

# UN IN RUSSIA

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**Providing assistance in the North Caucasus:  
how the UN agencies work in the region /4-7**

## Regions /4

From January 2000 to May 2008, the World Food Programme distributed more than 205,000 tons of food among almost 350,000 most vulnerable persons in Chechnya and Ingushetia, notes Ms. Inge Breuer, WFP Representative and Country Director in the Russian Federation

## Interview /6

The total requirements for implementing UNHCR programmes in Russia are \$12.5 mln in 2008 and \$ 12.4 mln. in 2009, says Wolfgang Milzow, the UNHCR Representative in the Russian Federation, in his interview to *Interfax*. He considers Russia an increasingly important partner for the UN Refugee Agency

## Highlights /11

The volume of federal funding of programmes to fight HIV-infection increased by 57 times in 2007 as compared with 2005 to 10.7 billion rubles. These figures were released in Moscow at the second National Conference on Progress in Guaranteeing Universal Access in connection with the HIV infection in the Russian Federation

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## The UN Secretary-General Message on World Population Day

Forty years ago, world leaders proclaimed that individuals have a basic right to determine freely and responsibly the number and timing of their children. Millennium Development Goal 5, improving maternal health, affirms this right and yet shows the least progress to date. On World Population Day, let us focus on the critical importance of family planning if we are to successfully achieve the Millennium Development Goals.

The rate of death for women as they give birth remains the starkest indicator of the disparity between rich and poor, both within and among countries. There are three basic interventions necessary to improve maternal health: skilled attendance at the time of birth, facilities to provide emergency obstetric care and family planning.

Family planning is a fundamental component of reproductive health as it allows for determining the spacing of pregnancies.



Studies show that family planning has immediate benefits for the lives and health of mothers and their infants. Ensuring basic access to family planning could reduce maternal deaths by a third and child deaths by as much as 20 per cent.

And yet the benefits of family planning remain out of reach for many, especially for those who often have the hardest time getting the information and services they need to plan their families, such as the poor, marginalized populations and young people. Demand will only increase, as more than one billion people ages 15-24 enter their reproductive years.

As we intensify our efforts to achieve the Millennium Development Goals, let us take action to reduce maternal mortality and achieve universal access to reproductive health by 2015. Let us devote greater attention and resources to the work to improve the health and quality of life for all people.

*(abridged)*

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## For the Sake of Child's Smile

Any child, regardless of age, health or family circumstances, should have an opportunity to play, develop, and learn new things. This is particularly important for those children who have to stay for a long time in hospitals, shelters, rehabilitation or social centres, where conditions for playing and development are lacking. The very fact that a child has to stay at a place like this shows that he or she is going through a difficult stage in life. It is for the sake of such children that in April 2008 UNICEF, supported by the Amway company, launched a new long-term project 'A Child's Smile'. Specially equipped play and sensor rooms are meant to make the life of little children at curative facilities and social centres more comfortable, joyful and interesting. Young patients visiting such rooms can choose an occupation to their liking and release energy. In this environment, it is much easier for professionals to communicate with children and to work with them in a form of games in groups or individually. Currently seven such rooms have been set up in various Russian regions, with their number to reach 20 by the end of the year. Here, we will tell you about two of them located in the south and in the north of Russia.

### The Rostov Regional Children's Hospital, Hematological Unit

Tyoma and Anyuta are absorbed in playing a shopping game. Tyoma is six, Anyuta is only three. Later on, a four-year-



old Kolya joins them. They do not differ in any way from ordinary children playing games; only their closely shaved heads and face masks, protecting them from infection, remind us that we are in a hospital. Actually, the hematological unit in this medical clinic does not resemble a hospital: it has bright walls decorated

with children's drawings and a kitchen, where mothers cook home-style meals for their children. Mothers certainly look sad here, because their children often have to stay in hospital for several months running undergoing long and complicated treatment. "Mothers have proved to be the most difficult patients," Vera, an experienced psychologist, said. "When mothers are nervous, their emotional condition immediately affects their children. For the treatment to be successful they should display positive mood and optimistic attitude."

No wonder that everyone – doctors, mothers and, sure enough, children – was happy to see a new playroom arranged within their unit. The whole



room is designed to exclusively bring joy to children: a huge soft Meccano toy set to build a castle, various colourful toys, small sofas and armchairs with bright cutely-shaped pillows... Many children arrived from small rural villages, and they had never seen such toys before! To crown all, a funny-looking clown came to visit them unexpectedly!

"I like this room. There are excellent computer games here, and I can play football together with my friends," eleven-year-old Sasha said, beaming with a wide, gap-toothed smile while the clown was painting his face.

"Will you come again to see us?" a brightly painted matryoshka-girl asked us, when we were about to leave the centre. It was only by his smile that we could recognize Sasha under this make-up...

### Saint-Petersburg Halfway House for Women and Children at Risk

Three-year-old Sashenka is everyone's favourite here. We understood this



immediately, when we saw her running into the hands of Roman Jorik, Regional Director of 'Doctors of the World – USA', an organization that supports this crisis centre. Sashenka has been staying in the centre, together with her Mom, for about a month. Actually, the centre is capable to provide accommodation for six women. At the moment only three women – each of them with a child – are staying here. Sashenka is the eldest, while the other two are infants. It means she can have the play room all to herself, as so far, she has had no competitors. She spends all her free time there. It seems that the thing that she likes doing most of all is to slide down the slope into a multi coloured balls pond. She demonstrated her diving skills to us – with her arms stretched forward, and with her eyes closed.

Sashenka's mother, a tired looking young woman who came to Saint-Petersburg all the way from Krasnodar, looked pleased. She says that her girl is much more relaxed now. They had to abandon their home when life there became unbearable. Sashenka got an insurance policy with the help of the centre, and soon she will be placed in a kindergarten, while her Mom got a hospital paramedic job. Their problems are being addressed gradually, one by one. Soon, when they save enough money to rent an apartment, they will leave the centre, as it is not allowed for patients to stay here for more than a year. While Sasha's mother is trying to resolve adult problems, Sasha is dashing to the play room to go down the slide again.

**Maria Evseeva**

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World Food Programme

## Regions

# Leaving a Good Memory

This year, the World Food Programme wraps up its assistance activities in the North Caucasus started eight years ago. What has the world's largest humanitarian organization achieved? And do local people feel now that they are saying good-bye to WFP staff? *UN in Russia* gives a brief overview of WFP work in the region, as well as the opinions of local residents.

### General Food Distribution

In January 2000, WFP started providing emergency food assistance to internally displaced persons (IDPs) in Ingushetia and food-insecure vulnerable groups in Chechnya. The major part of this aid was channelled through the General Food Distribution (GFD) programme. In 2000, WFP started providing basic food commodities to about 150,000 IDPs in Ingushetia and to some 22,000 beneficiaries in Chechnya through this programme. In 2002, following the gradual increase in the number of IDPs returning to Chechnya, WFP focused its assistance on Chechnya. Compared to 2000, when 85 percent of the GFD assistance was provided to IDPs in Ingushetia, in 2008, 76 percent of food aid under GFD was distributed in Chechnya. In 2000-2008, 175,119 MT were distributed in Ingushetia and Chechnya under the GFD programme at the total value of US \$86.5 million.

“Without your assistance, it would have been very difficult to support the stream of people who fled from Chechnya and into our republic,” recollects Magomed Markhiev, Minister for Public and Inter-Ethnic Relations of the Republic of Ingushetia. “We are sure that your deeds will go down in the history of Chechnya and Ingushetia.”



### Food for Education

The educational system in Chechnya was suspended during the conflict, with schools ceasing operations for nearly two years. Out of the total 438 schools, over 50 percent of the school buildings were either severely damaged or destroyed. Therefore, WFP Russia launched the School Feeding Programme (SF) in Chechnya to assist the restoration of the educational system. The pilot SF programme was started in December 2001 covering 6,000 primary

*“It has been a great honour and commitment for us in the WFP to assist in the planning and the roll out of our assistance programme in the North Caucasus. Most rewarding was the strong support that we have received from the Chechen and Ingush governments, as well as our partners in the field and throughout the international donor community at large. Without this support, we would not have been able to achieve as much as we did and provide up to 350,000 conflict-affected people with food aid over the past eight years.”*

**Inge Breuer, WFP Representative and Country Director**

school children, who were provided with hot meals cooked from food commodities supplied by WFP on a daily basis. Over the following years, the programme expanded to cover some 137,000 pre- and primary school children (1st to 6th grades) at 450 schools in 14 districts of Chechnya. In 2004-2006, WFP implemented the FFE for Chechen IDP children in Ingushetia. The programme covered some 4,000 children in 44 IDP tented schools located in the republic. The findings of a food needs assessment confirmed that in some cases, the meal provided at school by WFP was the primary food ration of the day for children. In 2000-2008, 14,192



MT were distributed in Ingushetia and Chechnya under the FFE programme at the total value of US \$7 million.

“Your programme made the lives of many parents much easier,” confirms Raisa Ortsueva, Director of School No.29 in Grozny. “They often came to school to express gratitude for the hot meals provided for their children. They also asked to pass their thanks and best wishes to WFP. You helped us, when we were in trouble, and we will never forget it.”

### Food for Work/Training

WFP started implementing the Food for Work programme in summer 2001, focusing these projects mainly on rebuilding the public infrastructure, including cleaning the city of Grozny, planting trees and helping with reconstruction and rehabilitation of schools, clinics, parks, and roads. Local communities have enthusiastically supported these projects, and the number of participants has been steadily increasing, reaching its peak (some 23,600 people) in 2005. Gradually, WFP shifted the focus from supporting activities such as street cleaning, which over the first 3 years, had greatly contributed to making Grozny and other towns and villages of Chechnya look more attractive. In 2006, it concentrated on agriculture rehabilitation projects in rural areas. Over 2005-2007, more than 4,200 hectares of land were cultivated within the framework of

*"The assistance provided by the WFP to the population of the republic from 2000 to 2008 was crucial. I believe that the WFP has taken the decision to wrap up its programmes in the North Caucasus on the basis of these positive changes that have recently taken place in the Chechen Republic in the course of its intensive recovery."*

**Ramzan Kadyrov, President of the Chechen Republic**

the FFW projects, including beetroot, grape, vegetable, and fruit production; clearing of pasture lands, etc. In 2005-2006, these projects resulted in the production of over 3,600 MT of apples, vegetables, and beetroot. In 2004, WFP started implementing the Food for Training Programme, which included trainings of trainees from vulnerable families on various income-generating skills such as sewing, beauty techniques, hairdressing, driving and carpentry. Overall, WFP's FFT programme provided training to 1,750 participants. Post-monitoring showed that some 50 percent of the graduates start to earn an income within six months of graduation. Over 2000-2008, 14,280 MT at the total value of US \$7 million were distributed in Ingushetia and Chechnya under FFW/T programme.

**"M**y entire family is involved in the project," says Saidkhan Doskaev, a bee-keeper from the Shelkovskoy District of Chechnya. "My family life is slowly coming back to normal. We were promised that after this project is over,



we will get 20 bee hives to start individual businesses, and if we join the Bee-Keepers Association, our honey will be purchased on preferential terms. Now we believe that we will recover and become self-reliant, and... let's hope, we'll be able to help other people as well."

### Social Canteens

Since April 2004, WFP partnered with Caritas Internationalis in the implementation of the Social Canteens project for some 1,600 particularly vulnerable people in Grozny. Many of them were blind, handicapped or lived in such poor conditions that they had problems cooking the food they received through the relief distribution programme. With various donors contributing fresh food and WFP providing basic ingredients, these people had an opportunity to enjoy a hot meal five days per week. During 2004-2008, 1,042 MT at the total value of US \$515,000 were distributed in Grozny under the Social Canteens project.

**"T**he life of my large family changed for the better since these social canteens have been opened," says Zaida



Baisaeva from Grozny. "My children look more cheerful and healthy, and I can afford to buy some new clothes for them sometimes."

### Feeding for TB Patients

In 2004, WFP partnered with the World Health Organization (WHO) and Médecins Sans Frontières-Holland (MSF-Holland) to jointly provide food assistance to tuberculosis patients in Ingushetia and Chechnya. Hospitalized patients received nutritious meals 4-5 times a day. WFP wheat flour, oil and salt were a critical supplement to hospital meals. Outpatients received monthly take-home rations of wheat flour, oil, and salt. The ration was a key motivation for a patient to regularly visit the doctor, undergo tests, and take medicines. This stage of the treatment was crucial for patients to avoid developing drug resistance. In 2004-2008, 442 MT at the total value of US \$217,000 were distributed in Ingushetia and Chechnya under TB programme.

*"The United Nations World Food Programme arrived in Ingushetia, when the situation was the most difficult, as there were tens of thousands of internally displaced people (IDPs) in need of food and shelter. When the influx of IDPs doubled the population of Ingushetia, the WFP's relief aid helped the republican authorities and the federal migration service to cope with the emergency situation. Without this help it could have turned into a humanitarian catastrophe."*

**Murat Zyazikov, President of the Republic of Ingushetia**

**"W**hen I was diagnosed with TB, I knew that from then on I would need good food and expensive drugs, but the total monthly income of my 9-member family did not exceed 10,000 roubles," says A. Sh., WFP beneficiary from Gudermes, Chechnya. "Médecins Sans Frontières-Holland and the United Nations World Food Programme solved both problems by providing me with the necessary medications and food."

### Food Aid for People Living with HIV/AIDS

In late 2006, WFP, together with the Chechen HIV/AIDS Centre, started providing food assistance to food-insecure people living with HIV to encourage them to attend the centre for psychological counselling. Since November 2006, 60 MT at the total value of US \$29,000 were distributed in Chechnya under this programme.

**"W**hen I gave birth to my daughter, I was very much concerned that she would be HIV-positive," confides Kh. D., WFP beneficiary from Grozny. "But doctors at the centre did their best to help her escape the disease. Last April, she was deregistered from the centre's list. I am also getting stronger because of the food we receive from the WFP, as now I eat three times a day. I am sure I will see my children growing up..."

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## Russia Becomes an Increasingly Important Partner for the UN Refugee Agency

Russia is a country with vast resources and a potentially bright future. In order to fully explore that potential, reliable ground rules must be established and followed. UNHCR Representative in the Russian Federation Wolfgang Milzow said in his interview to *Interfax* that he was impressed with the level of expertise and good will in the administration, but was sometimes frustrated by overly complicated processes and inconsistent regulations. *UN in Russia* publishes this interview.

– *What are the key areas of UNHCR activities in Russia?*

– UNHCR will continue to assist the Russian authorities to further develop an asylum system in accordance with international standards and to ensure full and unhindered access to asylum.

This year we'll mark the 60th anniversary of the Universal Declaration of Human Rights. The Article 14 of the Declaration reads: "Everyone has the right to seek and to enjoy in other countries asylum from persecution".

I would like to stress that in 2007, there was a visible improvement of access to the asylum system in Russia. All asylum applicants known to UNHCR in 2007 were admitted into the national procedure, and legal documents were issued to all of them. Last year, 542 persons received asylum in Russia. It represents 16% recognition rate.

We will cooperate with the Russian authorities to promote the local integration for persons who were granted asylum

by the Russian authorities. For some old cases, UNHCR will help to resettle them to other countries as a burden sharing measure.

It is important to promote the awareness on the stateless situation of many ex-USSR citizens who have already been in Russia for many years.

In Russia, UNHCR not only provides legal and material assistance directly to asylum seekers and refugees – a large portion of its human and financial resources are spent on capacity building activities with the FMS, such as providing FMS with legal advice on individual cases, organizing training for officials, and information sharing on countries of origin of asylum seekers.

– *How much funding does UNHCR need for implementing its programs in Russia? What are the main donor countries?*

– The total requirements for implementing our programs in Russia are US \$12.5 mln in 2008 and US \$12.4 mln. in 2009.



Wolfgang Milzow

Our main donors are EU, governments of USA, Switzerland, Canada, Germany, Japan and the Netherlands. There are, furthermore, several private donations. The government of the Russian Federation donates annually to the common budget of the Agency for implementing programmes in different regions of the world.

– *What programmes do you implement in the North Caucasus?*

– In the North Caucasus, jointly with other agencies, UNHCR assists internally displaced persons (IDPs) and refugees through legal counselling and housing projects.

UNHCR strives to promote tolerance towards refugees and other persons of concern to the agency through various public information activities and special events dedicated to the World Refugee Day, which is marked on June, 20. This year, the slogan of the WRD is "Protection". During the whole month of June the Muscovites could see the UNHCR poster dedicated to protection in the Circle and Arbat-Pokrovskaya lines of the Moscow subway.

– *Please describe the security situation for UN staff in the North Caucasus. Are there plans to decrease the security risk grade for UN staff in the North Caucasus?*

– The RF is responsible for the security of the UN staff. The UN also takes staff safety and security in this region very seriously.



A Chechen woman consults with a lawyer of the 'Nizam' Fund, one of UNHCR implementing partners

In 2006, UN security phase in the Chechen republic was decreased, and as a result, the UN Refugee Agency and other UN agencies have increased the number of missions to the republic. It allowed us to improve planning and monitoring the implementation of our projects.

However, our staff can still travel in Chechnya only with very strict security. The opening of an office, which would reduce the number unnecessary missions, is still being considered by federal authorities.

In April last year, our agency and other UN agencies temporarily closed their offices in Nazran, Ingushetia, and they are still closed. This decision was taken, when a UN office was damaged during attacks. But the implementation of UNHCR's projects in Ingushetia continues.

*– For how long, do you assume, there will be a need for UNHCR legal protection activities regarding internally displaced persons in the North Caucasus?*

– Through Legal Counseling Centers run by our implementing partners – all local NGOs – in 2007, the agency provided over nine thousand legal consultations to internally displaced persons in Chechnya, Ingushetia and Dagestan, where the majority of displaced population is still residing. Most consultations were provided in Chechnya – about 7 thousand. The agency's legal aid partners referred cases to law-enforcement, administrative and migration structures and courts.

Until all displaced people are able to start a new life there will be a need for such assistance.

*– How do you access the interaction between UN agencies in Russia and the Russian authorities?*

– In the Russian Federation, including the North Caucasus, we act as one UN team. We, the UN Refugee Agency, currently coordinate work in the protection and shelter sectors within activities jointly implemented by the United Nations and its partner organizations in the republics of the North Caucasus.

As for the Federal Migration Service, it is a very important counterpart of UNHCR in the Russian government. UNHCR will continue to work in close cooperation with the Ministry of Foreign Affairs and the Federal Migration Service. A revision of the national law on refugees is currently under way, and UNHCR submitted its comments to the Federal Migration Service. We do hope that the new edition of the law on refugees will finally be adopted and bring further improvements to the national asylum system.

UNHCR will continue organizing training events for governmental as well as for non-governmental organizations. We have currently 17 implementing partners, and the majority of them are Russian NGOs.

I would like to emphasize one point. It is very important to understand that all the UN programmes in Russia are designed to complement the government's efforts.

*– You are going to leave our country soon. What personal impressions do you have about Russia?*

– It is hard to leave Russia after less than two years of work and in the middle of very promising developments in the cooperation between the UN Refugee Agency and the Russian authorities. Time has been short but it was long enough to view Russia with different eyes. I am impressed with the cultural life and heritage of Russia. I look at Russia and Russians with respect.

Russia is a resourceful country with a potentially bright future. In order to fully explore this potential, reliable ground rules must be established and followed.

I am impressed with the level of expertise and good will in the administration. But I was sometimes frustrated by overly complicated processes and inconsistent and contradictory regulations.

For the UN Refugee Agency Russia will be an increasingly important partner. Russia is receiving a growing number of migrants. There is also a scope for close cooperation in emergency situations worldwide, although I hope that this will not often become necessary.

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# UN and G8 Summit on Hokkaido

Referring to the recent G8 meeting in Japan, UN Secretary-General Ban Ki-moon avoided describing it unequivocally as a success or failure. He preferred a cautious wording, “a step forward,” which reflects a wish of participating major powers to address the issue of climate change in a closer way.

Welcoming the G8 declaration on climate change and the environment, the UN head admitted that a lot more needed to be achieved for the international community to be able to conclude an agreement next year, which would replace the Kyoto Protocol.

It is worth recalling that on the eve of the summit the Secretary-General sought to make his position evident. In his letter to the heads of the G8 countries, he emphasized several key points. First, a close interrelation of three negative trends: food crisis, climate crisis, and the crisis of development of poor countries. The second is the need to achieve, already this year, tangible results in the context of the Bali Roadmap. According to Ban Ki-moon, postponing key agreements till the conference in Copenhagen in December 2009 is very dangerous. On the contrary, the negotiations need to be sped up, so that the outline of the post-Kyoto arrangements would be clear enough already at the conference in Poznan (Poland) at the end of this year.

How did the G8 respond to this? Its statement on this issue – which was at the top of the agenda of the conference in Toyako – emphasizes the commitment of the participating nations to stabilize the concentration of greenhouse gases in the atmosphere within the timeframe “compatible with economic growth and energy security.” In this light, the club of the world powers supports the goal of reducing the atmospheric pollution by 50 percent by 2050. This was the major news coming out of the summit.

The G8 unequivocally supported the principle of “equal, but differentiated responsibility” of various countries. For the initiates it should be clear that this is a

reference to the developing world. Although the statement does contain fine words about the readiness of the club to assume leadership in this field, they are all but offset by another provision in the document: to reach an agreement by the end of 2009 would only be possible in case of a the commitment on the part of all biggest economic players.

These major economies joined the G8 members at a special joint session on 9 July. The meeting of 17 countries was attended by Australia, Brazil, China, India,



*The author of the article (left) shakes hands with Ban Ki-moon*

Indonesia, Mexico, South Africa and South Korea. The language of the outcome document was close to that of the G8 document but with some differences that a trained eye easily catches.

First, that document did not mention the 50 percent reduction of pollution by 2050. The immediate conclusion by experts was that China and India did not let to convince themselves. Besides, the part of the document that relates to post-Kyoto negotiations referred to the “principle of fairness.” This echoes the point raised by Beijing, Delhi and the like-minded states: the responsibility for the adverse climatic impact rests with advanced industrial states, which will therefore have to shoulder the bulk of the

burden of adaptation arrangements – and then new industrial giants will follow.

The document adopted by the 17 nations has quite a few provisions that are very much consonant with the UN approaches. For instance, the promise to abide by the Convention on Climate Change, as far as the consolidation of adaptation capacity of developing states is concerned, especially with regard to the poorest and most vulnerable of them. As always in such cases, smooth and correct language is used to paper over the differences in practical positions and diverging priorities. Major economic powers and new players, including China, Brazil, India and Russia, have yet to conduct very difficult negotiations on basic parameters of a post-Kyoto agreement.

Among the points agreed upon by the G8 itself, there are two elements that caused some frustration in the UN. For one thing, the eight powers failed to specify the benchmark that will be used to measure the 50 percent pollution reduction. The UN and environmental activists would want it to be the base level of 1990, while the prevailing opinion within the G8 appears to be in favour of 2005 level. The actual reduction in the former case would be more substantial. For another thing, the good intention to achieve the 50 percent pollution reduction appears somewhat abstract, for it was not supported by any agreed short-term and middle-term targets. The lack of specific targets for 2020 provoked a pessimistic statement by the Head of the UN Environment Programme (UNEP), Achim Steiner. According to Mr. Steiner, it is high time to “put figures on the table” and demonstrate to the developing countries that the industrialized nations mean business.

The issue of energy policy featured quite prominently on the agenda of the Hokkaido Summit. The emphasis, for obvious reasons, was placed on “clean energy,” including renewable energy sources. The increasingly controversial theme of biofuel was wrapped in a vague wording.



The authors of the outcome documents did not overlook the issue of energy security. Having reconfirmed their commitments spelled out in the Principles for Global Energy Security adopted at the Summit in Saint-Petersburg in 2006, the G8 powers expressed serious concern over the sharp increase of oil prices and called for joint efforts to address the root causes of this phenomenon.

The oil-producing countries were called upon to increase the production and processing capacity in the nearest future. Observers noted that Russia did subscribe to this provision, which directly affects it, as it did subscribe to the invitation to oil exporters to ensure a stable and predictable investment climate.

From oil importing nations the G8 expects further progress in improving energy efficiency and diversification of the sources of energy. The participants in the summit cautiously observed that the energy markets are not fault-free, tend to send outside distorted signals concerning the price of the commodity, and are susceptible to political pressure. However, the club refrained from mentioning specific measures to restrict the influx of speculative investments into oil markets, pointing instead to the need to take steps to increase the transparency of the futures market.

Now a matter of the past, was the summit meeting on Hokkaido a landmark event? It will be judged by the progress the G8 nations will make in

terms of their commitments. The prevailing assessment is that so far, they have been doing their 'homework' not in the best way.

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*(The article reflects the views of the author, and does not represent the official position of the UN. – Editor)*

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## Events

United Nations Population Fund

# World Population Day 2008

United Nations Fund for Population, UNFPA, together with United Nations Information Center, organized a briefing for journalists on the occasion of World Population Day on the 11th of July.

The theme of World Population Day 2008, 'Family Planning: It's a Right; Let's Make it Real', provides a chance to raise public awareness of the many benefits of family planning, including its vital role in enhancing maternal health, gender

equality, and poverty reduction. World Population Days serves to reaffirm the right of people to plan their family size, thereby helping to make this right real.

Marco Borsotti, UN Resident Coordinator in Russia, presented the message of the United Nations Secretary-General Ban Ki-moon, saying that according to studies, "family planning has immediate benefits for the lives and health of mothers and their infants".

In a separate message, Thoraya Ahmed Obaid, Executive Director of the United Nations Population Fund, called on states to "accelerate efforts to achieve the Millennium Development Goals to eliminate extreme poverty and hunger and to improve the health of people and our planet". She pays special attention to the essential role of family planning for women's empowerment and gender equality and to the fact that, "when a woman can plan her family, she can plan





the rest of her life". The head of UNFPA highlighted that "it is time to make reproductive health a priority" and called on governments "to ensure universal access to reproductive health by 2015 and to back up this promise with political commitment and financial investment".

**L**idia Bardakova, UNFPA Russia Assistant Representative, stressed the importance of improving maternal health, which is often called the heart of the Millennium Development Goals (MDG), because if it fails, the other MDGs will fail too. Therefore reduced maternal death ratio and improved access to reproductive health information and services must be placed at the top of the national development agenda

of all countries. The MDGs explicitly recognize the role of family or rather the use of contraceptives, as central to maternal health.

**P**rof., Dr. Elena Uvarova, Head of Adolescent Gynecology Unit, Scientific Center for Obstetrics, Gynecology and Perinatology, Russian Academy of Medical Science, underlined that youth and especially youth at risk need access to information on reproductive health. To cover the young people's demand for information it is essential to increase professional skills of teachers, physicians, psychologists, and to work with parents.

**L**idia Samoshkina, Head of Motherhood and Childhood Unit at the Depart-

ment of Health of Tver region, noted that according to studies, to improve access of youth to family planning programs a special approach is needed, which is known as youth-friendly services.

**K**arina Konyukhova, Chief Physician of the Center for Specialized Medical Care at Tver, shared the experience of a recently organized youth-friendly clinic. The demand for services it provides is constantly increasing among adolescents. She added that disease prevention and family planning really improve youth reproductive health.

**L**yubov Erofeeva, Director General of the Russian Association of 'Family Planning', highlighted the necessity of complex programs improving young people reproductive health, and stressed the importance of working with parents.

**P**articipants of the briefing discussed issues of sexual education and mass-media coverage of family planning issues, men's participation in family planning programs and also significance of specialized centers of youth-friendly family planning services.

**Nadezhda Fedotova**



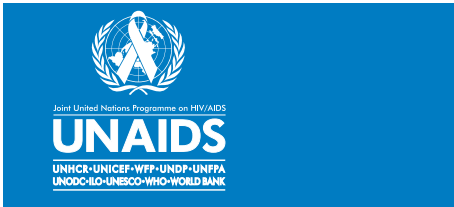
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# To Improve the Life of HIV-Positive People



The second National Conference 'Progress in Providing Universal Access to HIV Prevention, Treatment, Care and Support in the Russian Federation' was held in Moscow.



in the report of the Russian Federation on the implementation of the Declaration of Commitment on HIV/AIDS. This was the topic of the second National Conference on Universal Access in Moscow.

The conference participants analyzed and discussed the following ways of responding to the epidemic:

- prevention, including prevention of the vertical transfer of HIV-infection; prevention of HIV-infection among general population; prevention of HIV-infection among vulnerable groups; coverage for HIV testing and consultation;
- treatment, including clinical observation of HIV-positive patients; highly active anti-retroviral therapy (HAART); adherence to therapy and coverage for diagnosis and treatment of associated diseases;
- adherence at the national level, including the volume and distribution of funding, implementation of the 'Three Ones' principles.

Over 70 representatives of the Federal Service for Surveillance on Consumer Rights Protection and Human Well-being, federal, district and regional AIDS centres, Drug Service, NGO Forum, All-Russian Association of People Living with HIV, Russian Health Care Foundation, Global Fund projects, UN agencies – UNAIDS co-sponsors, and US Agency for International Development participated in the conference. The discussion focused on the United Nations High-level Meeting on AIDS in New York.

Already in 2006-2007, significant progress was made in achieving these goals owing to the implementation of the national priority project on public health towards prevention of HIV-infection, hepatitis B and C, diagnosing and treatment of HIV patients and the Global Fund projects (Russia undertook to repay the grant from the Global Fund). In 2007, the federal funding in the area of HIV-infection was increased by 57 times compared to 2005 and amounted to 10.7 billion roubles (US \$444.8 mln).

The participants noted that the greatest progress was achieved in the area of prevention of mother to child transmission, HIV testing and consultations, and the expansion of access to treatment.

In 2005, in accordance with international agreements, consultations on universal access to HIV prevention, treatment, care, and support were launched in the Russian Federation. In December 2005, Russia became the first country in the world to organize a national conference dedicated to this issue. In 2006, as a result of joint efforts of state structures and nongovernmental organizations, a set of targets was developed in the area of universal access to HIV prevention, treatment, care and support. Priorities were set by the Government Commission on Prevention, Diagnosis and Treatment of the Disease Caused by HIV.

Interim results of progress towards the goal of universal access were presented

The participants named HIV-prevention programmes for vulnerable groups as well as general population and young people among priority areas.





After discussing the key issues of the response to the epidemic, the participants developed recommendations and based on these, prepared proposals for the Government Commission on Prevention, Diagnosis and Treatment of the Disease Caused by HIV.

#### **United Nations High-level Meeting on AIDS in New York**

Participants of the meeting discussed the implementation of the 2001 Declaration of Commitment on HIV/AIDS and the 2006 Political Declaration on HIV/AIDS.

A number of heads of United Nations member states participated in the meeting. Together with representatives of civil society, UN agencies, funds and programmes, they examined progress towards achieving the goal of universal access to HIV prevention, treatment, care, and support by 2010, identified unresolved issues and outlined the ways to eliminate them.

The United Nations Secretary-General Mr. Ban Ki-moon presented the report on progress in implementing the 2001 Declaration of Commitment on HIV/AIDS and the 2006 Political Declaration on HIV/AIDS. Mr. Ban said: "Our challenge now is to build on what we have started, bridge the gaps we know exist, and step up our efforts in years to come. We can do this only if we sustain and step up our levels of commitment and financing."

In their presentations, representatives of countries and the civil society emphasized, among others, the following problems:

- improvement of reporting, especially with respect to funds spent by all stakeholders;

- coordination of HIV prevention programmes with local conditions;
- lack of effective programmes for population groups at risk, in particular, sex workers, men who have sex with men, transsexuals and injecting drug users;
- further criminalization of the respective groups' behaviour.

The countries called upon UNAIDS to develop HIV prevention programmes adapting them to local conditions and ensuring the expansion of therapeutic



programmes. A lot of speakers gave examples of sharp growth in the number of people who undergo treatment, and recognized that it was possible to achieve this success only owing to increased efforts on HIV prevention.

Dr. Peter Piot, UNAIDS Executive Director, emphasized in his presentation: "We cannot cure all victims of the epidemic. And for every two people who start taking HIV treatment, another five become newly infected. Unless we act now, treatment queues will get longer and longer, and it will become more and more

difficult to get anywhere near universal access to antiretroviral therapy."

The participants unanimously agreed that expanding of response to AIDS contributes to strengthening of healthcare systems. Emphasizing the urgency of the problem both in the area of public health and development they also noted that approaches based on cultural differences were necessary to solve it. Human rights and gender issues were acknowledged as the most important basis to increase the effectiveness of the response, with leadership and political responsibility being major components of this approach.

Gennady Onishchenko, Head of The Federal Service for Surveillance on Consumer Rights Protection and Human Well-being and chief sanitary officer of the Russian Federation, led the Russian delegation at the meeting, which also included four representatives of the civil society.

In his speech Gennady Onishchenko noted: "Clearly realizing the scale of the HIV/AIDS threat, the government gives this problem a priority attention. In the

last two years, considerable progress was made in improving access to treatment and prevention of this infection, to care and support of people living with HIV. Large-scale programmes and projects are implemented. The goals and tasks, which have been set, correspond to the concept of universal access developed by UNAIDS."

*Anna Chernyakhovskaya*

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## Peer Support as Treatment



According to the Russian Federal AIDS Centre and the Federal State Statistics Service, as of 30 November 2007, 31,109 cases of HIV-infection were registered in the Moscow Region.

This story began with a letter from people living with HIV (PLHIV), in which Moscow activists asked for assistance – after 14 years of work the Centre of assistance to PLHIV ‘Positiv’ was closed. During these years, about 10 thousand people passed through this centre, which had developed from a group of mutual assistance up to a full-fledged ‘drop-in-zone’ (‘comfort zone’, a centre where people can communicate and / or get the assistance they need). The first ‘drop-in-zone’ in Russia worked for three years, gradually expanding the number of services rendered, and during this time, it had become a second home for many people. But then this centre closed.

Closing of ‘Positiv’ became a real tragedy for its customers, many of whom it had literally saved. At the same time, this emergency situation pushed its founders and activists to thinking about the future of their undertaking and mobilized them for struggle for its survival.

At this difficult moment UNDP, together with the Russian Healthcare Foundation, decided to support the Centre. As the Foundation assists organizations working in this sphere at the regional level, an important factor was that though located in Moscow, the Centre renders services to PLHIV who were included in the programme in 2007 and live not only in Moscow but in the Moscow Region as well.

By joining forces, the partners succeeded in reopening the Centre at a new address in Malaya Gruzinskaya street. Now it is called ‘Doveriye’ (Trust) Social and Information Centre. The national hotline, which activists managed to maintain despite all the difficulties, also moved here. There is still much to do: the premises do not meet all the needs of the centre, and there is a lack of qualified personnel, but the centre functions. And a very important thing is that people working in

the centre begin to think about the future of their work.

We met with Mikhail Bakulin, head of the new centre, to ask him several questions:

- *Mikhail, what is a non-medical service?*
- Going away from common terminology, a non-medical service provided to PLHIV



is assistance in understanding, acceptance, and bringing relief to life with HIV – both to an HIV-positive person and his intimate circle.

A non-medical service deals with various aspects of life with HIV, for example, assistance to a person living with HIV, when he or she lives through a stress condition after learning about his/her HIV status, or in other situations connected with this infection. It may be assistance in correct intake of medicines and understanding of the importance of treatment. This is also group assistance as an opportunity to deal with discrimination and estrangement and finding solutions to many problems taking into account the experience of other group participants. There are various methods of consulting: «peer» face-to-face, over the phone, which allows receiving necessary information anonymously,

and many more. Therefore, a non-medical service is an essential component of the assistance in HIV treatment.

– *Who are the primary recipients of such services?*

– These are people affected by HIV problem. Yes, affected, not necessarily HIV-positive people, because their immediate circle – relatives, friends and colleagues – also need such support. People that turn to us for help have absolutely different social status. And we do not sort them according to any criteria, such as, for example, the way they have got infected, gender or age. There is no place for racial or any other kind of discrimination in our centre. We are all united by HIV problem, and all our efforts, as well as efforts of our visitors, are focused on the issues connected with it.

– *Who helps those who come? How people become activists?*

– The most important thing here is a desire to help selflessly in any sphere of life. People find themselves in our centre, when they need help related to HIV problem, a situation they find themselves in or related to their immediate circle. At first, they get help themselves, and then they start feeling the need ‘to give back’ and help others. At this point, an activist starts leading a group (this is the first indicator of a really active approach). Then he or she decides to receive training at a semi-





nar and try oneself as a consultant. We help such people receive quality training and then involve them in the centre's activities. For some of them, in the end, this becomes the main occupation in life, and others also help us depending on their possibilities and free time.

Unfortunately, there are very few really efficient activists in Russia, and the problem of getting professionals is very acute. Even after creating all the conditions for the development of activism, we can still wait for a long time before it bears result. As a leader of the centre I do not wait for such activists to emerge and to come to me. Instead, I watch active customers of the centre and provide information to them, motivate them, monitor their needs, and try to open up a person in an area that is interesting for him/her. To help a person develop, is one of the main tasks of our centre.

*– How do you know that your counselling was useful for a client?*

– In the treatment process it is quite simple: the recovery of a patient is a success. As for the counselling, it is more complicated. If a person attends a self-help group but is silent and distant, it is a failure. On the other hand, if he or she keeps coming to group meetings, it means the person needs it or feels comfortable in a group. The effectiveness of direct counselling is assessed by a number of customers' visits or by a complex monitoring of services. The most obvious indicator of success is appreciation of people. We continuously receive expressions of gratitude by phone, after counselling, after group work and training activities. Undoubtedly, the feedback of the family members and friends of our cus-

tomers is also very important as they can notice changes in our customers after they visit our centre or call the hotline. Overall, the effectiveness assessment is quite complicated and often costly, but it is indispensable for effective services and counselling.

*– How does the centre fund its activities?*

– The functioning of the centre is dependent on sustainable financing as we have to pay rent, staff salaries and fund other things. This requires substantial resources,



and therefore we are continuously engaged in fundraising. After Centre 'Positiv' for people living with HIV in Moscow and the Moscow Region was closed, the provision of non-medical services practically stopped. Therefore, a group of activists launched an advocacy campaign. We voiced our concern in our appeals to various organizations, at meetings; we sent a letter to the Moscow Government. Finally, we received feedback and support from two organizations only: the United

Nations Development Programme and the Russian Healthcare Foundation. I would like to thank them both for their help and understanding of needs of people affected by HIV. In addition, we are closely collaborating with HIV/AIDS centres of Moscow and the Moscow Region, which often encourage their patients to come to our centre or call the hotline. We consider this as a symbol of trust on the part of the medical staff. Of course, there are so many things to do and so many ways to cooperate. The most important thing is that we were able to prove the effectiveness of non-medical services for the improvement of life of HIV-positive people, their families and friends.

*– What are your plans for the future?*

– I would start from describing the services our centre is providing now. They include various support groups: a general support group for HIV-positive people, a support group for relatives of HIV-positive people, a support group for close friends of HIV-positive people, a support group for HIV-positive women, a group for prevention of risky behaviour in the gay community, and a support group for HIV-positive gays. We provide counselling by phone and personally on a peer-to-peer principle, organize trainings and discussions. The visitors of the centre can receive a consultation of our psychologist, surf Internet, and borrow books from our library. All our services are anonymous and free of charge.

We also conduct regular needs assessment of our customers, and the information we receive helps us make changes in our work and plan our activities. In particular, the centre intends to organize so-called schools of patients, as well as open events: consultations with specialists, film groups, thematic meetings – according to the wishes of our customers.

Since its opening the centre has provided services to at least 100 customers, whereas the number of visits is more than 200 a month, which means that each visitor uses our services at least twice. These results have been achieved during the four months of our work, and they confirm our work is needed and effective. However, we are not going to stop: we are improving the quality of our services; we look for learning opportunities for our staff members, and rely on the experience of other organizations. We are open and ready for cooperation.

***Ekaterina Ustinova***

# New Strategies: Business + Poor = Value for All

A new groundbreaking report offers strategies and tools for companies to expand beyond traditional business practices and bring in the world's poor as partners in growth and wealth creation. On 1 July in New York, the UN Development Programme (UNDP) released the report 'Creating Value for All: Strategies for Doing Business with the Poor'. Being part of UNDP's Growing Inclusive Market's initiative, the report draws on extensive case studies and demonstrates the effectiveness – both for human progress and for wealth creation – of more inclusive business models.

UN Secretary-General Ban Ki-moon recently issued a call to action on the Millennium Development Goals (MDGs), urging an international effort to accelerate progress and to make 2008 a turning point in the fight against poverty. This report demonstrates concrete ways the private sector can join in this vital effort.

The poor have a largely untapped potential for consumption, production, innovation, and entrepreneurial activity. But the more business models integrate and include the poor, the more likely companies successfully pursuing revenues will also help in fulfilling the MDGs.

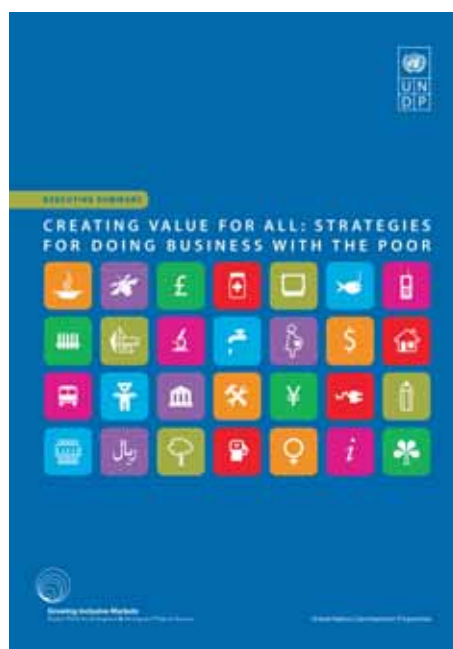
Yet the private sector cannot meet the needs of the poor nor overcome all the obstacles to doing business with the poor alone. The report outlines what businesses, governments, communities, non-governmental organizations (NGOs), donors and international organizations can do to ensure the greatest good.

As UNDP Administrator Kemal Dervis writes, "the power of poor people to benefit from market activity lies in their ability to participate in markets and take advantage of market opportunities. Business models that include the poor require broad support and offer gains for all."

The report 'Creating Value for All' highlights five strategies that private businesses have successfully used to overcome the most common obstacles to doing business with the poor:

- adapt products and services
- invest in infrastructure or training to remove constraints
- leverage the strengths of the poor to increase labour and management pool and expand local knowledge
- work with similarly-minded businesses, non-profit organizations or public service providers
- engage in policy dialogue with governments

As the authors note, "there is room for many more inclusive business models. There is room for more inclusive



markets. And there is room for much greater value creation. In the words of Mahatma Gandhi, "The difference between what we do and what we are capable of doing would suffice to solve most of the world's problems."

The Report showcases 50 case studies by researchers in developing and developed countries. These studies demonstrate the successful pursuit of both revenues and social impact by local and international small- and medium-sized companies, as well as multinational corporations.

In China, a company offered affordable computers and training to rural farmers via a low-cost operating system and software that is easier for customers with

limited education, thus expanding its market base.

In the Democratic Republic of the Congo, where the banking sector was decimated by years of war, a mobile phone company responded by offering encrypted short message service technology to allow customers to wire money. The company now has two million customers in the DRC.

In Kenya, owner-operators of health-care micro-franchises have increased their monthly incomes while treating about 400,000 patients in rural areas and urban slums suffering from malaria and other diseases.

In Mexico, a construction company has helped more than 14,000 Mexican migrants in the United States build, buy or improve a house back home in Mexico. From 2002 to 2006, the company generated US \$12.2 million from construction material sales, and since late 2005, 200 houses have been sold.

In Morocco, the subsidiary of a European water and waste company has dramatically increased the percentage of people with access to water and electricity in the shanty towns of Casablanca. By hiring and providing technical and management training to community representatives, the company ensured local oversight. Now 65,000 new households are connected to Casablanca's electricity and water system, and monthly household expenses for energy in this area have dropped from US \$17 to US \$6.

In the Russian Federation, a micro-finance NGO transformed into a bank to provide access to commercial capital and reach more clients. In 2006, the bank helped create 4,250 direct and 19,950 indirect jobs. In 2007, its loan portfolio was projected to exceed US \$60 million with net profits on those loans of more than US \$2 million.

In addition to examples from the 50 case studies, the report 'Creating Value for All' offers new tools for interested businesses. A strategy matrix helps find potential solutions to common con-

straints, while another new tool – heat maps – offer a visual overview of the market or services landscape—and a first look at potential new markets. For example, in Guatemala’s western regions the heat

map shows that 13 percent of people living on less than US \$2 per a day have access to credit, but that this figure drops to less than 8 percent in the country’s eastern regions.

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## Flagship Course: Health System Development

On July 14-19 in the suburbs of Moscow, the World Health Organization, in cooperation with the World Bank Institute, held a Flagship Course on Health System Development for representatives of the republics of Chechnya and Ingushetia. The course was attended by 21 participants, including the Deputy Minister of Health of the Republic of Chechnya and other policymakers from the ministries of health of Chechnya and Ingushetia, local administrations, and health care facilities.

The main goals of this Flagship Course were to review systematically the performance of health systems, to provide a

fragmented funding versus centralized funding on the health system performance? How to pay for health services and what kind of incentives are created by various payment mechanisms for physicians to offer better quality and more efficient services? How far to go in introducing family health services and replacing outpatient specialists? How to improve the quality of services at health care institutions?

The Flagship Course on health systems development takes a systematic approach to analyzing health system performance and designing policy instruments. The course was initiated in

and offered in the Health Services Management Training Center in Budapest in English between 1999 and 2004. The course was further contextualized to CIS experience in 2004, translated into Russian and offered to the countries of Central Asia and the Caucasus on the basis of the Center for Health System Development in the Kyrgyz Republic. Lately, representatives from other CIS countries (Ukraine, Moldova, etc.) also participated.

The course for representatives of Chechnya and Ingushetia relied on international and regional material. The trainers included Melitta Jakab (WHO Policy Advisor to the Kyrgyz Republic), Matt Jowett (WHO Health Finance Specialist), Gulgun Murzalieva, Baktygul Akkazieva, Erkin Checheibaev (policy analysts, Center for Health System Development, WB, Kyrgyzstan). The course was carried out with the financial support of EU and WHO Russia and the technical support of WHO-EURO and the Center for Health System Development (Kyrgyzstan).



framework for the development of health policy, particularly in the areas of health care financing and service delivery reform, and to exchange international experience in the sphere of health reforms. Participants brought many policy questions, which were addressed during the course. How to measure the health system performance? What is the effect of

the mid-1990’s by the World Bank Institute and supported by other international organizations. The first course for a global audience was delivered in 1997 in Washington DC, USA and since then has been conducted annually. A regional version of the course was delivered by adapting the material to the context of Central Europe and the CIS countries

“In the context of a continuously developing healthcare system and the possible upcoming reforms in the area of healthcare financing, I view this course as a great opportunity for the involved stakeholders and the main healthcare policy makers to come together and reflect on the issue of effective healthcare financing taking in consideration the wide experience of other countries and regions across the world,” Dr. Roza Indervieva, Head Doctor of the Children Polyclinic No.3 in Grozny, said.

Dr. Zuhra Kharkimova, Deputy Minister of Health of the Chechen Republic, shared her impressions saying: “What



makes this event valuable is that it provides extensive material on multiple aspects of healthcare financing, delivered by highly qualified international experts, which inevitably motivates and inspires local decision-makers to improve their own health delivery services and financing systems through the obtained knowledge and new practical instruments applicable to their region.”

In order to retain information and further disseminate the concepts introduced during the Flagship Course, WHO and the Ministry of Healthcare of the Chechen Republic came to a mutual agreement to appoint a selected number of course participants as trainers who would ensure integration of the health system component into the agenda of other forthcoming training events organized for local health professionals.

Thus two days of the upcoming ten-day training course on health management issues to be held for 25 Chechen health workers on the basis of Kislovodsk Institute of Economy and Law will be devoted specifically to the subject of WHO health systems and policy recommendations, including issues, such as health insurance and citizens’ rights for health care services; legal aspects of provi-



sion of fee based health services; human resource planning and development in health care, etc.

The increasing demand for health system reformation was also emphasized at the European Ministerial Conference on Health Systems, which took place in Tallinn, Estonia, in June 2008. During the conference high-level representatives from all 53 WHO European Region member states confirmed their commitment

to improving health and consequently wealth of their populations by strengthening their health systems.

**Mubammad Havtsukov**

**WHO Russia**

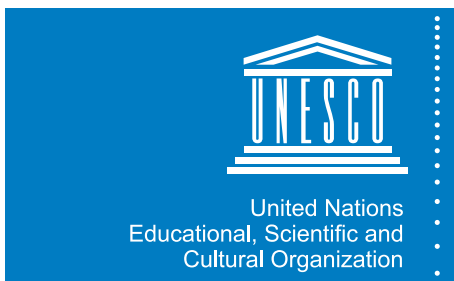
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## Net for Human Rights Experts



A Subregional Experts' Meeting on Human Rights within UNESCO's Competence took place in Moscow recently. The meeting was organized by the United Nations Association of Russia and the UNESCO Chair at the Moscow State Institute of International Relations (MGIMO-University), in cooperation with the UNESCO Moscow Office and with the support of the Commission of the Russian Federation for UNESCO and the UNESCO Headquarters (Paris). The event was dedicated to the 60th anniversary of the Universal Declaration of Human Rights.

The main aim of the meeting was the discussion of problems related to the

implementation of human rights within UNESCO's competence: the right to education; the right to participate in cultural life; the right to freedom of opinion and expression, including the right to seek, receive and impart information; and the right to enjoy the benefits of scientific progress and its applications, as well as analysis of obstacles to the implementation of these rights in the countries of subregion, with particular emphasis on the right to education including human rights education, gender equality, prevention and elimination of all forms of discrimination.

The meeting gathered human rights experts and representatives of UNESCO Chairs from the countries of Central and Eastern Europe (Armenia,

Azerbaijan, Belarus, Poland, the Republic of Moldova, the Russian Federation and Ukraine), representatives of the United Nations Development Programme (UNDP), the Office of the UN High Commissioner of Human Rights (OHCHR), the United Nations Association of Russia, the UNESCO Office in Moscow, UNESCO Secretariat in Paris, the Commission of the Russian Federation for UNESCO, the Commissioner for Human Rights (Ombudsman) of the Republic of Azerbaijan and the Representative of the Office of the Commissioner on Human Rights in the Russian Federation, representatives of the Ministry of Education and Science of the Russian Federation and the Moscow-city Government as well as non-governmental organizations.

All the participants agreed that it is important to continue working on the creation of a policy-research network aimed at identification and analysis of obstacles to the enjoyment of human rights and the elaboration of recommendations to improve policies in this field in the countries of the subregion. Policy-research network should ensure the interaction of all involved partners: UNESCO Chairs and their branches, research centers, educational institutions, national human rights institutions, intergovernmental organizations, international and national non-governmental organizations, legislative, executive and judicial bodies as well as other structures dealing with human rights issues at national and local levels.

## Social Centre in Grozny for Children and Adults



The ceremonial opening of the Psycho-Pedagogical and Medico-Social Centre took place in Grozny recently. The Director of the UNESCO Moscow Office, Mr. Dendev Badarch, the Minister of Education and Science of the Chechen Republic, Mr. Anzor Mouzayev, and the Mayor of Grozny city, Mr. Muslim Huchiev, cut the ribbon in front of the entrance to the Centre inaugurating the launch of the Psycho-Pedagogical and Medico-Social Centre of the Chechen Republic. The purpose of creating the Centre is to provide professional psychological and pedagogical support to children and adults as well as coordinate psycho-pedagogical activities carried out by educational establishments of the Chechen Republic.

The establishment of this Centre has become possible under the subproject "Capacity building for integrated psychological, pedagogical and medico-social rehabilitation of school children and educational personnel" implemented within the framework of the joint UNESCO/Russia umbrella project "Support for the restoration and development of education system of the Chechen Republic." Over the past years, the Chechen specialists, who became the staff of the Centre now, have received training and improved their skills in different issues related to the management of such centres in Russia and provision of practice in psychological and pedagogical support. These trainings were provided with the support of the

UNESCO Moscow Office. In addition, within this project, the Center was equipped by furniture, rehabilitation equipment and computer and office equipment. Methodological guidelines and educational programmes were developed for the specialists of the Center. These materials represent the complete set of methodological support to the activities of the centers of a like nature in Russia.

The ceremony was attended by the representatives of the Administration of the President and the Government of the Chechen Republic, Ministers of Education and Science, Health, Finance, Labour and Social Development, representatives of the Ministry of Internal Affairs and the Emergency Situations Ministry, academic community of the Chechen Republic, Mayor of Grozny and also representatives of the World Health Organization and the World Food Programme. Grozny schoolchildren performed dancing and singing and welcomed the distinguished guests.

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# Summary

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## UN / The UN Secretary-General Message on World Population Day

In his message on World Population Day, Ban Ki-moon focuses on family planning. He calls for action to reduce maternal mortality and achieve universal access to reproductive health by 2015. The Secretary-General also urges to devote greater attention and resources to the work to improve the health and quality of life for all people in the framework of the Millennium Development Goals.

## UNICEF / For the Sake of a Child's Smile

In April 2008, UNICEF, supported by Amway company, launched a new long-term project 'A Child Smile'. Specially equipped play rooms and sensor rooms at curative facilities and social centers are meant to make the life of little children more comfortable, joyful and interesting. By now, seven rooms have already been set up in various Russian regions, with their number to grow up to 20 before the end of the year.

## WFP / Leaving a Good Memory

This year, the World Food Programme wraps up its activities in the North Caucasus. The article presents brief results of WFP eight year's work, as well as the views of local residents who benefited from its programmes.

## UNHCR / Russia Becomes an Increasingly Important Partner for the UN Refugee Agency

*UN in Russia* publishes an interview of UNHCR Representative in the Russian Federation, Wolfgang Milzow, to Interfax news agency. In the interview, Mr. Milzow speaks about UNHCR activities in Russia, the required funding for its projects implemented in the North Caucasus, the interaction between UNHCR and Russian authorities, and his personal impressions about the country.

## UNIC / UN and G8 Meeting on Hokkaido

Speaking about G8 meeting in July, the UN Secretary-General Ban Ki-moon refused to call it a definite success or failure referring to it as 'a step ahead' in addressing the issues of climate change. He welcomed the statement of G8 countries on climate change and environment and noted that much more should be achieved in order to sign an agreement that would replace the Kyoto Protocol next year.

## UNFPA / World Population Day 2008

UNFPA, together with UNIC, organized a briefing for journalists on the occasion of World Population Day marked on 11 July. The theme of World Population Day 2008, 'Family Planning: It's a Right; Let's Make it Real', provides an opportunity to raise public awareness of the many benefits of family planning, including its vital role in enhancing maternal health, gender equality and poverty reduction.

## UNAIDS / To Improve the Life of HIV-Positive People

The second National Consultation 'Progress in Providing Universal Access to HIV Prevention, Treatment, Care and Support in the Russian Federation' held in Moscow brought together over 70 participants representing various Russian stakeholders in advance to the 2008 High-Level Meeting on AIDS in New York.

## UNDP / Peer Support as Treatment

Moscow centre of assistance to people living with HIV 'Positiv' was closed after 14 years of work. UNDP, together with the Russian Healthcare Foundation, helped to reopen it and provides financial support. The article features an interview of the director of the centre, Mikhail Bakulin.

## UNDP / New Strategies: Business + Poor = Value for All

A new groundbreaking report offers strategies and tools for companies to expand beyond traditional business practices and bring in the world's poor as partners in growth and wealth creation. On 1 July, UNDP released the report *Creating Value for All: Strategies for Doing Business with the Poor*. The report draws on extensive case studies and demonstrates the effectiveness of more inclusive business models.

## WHO / Flagship Course: Health System Development

On 14-19 July, WHO, together with the World Bank Institute, held a Flagship Course on health system development for representatives of Chechnya and Ingushetia. Twenty-one participants, including the Deputy Minister of Healthcare of Chechnya, and other policymakers from ministries of healthcare of Chechnya and Ingushetia, local administrations, and healthcare facilities attended the event.

## UNESCO / Net for Human Rights Experts

Moscow hosted a Subregional Experts' Meeting on Human Rights within UNESCO's Competence dedicated to the 60th anniversary of the Universal Declaration of Human Rights. The meeting gathered human rights experts and representatives of UNESCO Chairs from the countries of Central and Eastern Europe, as well as representatives of the Russian government and NGOs. They agreed to continue efforts aimed at creating a policy-research network to identify and analyze obstacles to human rights implementation and to develop policy recommendations in this field for the countries of the subregion.

## UNESCO / Social Centre in Grozny for Children and Adults

A new Psycho-pedagogical and Medico-social Centre was opened recently in Grozny. The centre will provide professional psychological and pedagogical support to children and adults and coordinate psycho-pedagogical activities carried out by educational establishments of the Chechen Republic.

*United Nations*



## Millennium Development Goals

The Millennium Development Goals is a set of specific and measurable targets aimed at reducing poverty and raising living standards, which was adopted by 191 United Nations member-states, including the Russian Federation, at the Millennium Summit in 2000.

These Millennium Development Goals (MDGs), to be reached by 2015 or earlier, are as follows:

- |               |  |
|---------------|--|
| <b>Goal 1</b> | Eradicate extreme poverty and hunger         |
| <b>Goal 2</b> | Achieve universal primary education          |
| <b>Goal 3</b> | Promote gender equality and empower women    |
| <b>Goal 4</b> | Reduce child mortality                       |
| <b>Goal 5</b> | Improve maternal health                      |
| <b>Goal 6</b> | Combat HIV/AIDS, malaria and other diseases  |
| <b>Goal 7</b> | Ensure environmental sustainability          |
| <b>Goal 8</b> | Develop a global partnership for development |