medical University.

30. Plans are under way to continue the Chernobyl telemedicine project as part of the WHO eHealth initiative, in line with the fifty-eighth World Health Assembly resolution that encourages the use of information and communications technology in health care. Tele-consultation and tele-education offer promise in improving medical diagnosis and treatment in remote areas of Chernobyl-affected regions, and the Chernobyl telemedicine project is a model that is worth replicating in the Russian Federation and Ukraine, provided that adequate funding can be mobilized.

31. Though only indirectly linked to Chernobyl, the WHO Radiation Emergency Preparedness and Assistance Network supports the development of mechanisms and guidelines to prepare for and provide practical assistance in the event of overexposure to any radiation source. The Network currently comprises 14 WHO collaborating centres in 10 countries and 13 liaison institutions in 11 countries. The Network is expanding rapidly to regions where use of nuclear power is on the rise.

32. In Belarus, UNICEF is implementing a project on life skills and healthy lifestyle education in Chernobyl-affected areas, in cooperation with the Brest and Luninets local authorities, the Brest Regional Centre of Hygiene, Epidemiology and Public Health and the Swiss Agency for Development and Cooperation. The project, which is under way in the Luninets district of the Brest Region, aims to improve the health of children and adolescents living in contaminated areas and to train them to make informed choices about their health and development. The main objective is to raise the awareness of children, parents and teachers about the importance of adopting healthy lifestyles and life skills to reduce the impact of environmental risks. UNICEF and its partners strive to achieve this objective through the introduction of health and life skills education into the school curriculum; capacity-building initiatives for professionals; and the involvement of children in healthy life style promotion and informational and educational activities. So far 10 schools with a total of 2,200 students have been selected as project pilot sites in the Luninents districts.

33. In Ukraine and Belarus, in the past three years one of the areas of UNICEF cooperation with the Government has been the protection of the health and support for the development of infants and young children through increasing the rate of breastfeeding, eliminating iodine deficiency disorders through universal salt iodization, and developing primary health-care models and better parenting initiatives. When planning geographical coverage of those projects, UNICEF, together with the Ministry of Health and other partners, takes into account the needs of Chernobyl-affected areas as a priority.

34. A further example of UNICEF-led efforts to improve the health-care system is the “youth friendly clinic” initiative. Following piloting in Kyiv and other cities, in 2005, UNICEF is supporting the establishment of a youth friendly clinic in Chernihiv, the largest urban area in Ukraine affected by Chernobyl. This clinic is designed to provide medical, social and psychological assistance specifically for young people. It will serve some 1,000 adolescents per year with a total of 30 trained professionals and implementing youth-friendly services techniques.

35. In Belarus, the Swiss Agency for Development and Cooperation, together with the local administrations in three of the most-affected districts, is implementing a project aimed at improving health care for mothers and children. The project promotes both radiation-safe behaviour and healthy lifestyles, particularly for pregnant women and nursing mothers. It also provides medical equipment and

doctor training. In a related effort in the Bragin district, the Swiss Agency for Development and Cooperation is also supporting "inclusive radiation monitoring" by providing communities with personal dosimeters and modernizing village-based radiation control centres. Those efforts may expand under the CORE programme (see paras. 11-13 above).

36. As in the above case, many health initiatives focus on Chernobyl-affected regions but address broader health and lifestyle concerns unrelated to radiation exposure. The United States Government, for example, has funded numerous health programmes in Chernobyl-affected regions of Ukraine, including an eight-year, $3.7 million birth defects surveillance and prevention programme that was created in response to Congressional directives. The registries created through the programme found no link between Chernobyl exposure and birth defects, and instead determined that birth defects are the result of poor nutrition in economically depressed areas.

37. Iodine deficiency is traditionally endemic in many of the areas affected by the Chernobyl accident. Lack of dietary iodine causes growth stimulation in the thyroid, and some studies suggest that iodine deficiency increases the risk of radiation-induced thyroid cancer. Whatever the linkage, eradication of iodine deficiency carries a clear health benefit, particularly for children. Despite efforts by the three most-affected Governments, backed by the United Nations, legislation on the universal iodization of salt has not yet been passed in any of the three countries. As universal salt iodization is the most cost-effective way to ensure adequate iodine intake, the three countries would be well served to pass relevant legislation as soon as possible.

38. In an effort to encourage the use of iodized table salt in the affected regions, the European Commission funded, through its Technical Assistance to the Commonwealth of Independent States and Georgia programme, a €1.5 million project that in 2004 provided equipment to a table salt manufacturer in Mozyr, Belarus.

Radiation mitigation and standard setting

39. The United Nations Scientific Committee on the Effects of Atomic Radiation is the body specifically mandated by the General Assembly to assess scientifically the sources and effects of ionizing radiation. The Committee has participated in the Chernobyl Forum, with regard to reviewing the health effects due to radiation from the accident. In its report to the General Assembly at its sixtieth session,[1] the Committee noted that the findings of the Forum had affirmed the scientific conclusions on health consequences contained in the report of the Committee to the General Assembly at its fifty-fifth session[2]. The Forum findings with regard to radiation health consequences are also consistent with previous international initiatives in which the Committee participated.

40. The Committee, in collaboration with scientists from the three most-affected countries, will continue to provide the scientific basis for better understanding of the radiation health effects of the accident. The next major report of the Committee, originally slated for publication in 2006, will be delayed. That report will cover findings on radiation impact that have been scientifically verified since the publication of the Committee's landmark 2000 report, which concluded that the vast

majority of the population faced no serious health consequences due to radiation or radionuclides.

41. In addition to its work as the lead organizer of the Chernobyl Forum (see paras. 54-58 below), IAEA has contributed to the mitigation of the consequences of the Chernobyl accident through its technical cooperation programme. Within that programme, practical solutions have been proposed in Chernobyl-affected countries to mitigate some of the effects of Chernobyl fallout, to reduce the radiological impact of the accident and to address its human dimension, where possible. As a result of the successful implementation of the rehabilitation project, a flour production line was commissioned at the milk-processing factory in the Gomel region of Belarus in 2004.

42. IAEA has launched the implementation of a large-scale regional project on long-term countermeasure strategies and monitoring of human exposure in rural areas affected by Chernobyl. This project aims at improving the radiological situation and creating conditions for long-term, stable socio-economic development.

43. IAEA is also assisting the nuclear regulatory authority of Ukraine in the regulatory process of decommissioning the Chernobyl nuclear power plant and in the development of an approach for characterizing and managing radioactive residual material resulting from investigating the status of the shelter and its reconstruction and/or repair. In addition, IAEA has provided its expertise for the planning of the proposed World Bank post-Chernobyl recovery project (see paras. 21-23 above).

44. In the post-Chernobyl years, the Food and Agriculture Organization of the United Nations (FAO) and WHO, in collaboration with IAEA, have focused on activities aimed at ensuring a better response in the event of a future accident of a similar nature. The current codex guideline levels for radionuclides in foods following accidental nuclear contamination for use in international trade are currently being revised to cover a wider range of situations and to serve as generic intervention levels for a year or more following a nuclear or radiological event.

45. In addition, the Joint FAO/IAEA Division of Nuclear Techniques in Food and Agriculture, in collaboration with the Agency’s laboratories in Seibersdorf, Austria, is developing a radionuclide countermeasure information system to address concerns about radionuclide contamination. Identifying options for contaminated areas assists recovery by enabling income generation without jeopardizing customers’ health. A strategy countermeasures compendium, developed with support from the research programme on nuclear energy of the European Atomic Energy Community, contains countermeasures that have been assessed against a common set of criteria. A broad range of countermeasures fulfils those basic criteria. A financial template was created to help users select countermeasures for contaminated areas. Financial performance indicators are provided for user-defined countermeasure projects. A web-based version of the economic tool and site-specific data, including radionuclide transfer factors, are slated for implementation as resources become available.

46. The Nuclear Energy Agency of the Organization for Economic Cooperation and Development has also addressed issues arising from Chernobyl. The 28 member countries of the Agency are committed to helping affected countries improve the public health of the populations affected by the accident and to learn from this

experience to be better prepared to deal with large-scale, long-term contamination situations of any origin. The Agency has focused on two main areas: learning how better to bring radiological protection science to the service of local decision-making; and improving nuclear emergency preparedness and management in general.

47. Following on its 1996 and 2002 reports on the impact of Chernobyl and its implications for Nuclear Energy Agency member countries, the Agency will publish a further report in April 2006 entitled "Stakeholders and radiation protection: lessons from Chernobyl after 20 years". The report will distil the work of the Agency on good governance in radiological protection decision-making, and provide guidance to radiation protection professionals, particularly those engaged in territories in the CIS and Western Europe.

48. The Agency has also continued its efforts to improve preparedness and management capabilities, both nationally and internationally, through the staging, in cooperation with other international organizations, of regular exercises under the International Nuclear Emergency Exercise programme established in 1990. Those exercises test national structures for nuclear power plant emergency response and have yielded significant improvements in international coordination and communications.

Reactor safety

49. The safety of the Chernobyl nuclear power plant has long been a matter of concern, for both the three most-affected countries and their neighbours, especially given the adverse conditions under which the existing sarcophagus was built. Those worries have yielded a firm international resolve to support Ukraine in efforts to build a new shelter to contain the damaged unit 4 of the reactor and to provide for the environmentally sound collection and storage of nuclear waste.

50. The Chernobyl Shelter Fund, managed by the European Bank for Reconstruction and Development (EBRD), was established in 1997 to carry out a shelter implementation plan to transform unit 4, which was destroyed in the 1986 accident, into a stable and environmentally safe state. Under the plans, an arch-shaped confinement with a height of 100 metres and a span of 250 metres will be assembled in a safe area near the site and eventually slid across the old sarcophagus. It is designed to provide a solid containment for the remnants of the reactor. It will also be fitted with equipment to undertake works that will become necessary in the future, such as deconstruction of unstable parts of the old shelter and the removal of its radioactive inventory. In 2005, the international donor community, led by the Group of Eight countries (and including the Russian Federation for the first time) and the European Commission, has additionally pledged close to €200 million, bringing the total to over €800 million. All infrastructure projects within the programme have been completed, works to stabilize the existing structure around unit 4 have started, the installation of a comprehensive monitoring system is ongoing and contract award for the design and construction of a new safe confinement is expected before the end of 2005. Completion of that programme, estimated to cost over $1 billion, is expected in 2009.

51. EBRD also manages the Nuclear Safety Account, which finances the construction of an interim spent fuel storage facility and a facility to treat liquid radioactive waste at the Chernobyl site. Both facilities are required to support the

decommissioning of units 1 to 3. The liquid radioactive waste facility is expected to be completed in 2006 and the interim spent fuel storage facility by 2009, subject to overcoming current difficulties.

52. The European Commission has been an important source of financing for Chernobyl efforts, particularly for research into the health and environmental effects of the accident and their mitigation, and activities aimed at improving nuclear safety. The Commission has co-financed studies for the decommissioning plan for units 1, 2 and 3 of the power plant, and for the shelter implementation plan for unit 4. The Commission has continued to devote significant resources to assist Ukraine in improving nuclear safety and restructuring the energy sector and is one of the major donors to the two EBRD-managed international funds (the Chernobyl Shelter Fund and the Nuclear Safety Account). It has also funded a project covering the retrieval, conditioning and storage of solid operational radioactive waste from the power plant. Construction work on the project is advanced and completion is due by mid-2006.

IV. Advocacy, information and public awareness

53. Public awareness and advocacy initiatives related to Chernobyl fall into three main areas: efforts by the international community to reach a scientific consensus on the impact of the nuclear accident on the affected territories and to determine areas in which continued research and study is needed; efforts to provide accurate, hands-on information to the affected populations to help them lead productive, healthy lives in the areas affected by Chernobyl; and efforts to alert the international community, and particularly donor countries and organizations, to the continuing but evolving needs of Chernobyl-affected communities and the three affected Governments.

Chernobyl Forum

54. In 2003, IAEA established the Chernobyl Forum as a contribution to the new United Nations strategy launched in 2002. This initiative included international organizations from within the United Nations system — WHO, UNDP, FAO, the Office for the Coordination of Humanitarian Affairs, the United Nations Environment Programme (UNEP), the United Nations Scientific Committee on the Effects of Atomic Radiation and the World Bank — as well as the Governments of Belarus, the Russian Federation and Ukraine. The Chernobyl Forum grew out of an understanding that uncertainty and misconceptions about the impact of Chernobyl were widespread, even among the scientific and medical communities in the affected countries. United Nations bodies also differed in their assessments, and those differences made coordination difficult. The need was thus clear for unequivocal, authoritative findings on the impact of the Chernobyl accident, both on the natural environment and on human health.

55. The Forum's mandate was to review and reconcile scientific research on the environmental and health consequences of the Chernobyl accident by issuing authoritative statements and recommendations reflecting shared positions of the Forum's participants about the long-term impact of the Chernobyl accident. Two expert groups were created, one addressing the consequences of the accident for human health, operating under WHO auspices, and another addressing the

environmental impact, operating under IAEA auspices. After a painstaking review of the scientific evidence, both expert groups prepared an assessment report, which also contained the Forum's recommendations to assist the affected countries in remediating the land contaminated with long-lived radionuclides and in providing health care to people affected by the accident. Those reports were discussed and approved by the three affected countries and the international organizations participating in the Forum. The Forum also identified further research needed to clarify remaining differences of views related to the accident's long-term impact.

56. To complement the findings on the environmental and health impact of Chernobyl, UNDP prepared a summary of the socio-economic consequences of the accident along with a set of related policy recommendations for the three Governments. This work drew heavily on the report entitled "The human consequences of the Chernobyl nuclear accident: a strategy for recovery", as well as on the World Bank report entitled "Belarus: Chernobyl review". Those findings and recommendations were endorsed by Chernobyl Forum participants under the heading "The way forward".

57. The findings of the Chernobyl Forum contained a reassuring message on the impact of radiation from the Chernobyl accident. Aside from a rise in the incidence of thyroid cancer (which proved in almost all cases to be curable), the Forum found no profound negative health impacts on the exposed population as a whole and also no widespread contamination that would continue to pose a substantial threat to human health. Precautions were still called for with respect to some restricted areas of high radioactive contamination and high-risk groups, such as the liquidators who worked at the reactor site in the days following the accident. The Forum did find, however, that the mental health impact of the accident had been profound, leading people to perceive themselves to be in ill health and condemned to a shortened life expectancy. Such misconceptions underscored the Forum's finding that the affected populations needed more accurate, practical information to help them lead healthier, more productive lives and to encourage them to take the future into their own hands.

58. To publicize its findings and recommendations, the Chernobyl Forum organized, through IAEA, an international conference on the theme "Chernobyl: looking back to go forward", held in Vienna on 6 and 7 September 2005. About 250 government officials, experts, donors and activists attended the conference, and the Forum findings received wide media coverage (for a concise digest of the findings, see http://www.iaea.org/NewsCenter/Focus/Chernobyl/index.shtml). Materials from the conference will be disseminated widely through the Forum's member organizations, other United Nations organizations and the mass media.

International Chernobyl Research and Information Network

59. The International Chernobyl Research and Information Network (ICRIN) is expected to be an important channel for translating the scientific findings of the Chernobyl Forum into information that is comprehensible and useful to the affected populations. ICRIN was launched in June 2003. Like the Chernobyl Forum, it was created in response to the finding that many residents of Chernobyl-affected areas were confused about the impact of radiation on their lives, and that excessive and often debilitating anxiety about health often coexisted with reckless disregard for basic precautions in reducing radiation exposure (such as avoiding consumption of mushrooms, berries and game). The network was conceived of as a way to help

overcome myths and misconceptions by compiling, consolidating and coordinating scientific research on the impact of radiation, commissioning further research where required and ensuring its effective dissemination to all stakeholders.

60. The first phase of the ICRIN project has been completed, thanks to funding from the Swiss Agency for Development and Cooperation and the Office for the Coordination of Humanitarian Affairs. In Belarus, the Russian Federation and Ukraine, surveys and focus group meetings, involving thousands of people in each country, were held in 2003-2004 to assess the information needs of Chernobyl-affected populations. In each country, a comprehensive report was published summarizing the findings. Those studies consistently indicated that affected communities still lack complete and trustworthy information on the consequences of the accident. Residents are mainly concerned with their health status and desire information on safe lifestyles in the contaminated areas, but worries about economic prospects are also prominent.

61. The three country studies have yielded a concise list of questions to which the Chernobyl-affected populations need unambiguous answers. Meeting that need is complicated by misconceptions that also persist outside the three affected countries. The findings of the Chernobyl Forum provide ideal raw material for dissemination, helping people lead healthier lives and overcome a paralysing legacy of worry and fear.

62. UNDP is currently seeking funding for the next phase of ICRIN, and a subregional proposal for funding has been submitted to the United Nations Human Security Trust Fund. Owing to the parallel work already concluded by the Chernobyl Forum, UNDP has revisited the original plans for ICRIN, which included a large research component, and opted to shift the focus to the adaptation and dissemination of available information. Given that much effort has been devoted to the provision of information since the accident occurred, yet the results have been meagre, efforts will also be made to devise imaginative approaches that will ensure that people both trust and act on the information provided, leaving myths and misconceptions behind.

63. Early efforts to this end have already been undertaken in Ukraine. Based on the results of the ICRIN study, in 2004 UNDP Ukraine launched a community-based information campaign. It supported an information provision system aimed at the development and dissemination of information materials according to the needs of various stakeholders and target groups in Chernobyl-affected areas. In Ukraine, information materials were prepared (leaflets, posters, brochures) and dissemination was started through school and health networks, village councils and community organizations in the territories of Ukraine most affected by the Chernobyl accident.

64. With a similar aim, UNICEF in Ukraine has planned since early 2004, but has not yet obtained the funds to implement, a special edition of *Facts for Life* to assist the Chernobyl-affected population in coping with environmental, social and health problems through the delivery of key messages, with a special focus on mothers, children and young people.

Other efforts to raise international awareness on Chernobyl

65. To draw attention to the forgotten crisis of Chernobyl, and in order to mobilize international assistance for humanitarian and development efforts, the Swiss Agency

for Development and Cooperation funded the creation in 2002 of a website (www.chernobyl.info). Linked to the United Nations Chernobyl website, it is intended to provide unbiased and reliable information on the effects of the accident and the current situation in the affected areas. Since 2002, the Swiss Agency for Development and Cooperation has continuously updated and developed the website as an international communications platform and a "manifesto against forgetting".

66. On the eighteenth and nineteenth anniversaries of the Chernobyl accident, the Secretary-General issued statements calling on the international community to remember those who continue to suffer the consequences and to show generosity in addressing the recovery needs of the affected communities.

67. On the occasion of the eighteenth anniversary, the Office for the Coordination of Humanitarian Affairs, in partnership with UNDP and with the participation of the Governments of Belarus, the Russian Federation and Ukraine, organized a high-visibility commemoration in the General Assembly Hall. The event featured the showing of an award-winning documentary film on the health situation in the Chernobyl-affected territories and speeches from Chernobyl-related charities. More than 1,000 people attended the ceremony, which concluded with the symbolic handover to UNDP of authority for United Nations coordination of Chernobyl matters.

68. Following up on the Secretary-General's visit to the Chernobyl area in 2002, the United Nations Coordinator of International Cooperation on Chernobyl visited the region from 25 January to 3 February 2004. This visit was followed in February 2004 by a visit to the Bryansk oblast of the Russian Federation by the UNDP Administrator. The United Nations delegation and local officials supported the creation, jointly by international donors and local stakeholders, of innovative and collaborative approaches to local economic development and community mobilization and empowerment. The meeting provided an ideal launching point for the UNDP project to create an economic development agency in Bryansk oblast (see para. 14 above).

V. Towards the twentieth anniversary

69. The approaching twentieth anniversary of the Chernobyl nuclear accident in April 2006 provides an ideal opportunity to draw the attention of the international community to the needs of the communities affected by the accident and its consequences, and also to provide a fresh case for generosity on the part of international donors.

70. All three of the most-affected countries are planning major events to commemorate the twentieth anniversary. Belarus has planned an international conference for 19 to 21 April 2006, and Ukraine has scheduled an international conference for 24 to 26 April 2006. The Russian Federation is organizing a commemorative exhibition. The three Governments are coordinating their efforts to avoid duplication and ensure maximum exposure, and the CIS is working to coordinate the preparatory process at the subregional level. The commemorative events are meant to be complementary, so the Belarus conference will focus on the rehabilitation and socio-economic development of Chernobyl-affected territories, while the Ukraine conference will cover the issues of decommissioning the Chernobyl nuclear plant and the safety of the sarcophagus.

71. United Nations bodies have signalled their commitment to helping the three Governments gain as high a profile as possible for the commemorative events scheduled to mark the anniversary. As the initiator of the Chernobyl Forum, IAEA has been invited to participate in the preparations for the twentieth anniversary conferences in Belarus and Ukraine. UNDP Ukraine is serving as a co-organizer of the Ukrainian conference, and the UNDP Resident Representative in Belarus is co-chair of the International Organizing Committee for the Belarus conference. Other bodies have committed to participating in commemorative events at the highest level possible.

72. Given the significance of the date, it would be appropriate for the President of the General Assembly to convene a special commemorative meeting of the United Nations General Assembly in the last 10 days of April 2006 in order properly to observe the twentieth anniversary of Chernobyl. Such a meeting could call attention to the continuing needs of the region by designating the period from 2006 to 2016 as "the decade of rehabilitation and recovery of Chernobyl-affected areas".

73. In all those events, the message that the organizers choose to convey will have crucial significance. In keeping with the new developmental approach to Chernobyl, it is important that commemorative events are forward-looking and focus on identifying solutions to the challenges that Chernobyl-affected communities face. As important as it is to honour the sacrifice and losses of the past, the best way to attract and keep fresh international attention will be by identifying a way forward on Chernobyl.

74. The Swiss Agency for Development and Cooperation has started an awareness programme on Chernobyl-related information for the concerned population and set up a website (http://www.chernobyl.info) with a database of activities planned, in the affected region and internationally, in connection with the twentieth anniversary of the Chernobyl accident in 2006.

VI. Resource mobilization

75. As was the case two years ago, most United Nations programmes aimed at addressing the human consequences of the Chernobyl accident remain chronically under funded. Donors that have treated Chernobyl as a humanitarian crisis have been pulled away by the many emergencies facing the world today. Agencies report persistent problems with funding ongoing programmes, not to mention new projects. This problem underscores the importance of providing potential donors with tested methods that hold the promise to solve Chernobyl challenges by mobilizing the energies of communities that have in many cases sunk into apathy and fatalism, and by demonstrating that money invested in Chernobyl can help create new livelihoods that will ultimately eliminate the need for further international support.

76. Governments and donors must also work together to ensure that the funds that are mobilized for Chernobyl projects are used in the most cost-effective manner possible. Given the limited funding pool available, United Nations coordination has an important role to play in ensuring that scarce funding targets the neediest people and that assistance efforts are in line with the generally reassuring findings of the Chernobyl Forum on the threat of radiation to human health and the environment.

VII. Concluding observations

77. The needs of the Chernobyl-affected populations have changed greatly over time. What was once an emergency operation aimed at protecting millions of people from exposure to radiation has evolved into a development effort oriented to helping communities to create new livelihoods and individuals to regain a sense of self-reliance. The new challenge is no less daunting than the old one, but it can be overcome if international organizations and affected Governments work together to share knowledge and put to use methods that have proven successful elsewhere. Such cooperation offers the chance to transform victims into survivors, and to transform Chernobyl from a symbol of destruction to a symbol of human resilience and hope.

Notes

[1] *Official Records of the General Assembly, Sixtieth Session, Supplement No. 46* (A/60/46).

[2] *Official Records of the General Assembly, Fifty-fifth Session, Supplement No. 46* (A/55/46).

Annex I

Report of the Government of Belarus

[Original: Russian]

The Chernobyl disaster contaminated the Belarusian territory with long-lived caesium, strontium and plutonium radionuclides. Approximately 44,000 sq. km (21 per cent of the country's surface area) is contaminated with caesium-137; 21,000 sq. km (10 per cent of the surface area) is contaminated with strontium-90; and 4,000 sq. km (2 per cent of the surface area) is contaminated with plutonium isotopes. As a result of natural decay, soil contamination with caesium-137 is expected to fall below 37 kBq per square metre within a 30-kilometre zone around the Chernobyl nuclear power plant roughly 300 years after the accident (or later at some specific places).

Practically the entire population of Belarus was exposed to radioactive iodine for several months after the disaster. As a result, the incidence of thyroid cancer, especially among irradiated children and adolescents, rose to levels unprecedented in world history. In view of the long-lived radionuclides in the environment, the population is still subject to chronic internal and external irradiation.

Over the years, much has been done to address the consequences of the Chernobyl disaster. Three Chernobyl-related State programmes have been carried out. A legislative and regulatory framework for all essential aspects of the relevant activities was established, based on the Acts of the Republic of Belarus "on the social protection of citizens affected by the Chernobyl nuclear power plant disaster", "on the legal regime of areas impacted by the radioactive contamination from the Chernobyl nuclear power plant disaster" and "on the radiation safety of the population".

For the 137,600 people evacuated from the areas contaminated by radioactivity, over 66,000 apartments and houses were built in 239 settlements established in the country's uncontaminated regions with the required infrastructure and service facilities. Equipment was provided for the settlements and densely occupied areas where the evacuees were housed. General education schools for 45,699 pupils, kindergarten and nursery facilities for 18,505 children, polyclinics and outpatient units for 21,312 visits per shift and hospitals with a total capacity of 4,590 beds have been built. Work on supplying gas to the affected areas is in progress.

The State policy on overcoming the consequences of the Chernobyl disaster aims mainly at ensuring the safety of the population and protecting the health of the one and a half million people still inhabiting the contaminated areas, including approximately 100,000 persons participating in the liquidation of the aftermath to the accident.

To achieve the goal that has been set, a series of measures are being taken with a view to protecting the population from radiation by limiting the doses of irradiation and maintaining them at the legally specified level. Protective measures are continuously implemented in the agro-industry and forestry sectors with a view to obtaining products that fulfil official minimum requirements. Contaminated land totalling 1.3 million hectares is currently used for agricultural production. Thanks to

technology developed by Belarusian specialists, the produce in those areas meets non-contamination standards.

The number of communities where the radiation-monitoring system detects cases of milk production exceeding the authorized caesium-137 content level is decreasing. Such “critical” communities are part of a zone to which State authorities pay special attention and where the resources necessary for implementing protective measures are primarily channelled as a top priority.

State policy attaches great importance to the health problems of the affected population, those participating in the work of eliminating the consequences of the accident, and children living in the contaminated areas. A system developed by scientists and funded from the State budget provides medical monitoring, clinical examinations, illness diagnosis and treatment, sanitation and therapy in sanatoriums and health resorts mitigate to some extent the health damage suffered.

According to forecasts, however, in addition to the growing incidence of thyroid cancer among persons exposed to radioactive iodine, an increase in the number of cases of other forms of malignant neoplasm and cardiovascular and other non-oncological types of disease may be expected in the years immediately ahead. Accordingly, the Government monitors closely the health problems of the affected population. Belarus continues to take steps to improve medical assistance to the population, provide public health units with modern equipment and medicinal preparations and assign qualified medical staff to the affected areas.

Yet many problems still need to be solved. The population continues to be preoccupied with issues of health, clean production, normal working and residence conditions, and radiation safety in the environment. Accordingly, the Government plans to continue to provide financial resources to the affected areas. The use of the resources, however, and the actual benefit accruing to society must be based on optimization approaches that are internationally recognized.

The primary thrust of any further strategy for dealing with the consequences of the Chernobyl disaster must be the progressive rehabilitation of the contaminated areas and the resident population. The goal is to create conditions allowing people to lead a normal life and to engage in profitable economic activities, unfettered by the radiation factor. The approaches to rehabilitation that must be adopted to that end should be based on cost-benefit analyses.

Rehabilitating the contaminated areas is intertwined with radiation-related ecological problems and economic, demographic, social and psychological issues. Experience shows that the solution to such problems requires a detailed assessment of all factors determining the situation in a given community. Successful rehabilitation also depends on the population’s perception of the measures taken. Therefore, questions related to providing information to the population and the local government bodies are particularly important.

The Government of Belarus is drawing up the 2006-2010 State programme for addressing the consequences of the Chernobyl disaster with a view to ensuring real economic recovery and sustainable development in the affected areas. Production should not only be “clean”, but also profitable. The recommendations of the United Nations international scientific body, the Chernobyl Forum, will be taken into account in formulating the above programme.

In tackling the problems related to Chernobyl, Belarus cooperates closely with a number of agencies of the United Nation system, donor Governments and non-governmental organizations (NGOs).

An essential indicator of the effectiveness of international assistance is its ability to supplement the main thrusts of national policy on the consequences of the disaster.

Assessment missions, the United Nations report entitled "The Human Consequences of the Chernobyl Nuclear Accident: A Strategy for Recovery" and the World Bank report of 15 July 2002 entitled "Belarus: Review of the consequences of the Chernobyl nuclear accident and a programme for addressing them" have been the most significant steps taken by the international community with regard to assessing the consequences of the Chernobyl disaster. As a follow-up to these documents, the Republic of Belarus has launched the implementation of a new integrated development initiative, the CORE (Cooperation for Rehabilitation) Programme.

The Chernobyl Forum and the International Chernobyl Research and Information Network play a key role in promoting international cooperation on the problems related to Chernobyl. In the course of their work, they have assessed the medical and ecological consequences of the disaster, determined the needs of the affected population in terms of information and formulated practical recommendations regarding the decontamination of soil polluted with radionuclides and the provision of medical assistance to the affected population.

The next logical step is to organize international cooperation in the practical implementation of the recommendations made, draw up a plan for further work by the International Chernobyl Research and Information Network and raise funds for the implementation of that plan.

In view of the approaching twentieth anniversary of the Chernobyl disaster, the Republic of Belarus is organizing an international conference on the Chernobyl accident to address issues related to the revitalization and sustainable development of the affected areas.

Annex II

Report of the Government of the Russian Federation

[Original: Russian]

The Russian Ministry for Emergency Situations which is the lead agency in the Russian Federation for dealing with Chernobyl issues and addressing the consequences of the Chernobyl disaster, is working within the framework of the following special programmes and subprogrammes:

- The federal special programme "Dealing with the consequences of radiation accidents up to the year 2010" (subprogramme "Dealing with the consequences of the accident at the Chernobyl nuclear power plant"), approved by decision No. 637 of the Government of the Russian Federation, dated 29 August 2001;
- The federal special programme "Housing" (subprogramme "Provision of housing to persons participating in the work of eliminating the effects of radiation accidents and disasters", approved by decision No. 760 of the Government of the Russian Federation, dated 16 October 2002;
- The "Programme of joint activities for dealing with the consequences of the Chernobyl disaster within the Union State for the years 2002-2005", approved by decision No. 17 of the Council of Ministers of the Union State of Russia and Belarus, dated 9 April 2002.

Over the last two years more than 850 million roubles from the federal budget have been spent in implementing the measures provided under this programme and its subprogrammes in the Russian Federation.

The main tasks facing the subprogramme "Dealing with the consequences of the accident at the Chernobyl nuclear power plant" are to complete and commission capital construction projects on the areas affected, provide victims with the medical care needed, lower the doses of radiation and restore normal living and working conditions in the areas contaminated by radioactivity (with no limitations set on their activities because of radiation). More than half a billion roubles in capital investments was allocated and spent on these tasks in 2003-2004, thanks to which approximately 20,000 square metres of housing space and 84 kilometres of gas mains, two schools catering for 477 pupils and other sites were returned to use in the Bryansk, Kaluga, Orël and Tula regions in two years. Specialized medical care was provided at the regional and federal level to people living in the worst-contaminated areas of these regions from the funds earmarked under "other expenses", accounting for approximately 70 million roubles during the period under review. More than 10,000 persons, for instance, including those who had participated in the clean-up at the Chernobyl nuclear power plant and their children, were covered in a particularly detailed medical investigation.

Equipment for treatment and diagnostics, reagents, and consumable supplies were all bought to upgrade the technical facilities of the medical institutions providing this type of service. Moreover, under plans for practical measures approved by the Ministry for Emergency Situations, organizations under the Ministry of Health and Social Development, the Ministry of Agriculture, the Federal Service for Hydrometeorology and Environmental Monitoring, and the Ministry of

Natural Resources carried out protective work and remediation in the contaminated areas of these regions, and conducted radiation and general public health monitoring.

The subprogramme "Provision of housing to persons participating in the work of eliminating the effects of radiation accidents and disasters" in 2003-2004 improved the conditions in which more than a thousand families of participants in the clean-up of the Chernobyl accident are housed.

A major challenge facing the joint action programme of the Union State of Russia and Belarus is to improve and maintain the combined Russian-Belarusian system for providing specialized medical care to the victims. In 2003-2004, work was done to reconstruct the Medical Radiological Research Centre of the Russian Academy of Medical Sciences in Obninsk, and both the National Centre for Emergency and Radiation Medicine of the Ministry for Emergency Situations, in St. Petersburg, and the Gordeevka District Hospital in the Bryansk region were equipped with modern equipment.

In 2004, a Russian-Belarus information centre for the problems of dealing with the consequences of the Chernobyl disaster (based at the Russian Academy of Sciences' Institute for the Problems of Safe Development of Nuclear Energy, in Moscow) was set up as part of the implementation of the joint action programme. Under the same programme, mobile radiological laboratories and other equipment were provided to specialized agricultural and forestry agencies which carry out radiation monitoring and other research-oriented and practical work in the regions affected by the Chernobyl disaster.

Under this programme, agriculture and forestry continued in the areas contaminated by radionuclides, and agricultural and forestry specialists were trained in measures aimed at optimizing the use of radionuclide-contaminated land. Training and public information campaigns have been conducted among the residents of communities affected by the Chernobyl accident on ways to produce quality foodstuffs on their private household plots and other crucial issues.

Over the last two years, a total of 281.8 million roubles was spent on the implementation of this programme.

Under the subprogramme "Dealing with the consequences of the accident at the Chernobyl nuclear power plant" and the "Programme of joint activities for dealing with the consequences of the Chernobyl disaster within the Union State for the years 2002-2005", there has been scientific research aimed at improving the methods for diagnosis, treatment and disease prevention for citizens exposed to radiation, and at improving agriculture and forestry in the regions affected by radioactive contamination and tackling other important problems in eliminating the effects of the Chernobyl disaster.

Annex III

Report of the Government of Ukraine

[Original: Russian]

Under the annual comprehensive programme of measures to overcome the consequences of the Chernobyl disaster in the exclusion and unconditional evacuation zones, the Ministry of Emergencies and Protection of the Population from the Consequences of the Chernobyl Catastrophe is carrying out the following activities:

Monitoring of the radiation status of the environment and ensuring radiation safety;

Localization, transport and burial of radioactive waste, deactivating materials and maintaining radioactive waste repositories;

Implementing water protection measures to minimize radionuclide seepage into Kiev reservoir through watercourses;

Implementing specialized forestry and fire-fighting measures.

As a result of these Ministry activities, the radioecological situation in the exclusion zone has remained stable in recent years, and no emergencies are expected to arise in the areas concerned in the current period.

One of the most important events was the building of a Vector production complex for waste storage and reprocessing. Work is being done to construct and operationalize infrastructure units to be used for building, with the assistance of the European Union, an industrial complex for solid radioactive waste management.

Recently, international cooperation in minimizing the consequences of the Chernobyl disaster has been stepped up. The plan is to implement such programmes of technical assistance to the Commonwealth of Independent States and Georgia (TACIS) as modernizing the automated system for monitoring and reacting to emergencies in the Chernobyl exclusion zone; developing the system for monitoring and reacting to them; and drawing up a draft comprehensive radioactive waste treatment programme for the period 2006-2009.

In accordance with the Shelter Implementation Plan (SIP) — being carried out under the Framework Agreement between Ukraine and the European Bank for Reconstruction and Development (EBRD) — the majority of planned infrastructure units for the Chernobyl nuclear-power plant site have been operationalized. Programmes are either already completed or will be completed in the coming months. This will provide protection for personnel during construction of the new safe confinement. Work continues on stabilizing the Shelter site.

National policy in the field of the comprehensive protection of those affected by the consequences of the Chernobyl accident is based on the following principles:

Priority is given to the lives and health of the people affected; the State is fully responsible for creating safe, healthy living and working conditions;

The comprehensive resolution of health-care issues, social policy issues and issues concerning the utilization of contaminated areas on the basis of national

programmes and taking account of other aspects of economic and social policy and advances in science and environmental protection;

The social protection of people, full compensation for injuries incurred by individuals affected as a consequence of the Chernobyl disaster;

The use of economic methods to improve life by means of a policy of preferential taxation benefiting affected citizens and their associations;

The implementation of occupational-retraining measures and upgrading the skills of the affected population;

Ensuring coordination of the activities of State agencies, institutions, organizations and citizens' associations in solving problems concerning the social protection of the affected population and conducting consultations between State agencies and those affected, as well as among all social groups in taking decisions on social protection at local and State levels;

International cooperation on health-care issues, social and radiation protection, health and safety measures at work, and making use of global experience in such matters.

Under the law, individuals affected receive annual medical tests and benefit from treatment in resort sanatoriums and from centres set up to provide them with medical checks, treatment, socio-psychological rehabilitation and vocational guidance.

State medical supervision gives particular attention to the radiation protection of the population living in radiation-contaminated areas and to organizing the provision of a complete, free and balanced diet for affected children.

In the whole of 2004, more than 2,318,300 individuals, including 451,800 children, affected as a result of the Chernobyl disaster were under observation by the medical institutions in the Ministry of Health system.

The individual registration and the long-established automated monitoring, carried out by the Ukraine State registry system, of individuals affected as a result of the Chernobyl disaster contained information on 2,242,111 persons as of 1 January 2005.

A network of medical institutions, ranging from district polyclinics to clinics in scientific research institutes, has been put into operation to provide medical assistance to those affected. Thirteen specialized dispensaries, centres and hospitals have been opened.

In September 2002, the Government of Ukraine, together with the United Nations Development Programme (UNDP), began implementation of the Chernobyl Recovery and Development Programme for 2002-2005. Basic assistance is concentrated at regional and district levels. The aim of the project is to revitalize the Chernobyl areas and increase the social activism and responsibility of the rural population.

Thanks to the combined efforts of Ukraine and the international community, and in particular the United Nations, a series of urgent issues linked to the consequences of the Chernobyl disaster have been successfully resolved.

The Ministry of Emergencies and Protection of the Population from the Consequences of the Chernobyl Catastrophe considers it expedient to underline the following with regard to future cooperation with the United Nations:

1. The material and technical provision of up-to-date diagnostic equipment, medicines, reagents and expensive medical materials to specialized medical institutions does not ensure a corresponding level of medical assistance to persons affected and those in need of organ transplants, heart and brain operations, cancer treatment, etc.

2. Ukraine would be grateful for assistance in carrying out and financing such operations.

3. An effective measure in the socio-psychological care of those affected is the establishment of five centres for rehabilitation in this field and providing the population with information on issues concerned with overcoming the consequences of the Chernobyl disaster with the participation of the United Nations Office in Ukraine. The Ministry of Emergencies and Protection of the Population from the Consequences of the Chernobyl Catastrophe proposes to extend the network of these interregional centres.

4. Further support is needed for efforts to determine the radiation dose for those who took part in the Chernobyl accident clean-up and other categories of people affected by its consequences, and for involving persons for whom initial dosage assessments are lacking in this research.

5. It is necessary to continue research on thyroid cancer prevention, especially among those who were not over 18 years of age at the time of the accident. It is also necessary to continue iodine deficiency treatment, especially in children.

In order to solve the problems that still exist, the Chernobyl issue must be kept on the agenda of the United Nations General Assembly, and Ukraine's cooperation with the United Nations and those of its specialized agencies working in this area must be expanded.