



Red Crescent Society of Kyrgyzstan (RCSK) volunteers worked in Family Medicine Centers to support health workers during vaccination campaign. Photo by RCSK.

Appeal: MDRKG018	Total DREF Allocation: CHF 188,976	Crisis Category: Yellow	Hazard: Epidemic
Glide Number: EP-2023-000162-KGZ	People Affected: 800,000 people	People Targeted: 120,000 people	
Event Onset: Slow	Operation Start Date: 31-08-2023	Operational End Date: 29-02-2024	Total Operating Timeframe: 6 months

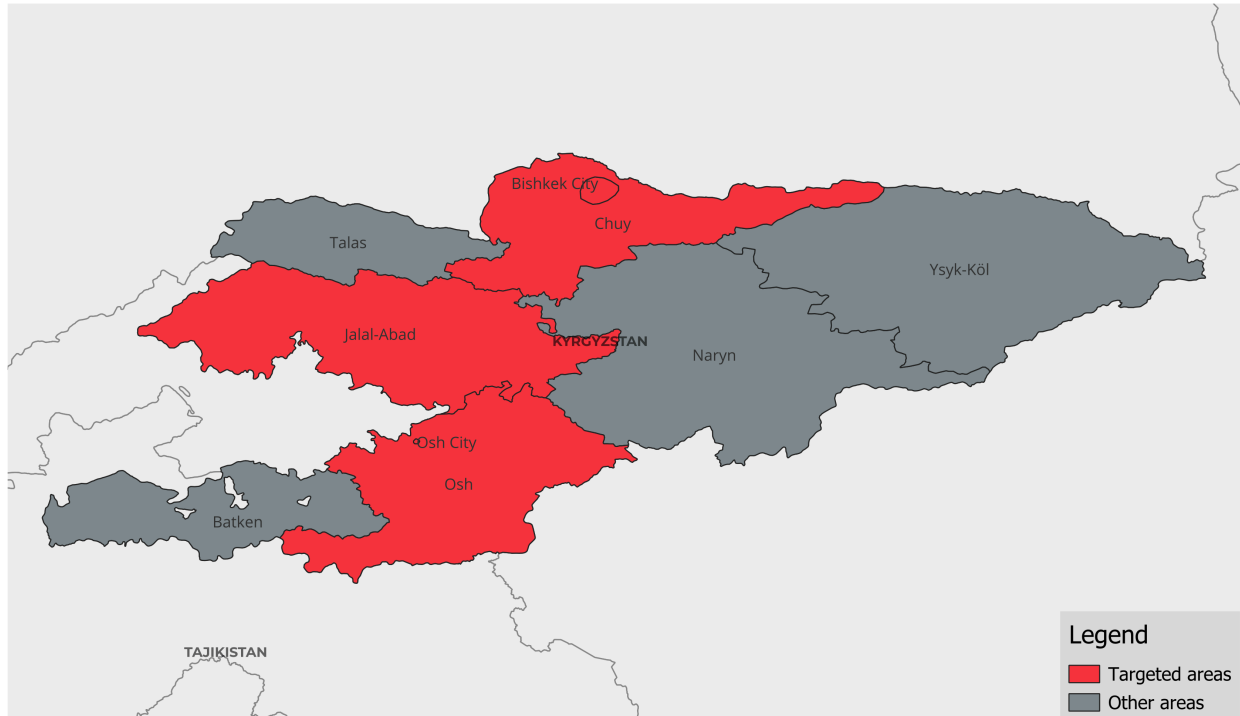
Targeted Areas: **Bishkek City, Chuy, Jalal-Abad, Osh, Osh City**

The major donors and partners of the IFRC-DREF include the Red Cross Societies and governments of Australia, Austria, Belgium, Britain, China, Czech Republic, Canada, Denmark, Germany, Ireland, Italy, Japan, Luxembourg, Liechtenstein, Malta, Norway, Spain, Sweden, Switzerland, Thailand, and the Netherlands, as well as DG ECHO, Mondelez Foundation, and other corporate and private donors. The IFRC, on behalf of the National Society, would like to extend to all for their generous contributions.

Description of the Event

Kyrgyzstan: Epidemic - Measles Outbreak

August 2023



The maps used do not imply the expression of any opinion on the part of the International Federation of the Red Cross and Red Crescent Societies or National Societies concerning the legal status of a territory or of its authorities.
Map data sources: GADM, IFRC. Map produced by: IFRC Europe Region Office, Budapest.



Map of targeted areas of the DREF operation: Chui province, Bishkek city, Osh province, Osh city and Jalal-Abad province

Date when the trigger was met

14-08-2023

What happened, where and when?

According to the Republican Center for Immunoprophylaxis of the Ministry of Health of the Kyrgyz Republic, since the beginning of 2023, the epidemiological situation in the country for measles and rubella has deteriorated. The first cases were reported in the first epidemiological week in Bishkek city and Chui regions, and, starting from the eighth epidemiological week, it has spread to Osh city and Osh region. Then it has spread to an additional 34 districts in 5 regions.

15,237 cases of measles and 11 deaths were reported between January 2023 and April 2024. The incidence rate of measles per 1 million population is 1402.60, which is one of the highest in the world (WHO). The country reported 11 cases of rubella in the period between May 2022 and April 2023, the fourth highest in the WHO Europe region during this period.

When the current DREF operation started (end of August 2023), there were 3,289 cases of measles reported since the beginning of 2023. This number increased to 7028 cases by the end of 2023, with the highest number of cases registered in Bishkek with 2,294 cases; Jalal-Abad region (1,823 cases); Chui (1,214 cases), Osh region (878 cases) and Osh city (417 cases). This was followed by Batken region (123 cases), Talas region (106 cases), Issyk-Kul region (93 cases) and Naryn region (80 cases). In 2023, 9 fatal cases were registered (4 cases in Bishkek city, 3 cases in Chui region, 1 case in Jalal-Abad region and 1 case in Batken region).

By the end of the operation, as of 27 February 2024, a total of 4,848 suspected measles and rubella cases were registered, 4,078 cases were classified as measles, of which 1,097 were laboratory confirmed, 1,183 were clinically confirmed and 1,798 were epidemiologically related cases.

Reduced childhood vaccination coverage during the COVID-19 pandemic played a key role in the increase of measles incidence in Kyrgyzstan. While the vaccine coverage rates have increased in the past two years, they remain below the pre-pandemic levels. In 2022,



the coverage rate with the first dose of measles-mumps-rubella vaccine (MMR) was 94.4%, and the coverage rate with the second dose of MMR was 94.5%. As the result of the supplementary immunization campaigns during 2023, the coverage of the first doses of MMR vaccinations increased to (96.4%) and the second dose to 96% by the end of 2023.

The Republican Center for Immunoprophylaxis (RCI) reports a growing number of vaccination refusals since 2016. According to RCI, as of 26 February 2024, 24,218 refusal forms have been registered with health facilities across the county, from which 70% have been reported in the Chui region and Bishkek city (in those locations 34.3% or a third of the country's population is concentrated).



RCSK volunteer presents a gift to a child who has received the first dose of vaccine. Photo by RCSK

Scope and Scale

Measles is one of the world's most contagious diseases. One person infected by measles can infect nine out of 10 of their unvaccinated close contacts. It is one of the most severe infectious diseases among children and one of the major causes of their mortality, especially in developing countries. Measles complications, such as pneumonia, diarrhea and encephalitis can occur in up to 30% of persons depending on age and predisposing conditions, such as young age, malnutrition and immunocompromising conditions. The measles outbreak can result in severe complications and deaths, especially among young and malnourished children. There is no specific treatment for measles, and most people recover within two to three weeks.

The country experienced a large measles outbreak in 2014-2015, when 17,779 measles cases were reported.

Some of the affected children in the current epidemic have suffered from severe cases of the disease, leading to prolonged hospitalizations. The groups most at risk in the current context were under-immunized children—those with zero doses or only partial vaccination with the measles-containing vaccine. The most affected regions included Chui, Jalal-Abad, and Osh, as well as the cities of Osh and Bishkek. These two cities, being the main urban centers of the country, have significant populations of internal migrants.

Source Information

Source Name	Source Link
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National Society Actions

Have the National Society conducted any intervention additionally to those part of this DREF Operation?	Yes
Please provide a brief description of those additional activities	<p>In parallel to the current DREF operation, the RCSK re-directed its ongoing two related epidemic preparedness and vaccination promotion project activities in support of the measles response: COVID-19 vaccination promotion project funded by USAID (the project ended in February 2024) and the Pilot Programmatic Partnership, with the funding contribution from the European Commission Directorate-General for European Civil Protection and Humanitarian Aid Operations (“ECHO”). It supported the national response to the ongoing measles outbreak, by mobilizing its trained volunteers to support the measles & rubella immunization campaign. The NS used the same set of risk communication messages on measles and the importance of measles vaccination that were used the current DREF operation. Through these two projects, by the end of 2023, it reached 104,725 people with risk communication activities.</p> <p>One of the RCSK’s innovative approaches within these two projects has been the mobilization of medical student volunteers from the Kyrgyz State Medical Academy to help with the digitalization of existing paper-based vaccination cards at Family Medicine Centers (FMC) on the MOH’s existing immunization information system “i-emdoo”. While the country has made significant achievements in the digitalization of vaccination records of its citizens since introducing the above-mentioned system in 2022 (to date it has the records of over 2 million citizens out of the country’ 7 million people), gaps remain in terms of digitizing the previous vaccination records. Under this operation, the medical volunteers mobilized by RCSK worked at FMCs to input the data for all children under 8 who were eligible for vaccination under the supplementary immunization campaign against measles and rubella and helped to establish an online database of vaccinated children and a more accurate list of zero-dose and under-immunized children in the selected locations and subsequently approach those families with vaccine promotion messages. By the end of February 2024, RCSK has helped enter records for approximately 200,000 children during the last four months into the system.</p> <p>At the same time, the RCSK has been working to introduce a small-scale pilot of community-based surveillance with the support of trained volunteers, to test if this approach is feasible in the context of Kyrgyzstan, and one of the priority diseases to be included is measles. This work is done within the framework of the Pilot Programmatic Partnership.</p> <p>In addition, the RCSK liaised closely with the regional and district departments of Education to involve schools and kindergartens in vaccination campaigns. It collaborated closely with the Kyrgyz State Medical Academy for involving medical students as Red Crescent volunteers in the vaccination campaigns.</p>

IFRC Network Actions Related To The Current Event

Secretariat	IFRC is present in the country and is part of the in-country movement coordination team. The IFRC Country Cluster Delegation (CCD) in Central Asia worked closely with RCSK on the identification of the needs and development of the DREF application and operation updates and provided tailored technical support to operations led by the NS.
Participating National Societies	Swiss Red Cross, German Red Cross, Italian Red Cross and Turkish Red Crescent are part of the in-country Red Cross Red Crescent Movement Coordination platform in

Kyrgyzstan. This coordination platform is led by RCSK.

The German Red Cross has been leading a consortium of RCRC partners involved in the implementation of the Pilot Programmatic Partnership project and one of the pillars of the project was focused on epidemic and pandemic preparedness. Under this component, volunteers supported medical services in a measles vaccination campaign organized by the Republican Center for Immunoprophylaxis.

ICRC Actions Related To The Current Event

The ICRC has been present in the country since 1992. ICRC was not involved in the operation.

Other Actors Actions Related To The Current Event

Government has requested international assistance	No
National authorities	<p>The RCI, the main agency responsible for immunization in the country under the Ministry of Health (MOH), is working closely with RCSK, providing technical guidance and supporting the coordination of RCSK activities with vaccination points.</p> <p>In response to the current measles situation, the government of the Kyrgyz Republic requested measles and rubella (MR) vaccine doses from GAVI in July 2023 and subsequently sought additional support from the Global Measles & Rubella Partnership to bring the situation under control. Thanks to the vaccine doses provided by the Global Measles & Rubella Partnership, the country organized outbreak response immunization in the most affected locations (Osh city, Osh region, Bishkek city, and Chui region) starting in September 2023, later adding Jalal-Abad region as the fifth location. This immunization campaign concluded in December 2023.</p> <p>As of the end of December 2023, 479,386 children aged 9 to 84 months (under 8 years) were vaccinated, achieving 79% coverage of the target group in the outbreak response immunization.</p> <p>In February 2024, the government procured additional MR vaccine doses using its own budget resources to continue the supplementary immunization campaign in Jalal-Abad and other heavily affected regions, starting from March 14.</p> <p>Considering that half of the regions and cities were not covered in the previous campaign, an additional campaign will be launched by the MOH soon with the provision of additional vaccine doses through the Outbreak Response Fund under the Global Measles and Rubella Partnership. This campaign targets 249,318 people in Naryn, Talas, Issyk-Kul, and Batken regions (areas not included in the 2023 immunization campaign). The supplementary immunization campaign, supported by GAVI, is scheduled to start in September 2024 to cover the districts that lagged behind in vaccination coverage after the 2023 supplementary immunization campaign.</p>
UN or other actors	<p>UNICEF in Kyrgyzstan and WHO offices have been closely following up with the Ministry of Health of the Kyrgyz Republic on the current situation and providing technical support throughout the epidemic.</p> <p>From November 27 to December 9, 2023, the experts from the World Health Organization assessed the root causes and measures taken in the Republic. They hired an independent company to conduct the study.</p>

Are there major coordination mechanism in place?

The Republican Center of Immunoprophylaxis established an operation center to coordinate the efforts in response to this situation. During the implementation of the current operation, the RCSK team maintained a regular communication with the Republican Center for Immunoprophylaxis, the Republican Center for Health Promotion and Mass Communications, and Family Medicine Centers. It organized several meetings to coordinate its response activities, including a round table on measles response with the involvement of



Needs (Gaps) Identified



In addition to growing vaccine hesitancy, the main needs identified by the RCSK were:

- (a) Lack of awareness among the parents and caregivers of children under 8 years, especially those who were under-immunized or were zero-dose, on the importance of vaccinating their children with measles-containing vaccines.
- (b) Lack of awareness among internal migrant families who lived in large urban areas such as Bishkek and Osh cities of their entitlements to receive primary health services, including vaccinations, regardless of their residence address (KR MOH Order No 443 dated April 14, 2023). When they moved to new places, they did not register their children with local health facilities in their new places and failed to receive vaccinations for their children according to the national immunization calendar.



Community Engagement And Accountability

There was growing vaccine hesitancy in the country and widespread misconception and distrust in vaccines, including COVID-19 and childhood vaccinations. The Republican Immunoprophylaxis Centre had received a growing number of reports of vaccination refusals since 2016. In 2022, more than 17,000 refusals were recorded. As of February 2024, this number had increased to 24,218 refusals.

Operational Strategy

Overall objective of the operation

The overall objective of the operation was to reduce the impact of the increase of measles cases within the most vulnerable, at-risk groups with the aim of reducing morbidity and mortality in coordination with the government health structures. The operation aimed to reach a total of 120,000 people in the selected communities through improving the awareness of parents and caregivers of children aged 9-84 months (under 8 years) on the importance and safety of measles vaccination, supporting social mobilization efforts during the planned immunization campaigns and tackling vaccine hesitancy among the parents and caregivers of zero-dose and under-immunized children.

Operation strategy rationale

This DREF allocation aimed to deliver humanitarian assistance to at-risk communities under the following strategic areas:

1. Supported supplementary immunization campaigns in selected five localities through social mobilization of trained Red Crescent volunteers.
2. Worked with the parents and caregivers of zero-dose and under-immunized children in under-served communities (peri-urban settlements in Bishkek and Osh cities) to reduce their vaccine hesitancy and encouraged them to vaccinate their children against measles.
3. Conducted public education to improve their awareness of the importance of vaccinating their children against measles, through active engagement of communities.

The DREF operation was updated twice due to the changes in the course of epidemic. The plan of action was revised at the end of November 2023, as the country experience further spikes in measles cases with the start of the season of acute respiratory viral infections and the spread of the epidemic to new locations. The epidemic began to spread more intensely in the Jalal-Abad region compared to other regions of the country. The plan was revised to include the Jalal-Abad region, in addition to the existing four locations (Bishkek city, Chui region, Osh city and Osh region), thus making five target locations across the country and extending the operation for one additional month. During December 2023, RCSK volunteers conducted awareness campaigns to inform parents about the importance of keeping their children at home or in less crowded places during the holiday period to prevent the spread of measles.



Despite these efforts, due to insufficient vaccination coverage rates in the target locations, January 2024 saw a significant increase in measles cases among unvaccinated children and the plan was revised for additional two months to enable the outreach to additional 40,000 parents, caregivers, and their children in the same target locations (Osh City, Osh Region, Bishkek City, Chui Region, and Jalal-Abad Region).

The extension enabled the continuation of the ongoing work of Red Crescent volunteers with zero-dose and under-immunized children, and underserved populations (migrant communities in new and informal settlements on the outskirts of two main large urban areas of the country - Bishkek and Osh cities), as well as the continuation of risk communication and community engagement work. Additionally, provisions were made for RC volunteers to be mobilized for social mobilization during the additional immunization campaign in other locations, if the government plans for supplementary immunization campaign with MR vaccine will be materialized during this period.

Targeting Strategy

Who was targeted by this operation?

The DREF operation targeted the following groups:

1. Groups most at risk for measles - children from 9 months to 84 months old (under 8 years) in the most affected regions (Chui region, Bishkek city, Osh city, Osh region, Jalal-Abad region).
2. Vaccine-hesitant parents and caregivers who refused vaccination (zero-dose children and under-immunized children).
3. Parents of preschool children and school-aged children (0 and 1st grade).
4. Teachers of kindergartens and 0 and 1 classes.
5. Community leaders.
6. General population.
7. Migrant population.

The RCSK successfully reached 120,987 people. The selected regions and cities for this operation were the most affected regions and cities.

Explain the selection criteria for the targeted population

Groups most at-risk for measles were the children at the age of from 9 to 84 months (under 8 years) in most affected regions, especially those who are under-immunized or zero-dose children.

The local health facilities maintained lists of parents and caregivers who have refused to vaccinate their children. The trained Red Crescent volunteers have been supporting the health facilities in digitizing and updating these records, by contacting the families and encouraging them to vaccinate their children.

The main focus of the work of volunteers in the two target urban areas (Osh and Bishkek cities) were new settlements on the city outskirts, which are predominantly populated by internal migrants.

This intervention prioritized targeting the parents and caregivers of these children with tailored messages to address their vaccine hesitations and provide accurate information on measles-containing vaccines.

Total Targeted Population

Women	61,000	Rural	-
Girls (under 18)	19,000	Urban	-
Men	22,000	People with disabilities (estimated)	-
Boys (under 18)	18,000		
Total targeted population	120,000		

Risk and Security Considerations

Please indicate about potential operation risk for this operations and mitigation actions

Risk	Mitigation action
Serious political unrest and escalation of armed conflict in the border areas. Some of the regions targeted by the operation (Osh oblast and the city of Jalal-Abad) were in the south of the country, close to conflict-prone border areas.	RCSK closely monitored the border situation and took appropriate preparedness measures. The risk did not materialize.
Not sufficient supplies of measles-containing vaccines in the country.	The RCSC coordinated activities with the Republican Center for Immunoprophylaxis and monitored the availability of vaccines in the country. The operation's activities were adjusted to the calendar of supplementary immunization activities based on the supply of available vaccines in the country.
Major or medium-size concurrent disasters in the country.	RCSK closely monitored weather forecasts, maintained preparedness measures and was ready to activate the organization's early action protocols and immediate response measures. The risk did not materialize.

Please indicate any security and safety concerns for this operation

Ensuring the safety of RCSC staff and volunteers was of paramount importance for this operation. During this operation, there have been cases when Red Crescent volunteers encountered very aggressive parents who refused to listen to any information about vaccination and used threatening language. The RCSC field team have been closely following up with the volunteer teams to report such incidents and provided safety briefings for volunteers before their visits to communities. The branches provided supportive supervision and additional communication skills training to volunteers, so that they can safely deal with aggressive behavior of parents in such cases.

Has the child safeguarding risk analysis assessment been completed?

No

Implementation



Budget: CHF 112,571

Targeted Persons: 120,000

Assisted Persons: 120,987

Indicators

Title	Target	Actual
Percentage of zero -dose children aged 9-84 months who have been vaccinated after their caregivers received information sessions by RCSK	10	8
Number of people reached through social mobilization for vaccination campaign	120,000	120,987
Number of Red Crescent volunteers who have been deployed for outbreak response	150	150



Narrative description of achievements

- Training sessions on measles and rubella, and other vaccine-preventable diseases were organized for 150 volunteers in the cities of Bishkek and Osh, as well as in the Chui, Jalal-Abad, and Osh regions. Participants had the opportunity to discuss the most common questions asked by the population and find answers to them. The training sessions were conducted with the involvement of specialists from the Republican Center for Immunoprophylaxis and regional vaccination experts.

- RCSK volunteers actively participated in the vaccination campaign in 5 most affected regions and cities. Volunteers helped to manage queues at vaccination sites, provided psychological support to children before and after vaccination, assisted in conducting questionnaires, and entered data into the database of Family Medicine Centers.

- During the six months of the DREF operation, RCSK volunteers completed significant work, including conducting information sessions for the general population, parents, and guardians of children aged 9 months to 8 years on the importance of vaccinating children. They also engaged with vaccine - hesitant parents by speaking to them at vaccination points and making door-to-door visits to families with under-immunized children (zero-dose and partially vaccinated children).

- Given the acute situation in Kyrgyzstan, some volunteers will continue to conduct information campaigns as there is an ongoing need.

- RCSK volunteers also assisted medical staff with database management and filling out children's questionnaires. They celebrated children receiving their first vaccine by giving them a small toy, providing psychosocial support during the vaccination period.

- During the vaccination campaign organized by the Republican Center for Immunoprophylaxis, 709 children received their first dose of the measles vaccine following information sessions conducted by RCSK volunteers.

- In their social mobilization efforts for immunization, RCSK reached 120,987 individuals, including parents and guardians, those hesitant or refusing vaccination, kindergarten and elementary school teachers, internal and external migrants, individuals living in rented housing, community leaders, religious leaders, and the general population.

- The internet is a significant source of misinformation about vaccination, hosting many myths and negative reviews about childhood vaccines. As a result, this misinformation is often trusted and propagated across various media platforms. During the operation, active caregivers aided RCSK in disseminating accurate information about preventive vaccinations on social media to counteract negative reviews. They educated their audiences on how to safeguard their children against various vaccine-preventable infections, detailed the vaccines available in Kyrgyzstan, explained the childhood vaccination schedule, and debunked myths circulating online.

- Vaccination campaigns were held in kindergartens and schools within Chui, Osh, and Jalal-Abad oblasts, as well as in Bishkek and Osh cities, targeting areas with low measles vaccination coverage. Parents/guardians, caregivers, educators, teachers, and directors of educational institutions were involved in these campaigns. Volunteers held informational sessions to emphasize the importance of vaccinations. Animators entertained the children with colorful costumes and communicated information about vaccines in an easily understandable manner for kids. Such initiatives fostered a positive attitude towards vaccination among both parents and children. Parents and guardians willing to vaccinate their children could then contact the nurse present at the event, who would organize a list for subsequent vaccinations.

Lessons Learnt

• Considering that the main target groups for the operation were the children aged 9 months to 7 years and their parents, the operation should have selected more volunteers who can have flexible schedules to align with the availability of parents and caregivers and working hours of schools and kindergartens.

Challenges

• One of the main challenges faced by the RCSK team was recruiting volunteers. It was crucial for volunteers to be credible within the community. To achieve this, they needed experience in organizing awareness-raising events and, preferably, a medical background, since such a background builds trust among citizens. Additionally, it was necessary to ensure that the volunteers' schedules would allow for active participation in vaccination campaigns.

• In the initial period of the project, coordination between NS volunteers and medical workers was challenging. However, over time, the medical workers realized the meaningful help provided by the volunteers and expressed appreciation for their support. While there is an electronic system to keep the vaccination records, it does not include records of vaccine refusals. All such information is registered manually on paper, which often leads to its loss, complicating the work of both the NS and medical workers.





Community Engagement And Accountability

Budget: CHF 27,158

Targeted Persons: 30,000

Assisted Persons: 30,371

Indicators

Title	Target	Actual
Number of community perception and feedback reports produced on a monthly basis	2	2
Number of people reached with RCCE activities	30,000	30,371

Narrative description of achievements

• As part of the routine vaccination training, volunteers were trained on the Community Engagement and Accountability (CEA) component. The training covered the basic principles of CEA, the importance of community engagement in epidemic and pandemic preparedness and response, risk communication, and methods for providing feedback to the community.

The NS used multiple channels to conduct its risk communication work on measles and promote vaccination.

First, it used live TV and radio broadcasts. This has been very effective method for engaging the audience and provide an opportunity for people to ask clarifying questions from the top experts in the field and make the role of RCSK in the national vaccination campaigns more visible. During such broadcasts, the RCSK team engaged the Director of the Republican Center for Immunoprophylaxis and other vaccination specialists. The health experts answered the most frequently asked questions from the viewers, while the RCSK team showcased their work in the vaccination campaign and appealed to the public to vaccinate their children.

Second, RCSK produced television video clips, showcasing the main activities of RCSK in response to the measles outbreak in Kyrgyzstan, which were broadcast on news media platforms. It also published articles on local newspapers promoting vaccination. The operation developed a cartoon to educate the children about the importance of vaccination against measles and posted them on social media.

Third, it engaged social media bloggers who are very popular among young people. The bloggers were equipped with the social media cards which were prepared by the RCSK and contained key messages on measles vaccination, regular updates on the measles epidemic situation in the country and appealed to young parents. The NS engaged twenty bloggers, who were active on Instagram, TikTok and other social media platforms. Special attention was given to bloggers with a large following and who support vaccination.

It is estimated that the NS reached out to 30,371 people through these channels. This figure includes people who were reached through live TB broadcasts (number of people from the audience who interacted with the presenters during the broadcast and asked questions) and the number of people who commented, asked questions or interacted in other ways in response to posts of social media bloggers engaged by RCSK during this period. Based on the statistics provided by the bloggers, the indirect reach of the key vaccination messages promoted by bloggers was about 879,576 people (the number of people who viewed their posts).

The operation closely coordinated its efforts with the Republican Center for Health Promotion and Mass Communications (RCHP) in developing any risk communication messages and materials. The NS developed audio and video materials, as well as social media posts and newspaper articles, jointly with RCHP.

Volunteers collected feedback from community members during their door-to-door visits, their work in vaccination centers, and the events they organized in schools and kindergartens. RCSK collected feedback from community members through multiple channels - surveys conducted via KOBO, during live broadcasts on radio and TV, its social media pages and bloggers' pages.

Lessons Learnt

• For similar activities in the future, RCSK should engage bloggers that can work with the National Society on a pro bono basis and it should be establish a database of bloggers who are available to work free of charge.

• The National Society should mobilize a diverse volunteer profile to better connect with and serve varied communities effectively. For example, recruiting more male volunteers belonging to different age groups (currently the majority of RCSK volunteers involved in this



operation were female).

- The National Society should consider engaging religious leaders as partners in supporting information dissemination and awareness-raising activities.

Challenges

- As this was the first time RCSK was hiring social media influencers, the hiring process took a long time due to the lack of clarity on contractual arrangements for such specific service.
- Many in the communities were reluctant to share feedback through the National Society's feedback system.



Budget: CHF 49,248

Targeted Persons: 158

Assisted Persons: 158

Indicators

Title	Target	Actual
Number of lessons learned workshops held	1	2
Number of RCSK staff and volunteers involved in the operation	158	158

Narrative description of achievements

• RCSK conducted the final lessons learned workshop in February 2024. The workshop was facilitated by Marilia Arantes, DREF Officer of the IFRC' Global DREF team and Mahabat Murzakanova, PMER Officer, IFRC Central Asia Country Cluster Delegation. 22 participants from RCSK and IFRC participated in the lessons learnt exercise, which helped to identify the main challenges and achievements of this operation, and recommendations for future operations by RCSK. Using this opportunity, a refresher training on DREF tool was provided for 24 participants from RCSK and IFRC Country Cluster Delegation to update them on the DREF mechanism, including recent changes in the DREF procedures. The workshop was used also as an opportunity to test the tools of the global DREF Feedback process- the process designed to collect inputs and experiences of National Societies and IFRC delegation staff, and promote informed decision making using the DREF tool.

Lessons Learnt

(a) Aligning with the preferences of the communities to hear information on vaccination from someone with a health background, RCSK should mobilize more volunteer medical students from medical universities such as the Kyrgyz State Medical Academy for epidemic response work.

(b) RCSK should provide more training on interpersonal skills for volunteers, to avoid emotional burnout in dealing with aggressive members of the community, such as parents who oppose vaccination. •

Challenges

• In dealing with vaccine- hesitant parents, some volunteers experienced threats and abusive language from parents who were strongly against vaccination.



Financial Report

DREF Operation

FINAL FINANCIAL REPORT

MDRKG018 - Kyrgyzstan - Epidemic

Operating Timeframe: 31 Aug 2023 to 29 Feb 2024

Selected Parameters			
Reporting Timeframe	2023/8-2024/8	Operation	MDRKG018
Budget Timeframe	2023/8-2024/2	Budget	APPROVED

Prepared on 09/Dec/2024

All figures are in Swiss Francs (CHF)

I. Summary

Opening Balance	0
Funds & Other Income	188,976
DREF Response Pillar	188,976
Expenditure	-186,394
Closing Balance	2,582

II. Expenditure by planned operations / enabling approaches

Description	Budget	Expenditure	Variance
PO01 - Shelter and Basic Household Items			0
PO02 - Livelihoods			0
PO03 - Multi-purpose Cash			0
PO04 - Health	112,571	109,768	2,802
PO05 - Water, Sanitation & Hygiene		10	-10
PO06 - Protection, Gender and Inclusion			0
PO07 - Education			0
PO08 - Migration			0
PO09 - Risk Reduction, Climate Adaptation and Recovery			0
PO10 - Community Engagement and Accountability	27,158	28,756	-1,599
PO11 - Environmental Sustainability			0
Planned Operations Total	139,728	138,535	1,193
EA01 - Coordination and Partnerships		200	-200
EA02 - Secretariat Services		2	-2
EA03 - National Society Strengthening	49,248	47,657	1,590
Enabling Approaches Total	49,248	47,859	1,389
Grand Total	188,976	186,394	2,581

[Click here for the complete financial report](#)

Please explain variances (if any)

Variances between the original budget and the final financial report are explained as follows:

- The information sessions and vaccination campaigns were budgeted under the account group for "Information and public relations", while actual expenses were booked under "Workshops and trainings".
- Prizes for children distributed during the abovementioned vaccination campaigns were budgeted under "Teaching materials" while actual expenses were booked under "Workshops and trainings materials".

Contact Information

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