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

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

Report of the Secretary-General*

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* The delay in submission was due to the need to incorporate in the report the findings of the situational analysis of the situation in the Chernobyl-affected areas of Belarus, the Russian Federation and Ukraine conducted in the summer/fall of 2001 under the auspices of UNDP, UNICEF and the Office for the Coordination of Humanitarian Affairs.



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I. Introduction

1. The present report is submitted pursuant to General Assembly resolution 54/97 of 8 December 1999 on strengthening of international cooperation and coordination of efforts to study, mitigate and minimize the consequences of the Chernobyl disaster, in which the Assembly requested the Secretary-General to submit to it, at the fifty-sixth session, a report containing a comprehensive assessment of the implementation of the resolution and proposals for innovative measures for optimizing the effectiveness of the response of the international community to the Chernobyl disaster. The report presents the activities of the funds, programmes and specialized agencies of the United Nations system undertaken in the past two years to optimize the international humanitarian response to the evolving consequences of the Chernobyl disaster.

2. In the 15 years since the accident, many assessments of the situation in and around Chernobyl and in the contaminated areas of Belarus, the Russian Federation and Ukraine have been undertaken and numerous scientific and applied scholarly works have appeared. Among them are such authoritative reports as the conclusions of the 1996 Vienna conference, "Ten Years After Chernobyl", sponsored by the International Atomic Energy Agency (IAEA), the World Health Organization (WHO), the European Commission and the then Department of Humanitarian Affairs; the 1996 scientific report on the pilot projects of the WHO International Programme on the Health Effects of the Chernobyl Accident (IPHECA) and of related national programmes; the 2000 study by the United Nations Scientific Committee on the Effects of Atomic Radiation on the medical effects of the accident at the Chernobyl power plant;¹ the proceedings of the Fifth Chernobyl Sasakawa Medical Cooperation Symposium, "Chernobyl: A Decade", held at Kiev in October 1996; the proceedings of the international conference "Fifteen Years after the Chernobyl Accident — Lessons Learned" held at Kiev on the fifteenth anniversary of the accident, as well as others.

3. The continuing complex of problems represented by the single word "Chernobyl" is nevertheless far from an exact science. The scientific data, as well as other information, indicate that this problem will long continue to reverberate in the affected areas. It is also most likely to have a growing effect on the health of the population in the affected areas of the three

countries. Alarmist tendencies and unfounded pessimism are just as unhelpful as groundless complacency. It would be incorrect to assume that with the closure of the nuclear power plant and generous funding by donors of a new shelter construction around the destroyed reactor, the international community can now close the file on the people that continue to live in the shadow of Chernobyl.

II. The situation fifteen years after the accident

4. Clearly, the accident at the Chernobyl nuclear power plant on 26 April 1986 continues to have significant and palpable consequences in the communities, regions and countries which felt the brunt of the atom that momentarily escaped human control 15 years ago. Despite the existing differences among experts over the exact nature and scope of these consequences, some current facts and figures help to grasp the extent of the situation at present in these countries.

5. In **Belarus**, 23 per cent of the territory was contaminated. Two million people were directly affected by the disaster, including over 135,000 people who were required to resettle outside of the contaminated areas. Approximately 1,650,000 inhabitants continue to live in contaminated areas, including 344,000 children. Over 25 per cent of the forests and vast areas of agricultural land are still contaminated. National reports indicate that incidents of thyroid cancer in children have increased in some areas more than 100-fold when compared with the period before the accident. Almost a fourth of the territory and practically every fifth citizen of Belarus has been affected by the disaster. The aftermath has seriously impeded the socio-economic development of the country. National authorities estimate that the overall economic cost of the accident will reach US\$ 260 billion over the 30-year period from 1986 to 2016. In 2000, the Government of Belarus was obliged to allocate 6.4 per cent of the national budget to measures aimed at mitigating the consequences of the Chernobyl accident.

6. In **Ukraine**, 3.5 million people were affected. One and a half million hectares of agricultural land and over 1 million hectares of forest were seriously

contaminated. A total of 2.3 million people are still living in contaminated areas, including over 500,000 children. The aggregate amount of economic loss to date is estimated at \$100 billion. Over the past decade, between 5 per cent and 7 per cent of the expenditures from the State budget of Ukraine, over \$6 billion, has been spent on addressing the consequences of the accident. The overall contaminated area comprises 53,500 square kilometres. The number of people evacuated and resettled stands at 162,000.

7. In the **Russian Federation**, over 2.7 million people were directly affected by the radiological hazard and 52,400 were relocated due to the threat of continued exposure within the affected areas. As many as 1.8 million people continue to live in contaminated areas, including 300,000 children. Two hundred thousand Russian emergency workers responded to the accident and its aftermath and as a result require continued monitoring to ensure proper treatment for the radiological effects. A total of 2.9 million hectares of agricultural land and about 1 million hectares of forest were heavily contaminated. The total contaminated area comprises 59,000 square kilometres.

Latest analysis of the situation

8. A multidisciplinary and international inter-agency mission to study the human consequences of Chernobyl 15 years after the accident was undertaken in the summer of 2001. It was deployed jointly by the United Nations Development Programme (UNDP) and the United Nations Children's Fund (UNICEF), with support from WHO, the United Nations Office for the Coordination of Humanitarian Affairs and others. The mission has prepared a fresh independent analysis of the current situation based on evaluations of the situation in the affected areas of Belarus, the Russian Federation and Ukraine, detailed discussions with community members, local and national officials, reviews of current reports, scientific papers, etc.

9. The mission considered the present interlinked issues of environmental contamination, health risks and economic decline that are directly related to the Chernobyl accident. On the basis of the best available data, the mission concluded that there was clear evidence of direct health effects due to exposure to radiation, including, for example, 2,000 cases to date of thyroid cancer caused by the accident. There is little scientific consensus on what the full effects will be and

many cancers are not expected to occur for several decades. The fears relating to future prospects were a major factor in creating the poor health situation that exists today in the affected communities. These psychological difficulties were amplified by the collapse of many of the community structures, leaving individuals and families isolated and without the means to improve their life.

10. As a result, while the level of radioactive contamination continues gradually to decline as a result of natural processes and active interventions, the conditions of life of a significant portion of the rural population continue inexorably to decline. These people are caught in a downward spiral of declining quality of life due to a complex interaction between environmental, health, psychosocial and economic disadvantages.

11. The 348,000 people whose lives were disrupted by compulsory resettlement continue to face significantly higher levels of stress than the general population, as do those involved in the post-accident clean-up and those who still live in contaminated areas. The families and communities concerned have become dependent on Chernobyl-related welfare payments, which in real terms are dwindling by the year.

12. The accident has imposed a heavy burden on the national budgets through the cost of clean-up, compensation and recovery. As noted above, enormous efforts have been made by the Governments of the three States concerned to address the effects of the Chernobyl accident. However, available resources are steadily declining. Foreign investment in the affected regions is virtually non-existent. Those with marketable skills are being drawn away, shattering families and further undermining social institutions. What started as a technological disaster has become a major socio-economic crisis, with far-reaching implications for present and future generations.

III. Ongoing international assistance efforts

13. In the two years that constitute the reporting period, the funds, programmes and agencies of the United Nations system continued to implement projects focused on the four critical areas of urgent need where the affected States require support. These are intended to complement those undertaken by national

authorities, the European Commission and other regional organizations, the International Federation of Red Cross and Red Crescent Societies (IFRC), civil society and other international and national partners. Due to a severe lack of resources, most United Nations programmes have been narrowed in scope and several programmes and projects have been discontinued. The projects that have survived are supported largely by extrabudgetary funds raised by the agencies, and some from the meagre resources of the Chernobyl Trust Fund.

A. Health

14. A limited number of studies are continuing in an effort to better understand the long-term effects of radiation exposure on the population. These efforts include individual dosimetry studies carried out by WHO and sponsored by the Institute of Radiological Protection in France.

15. Most of the limited medical resources available are focused on children and those young adults who were children at the time of the accident, since they are most vulnerable to the effects of radiation. This includes a programme to make use of health telematics in the treatment of those exposed to radiation. Particular attention is devoted to the diagnosis and treatment of thyroid carcinoma, leukaemia and lymphomas in children and teenagers. In addition, ultrasound screening of children and adults is also being conducted in the Russian Federation in cooperation with the Office for the Coordination of Humanitarian Affairs. The WHO telematics project is funded largely through private donations from the Sasakawa Memorial Health Foundation of Japan, which also supports the databanks projects for thyroid tissue and nucleic acids, along with the European Community and the National Cancer Institute of the United States of America. In total, \$2,176,000 was spent by WHO on these programmes and projects, out of which \$420,000 was raised from donors.

16. Among the major programmes that had to be abandoned due to lack of funds is the second phase of the IPHECA programme of WHO. This means that WHO will be unable to continue with crucially important assistance projects.

17. UNICEF is conducting a number of ongoing projects in the three most affected States in the context

of its country programmes. These efforts are directed for the most part through the regional office of UNICEF in Moscow. UNICEF has focused on encouraging the adoption of lifestyles and safety practices appropriate for living in areas contaminated with radiation, providing training for families with members stricken by Chernobyl-related diseases and educating parents on monitoring thyroid deficiency. These activities are reinforced with projects in schools, such as the School of Safety for Children in Ukraine.

18. Special projects of limited scope are directed at providing equipment for institutes and rehabilitation centres in the region that provide treatment for children who have been disabled by Chernobyl-related diseases. Over the past two years nearly \$300,000 has been devoted to these projects, with most funds coming from the German National Committee for UNICEF.

19. The International Federation of the Red Cross and Red Crescent Societies has been an integral part of the Inter-Agency Task Force on Chernobyl since its inception. More significantly, it was among the first international actors to respond to the emergency and maintains critical health-care support functions in the region. Current activities are conducted under the Chernobyl Humanitarian Assistance and Rehabilitation Programme (CHARP), which was initiated in 1990. This programme provides radiological screening using mobile diagnostic laboratories. This screening is the first line of defence against radiological illnesses that can be treated through early detection. Over 400,000 persons have been screened since the start of the programme and 90,000 were screened in 2000 at a cost of \$1.5 million per year.

B. Socio-psychological rehabilitation

20. The highly successful community-based psychological and social rehabilitation centres initiated by the United Nations Educational, Scientific and Cultural Organization (UNESCO) and established in 10 communities throughout the region are being extended to three additional communities in the Zhytomir and Kiev regions of Ukraine and in the Brest region of Belarus. The centres offer social and psychological support and counselling for people coping with both physical and stress-related consequences of contamination. The original 10 centres are now self-sustaining through their own donor efforts and funds provided by the respective Governments.

The new centres have been initiated with funds provided by the United States Agency for International Development (USAID).

C. Economic rehabilitation and employment

21. Among the most severely affected areas is the town of Slavutych in Ukraine, home to a large number of workers from the Chernobyl plant. The closing of the last reactor in 2001 has deepened unemployment. The International Labour Organization (ILO), which closely monitors the labour markets in the affected region, anticipated this situation and, using largely funds provided by the Government of Switzerland, expanded its vocational retraining programmes to help ease the impact. In a similar vein, ILO in concert with the Government of Ukraine initiated a nationwide training programme, assisted in the revision of labour disability policy and helped create a special training programme for the more than 86,000 persons with disabilities caused by the accident.

22. The United Nations Office for the Coordination of Humanitarian Affairs coordinated the implementation by local institutions of three projects in Belarus. These included the economic rehabilitation of a major poultry farm, the introduction of modern technologies and efficient management methods in fertilizer manufacturing, and expert advice on rehabilitation of a factory for the production of baby food.

23. The World Bank is actively involved in the efforts to rehabilitate the economies of the region and is currently developing a new country assistance strategy for Belarus for 2001-2004, with Chernobyl as a central theme.

D. Environmental protection

24. IAEA and the European Commission are leading efforts related to water quality evaluation, reduction of radionuclides in human food and environment, reduction of the external exposure doses in contaminated areas and support for the decommissioning of the Chernobyl nuclear power plant. Agreement was reached with the Government of Ukraine for the final decommissioning of the last reactor and the multi-billion-dollar effort to contain the

destroyed reactor is proceeding with funds provided by the international community through the European Bank for Reconstruction and Development.

25. IAEA has implemented new measures to improve environmental safety which include the introduction of measures to hasten the recovery of heavily contaminated areas. In addition, the Agency has been supportive of additional research into the aetiology of thyroid cancer and the harmonization of databases on exposed emergency workers in the three affected States. The work carried out by the Agency in the period 1999-2001 on such projects was funded from extrabudgetary contributions totalling \$620,000 from IAEA member States.

26. The Food and Agriculture Organization of the United Nations (FAO) continues to work to reduce the radiological impact on the population due to the consumption of contaminated foodstuffs. Among these efforts is a joint project with IAEA to extract edible oil from rapeseed grown in the contaminated area and reduce the caesium content in meat and dairy products through specialized diets for cattle. Success in these areas not only will improve domestic conditions, but could also pave the way for viable exports from the region.

27. UNDP has continued its project in the Russian Federation on water quality evaluation and water availability in contaminated areas in order to ensure a safe water supply in the affected Bryansk region. A new programme has also been started for the decontamination of the affected forests in the Russian Federation.

IV. Advocacy and public awareness

28. Public awareness of the consequences of the Chernobyl disaster was a central focus of United Nations activities throughout the reporting period, culminating in the series of events to commemorate the fifteenth anniversary of the disaster.

29. In April 2000, the Office for the Coordination of Humanitarian Affairs and UNDP organized an international press trip to Ukraine to attract world public attention to the plight of the Chernobyl victims. A brochure entitled "Chernobyl — a continuing catastrophe" was published in February 2000. Taking advantage of the Chernobyl Shelter Fund Pledging Conference in Berlin in July 2000, an advocacy

document on Chernobyl was presented at the conference. The Office and IFRC cooperated in sponsoring a photographic book *Chernobyl Legacy* which was published in April 2001 by de.MO publishing in New York and was presented at United Nations Headquarters in New York during the commemoration of the fifteenth anniversary. The publisher has pledged to donate 20 per cent of the proceeds from the sale of the book to the United Nations Chernobyl Trust Fund.

30. The fifteenth anniversary of the accident at the Chernobyl nuclear power plant was marked at United Nations Headquarters by the ceremonial ringing of the Peace Bell to honour those who fell victim to the accident. The Secretary-General issued a statement calling on the international community not to forget those who continue to suffer the consequences of the disaster.

31. With the generous support of the Government of Ireland and of the Permanent Missions of Belarus, the Russian Federation and Ukraine to the United Nations, the Office for the Coordination of Humanitarian Affairs and the Department of Public Information sponsored the photo exhibit "Black Wind/White Land: Living with Chernobyl", organized by the Irish charity Chernobyl Children's Project at United Nations Headquarters to mark the fifteenth anniversary of the accident. UNESCO produced a compelling exhibit of photographs and paintings entitled "Chernobyl, 15 years of tragedy", which was on display in Paris in April 2001. The Office for the Coordination of Humanitarian Affairs, in cooperation with the Permanent Missions of Belarus, the Russian Federation and Ukraine in the United Nations Office at Geneva organized an exhibition entitled "Legacy of Chernobyl" at the Palais des Nations.

V. Resource mobilization efforts

32. The efforts of the United Nations aimed at providing assistance to victims of the Chernobyl disaster continue to be plagued by a persistent lack of resources. In an attempt to enhance international funding, the United Nations Coordinator of International Cooperation on Chernobyl in March 2001 appealed to the Member States contributors to the Chernobyl Shelter Fund to support assistance programmes. The Coordinator called attention to the disparity between the resources allocated to remedying

the technical aspects of the disaster and those devoted to its human consequences. Donors were asked to direct a small portion of the amount contributed to technical assistance to addressing the outstanding humanitarian needs. The response, unfortunately, has been less than generous.

33. During the period 2000-2001, a total of \$446,000 in cash and \$600,000 in kind was mobilized for the United Nations Chernobyl Trust Fund. The Governments of Switzerland, the United States of America and Ireland made timely contributions and pledges. Significant private donations were received from Japan and two NGOs from Germany. While contributions fell well short of the needed funds, the continuity of some important programmes and projects was ensured.

34. A set of new focused projects aimed at providing developmental assistance to the affected communities and addressing the needs of the affected individuals has resulted from the recently concluded situational analysis of the areas most affected by Chernobyl. These projects are to be presented shortly to the international donor community for consideration.

VI. Optimizing the United Nations approach to Chernobyl

A. Policy shift from emergency response to developmental assistance

35. When Chernobyl was first brought to the United Nations in 1990, four years after the accident, the problem was already beyond the classical emergency response stage, although the emergency response aspect remained for a number of years due to the gravity of the situation. At the same time, the international response always comprised definite developmental programmes. During the current reporting period it became increasingly evident that the needs in the Chernobyl context had gradually passed the emergency response stage altogether and were increasingly of a developmental nature. In November 1999, the United Nations Coordinator of International Cooperation on Chernobyl called a meeting of the ministerial-level Quadripartite Committee for Coordination, expanded to include members of the United Nations Inter-Agency Task Force on Chernobyl and donors, in order to exchange views on the future of

the international Chernobyl effort. Further to that meeting, the Office for the Coordination of Humanitarian Affairs began a critical review of the strategy for Chernobyl in collaboration with its key stakeholders.

36. By the fall of 2000, a broad consensus had been built within the United Nations system regarding a change of direction. Recognizing the central role of rehabilitation and developmental programmes, emphasis was placed upon widening the role and involvement of UNDP, UNICEF and other developmental agencies members of the Inter-Agency Task Force on Chernobyl and on closer cooperation with the World Bank and other developmental partners. The Governments of Belarus, the Russian Federation and Ukraine supported the more pronounced developmental emphasis, as well as the need for continued advocacy of the problem in the General Assembly.

B. Streamlining international coordination mechanisms

37. In order to implement the shift in policy described in paragraphs 35 and 36 above and to support it with appropriate coordination structures, the Secretary-General decided to appoint the Assistant Administrator of UNDP and Regional Director for Europe and the Commonwealth of Independent States as Deputy United Nations Coordinator for Chernobyl. A general division of labour between the Office for the Coordination of Humanitarian Affairs as the Office of the United Nations Coordinator and UNDP as the Deputy Coordinator has been agreed to.

38. The UNDP Regional Director discharges his role of Deputy Coordinator in full consultation and coordination and under the overall guidance of the United Nations Coordinator of International Cooperation in Chernobyl. This new dimension and cooperative arrangement with UNDP have determined the structural changes in the machinery of the Office for the Coordination of Humanitarian Affairs which supports the Coordinator in his responsibilities in such a way as to maximize cooperation with UNDP and ensure smooth interaction between the Coordinator and his Deputy. To this end, the Chernobyl-related responsibilities have been relocated to the Office for the Coordination of Humanitarian Affairs in New York,

in order to bring them closer to the Coordinator and to facilitate cooperation with relevant UNDP staff.

VII. Concluding observations on the future direction of international efforts

39. The recent assessment mission to the affected areas has proposed a strategy for a new phase of activities to include a new set of initiatives focused on addressing the human needs of the affected individuals. The aim is to help to progressively restore life to normal for the majority of the inhabitants over a 10-year period.

40. The mission presented recommendations to national and international partners to advance in a new direction. In a significant shift from previous policies, an overarching development strategy is proposed, as well as projects focused on affected communities. Renewed emphasis will be placed on sustainable household incomes, community-based primary health care and environmental education. The recommendations aim to encourage collaboration between the international community and the various interested parties to ensure that resources are directed to those most in need while encouraging and enabling the majority to progress to a state of self-sufficiency. The goal, as far as possible, is to give people control over their own lives, and communities control over their own futures, in a context of sustainable economic and social development within the coming decade.

41. The essence of the strategy is to build on the community programmes and projects put into place by the States and civil society. Economic development will seek to support the revitalization of traditional industries and adapt them to the environment, while seeking to nurture innovative alternative means of stimulating investment and growth in the affected regions. Health care for the affected population will draw upon the past 15 years of experience and attempt to tailor programmes for the high-risk groups, including children, women, middle-aged men and the elderly. This strategy can only succeed if it is generously supported by Member States and the entire international community.

Notes

- ¹ *Official Records of the General Assembly Fifty-fifth Session, Supplement No. 46 (A/55/46), annex J; see also Sources and Effects of Ionizing Radiation: United Nations Scientific Committee on the Effects of Atomic Radiation — 2000 Report to the General Assembly with Scientific Annexes: Effects* (United Nations publication, Sales No. 00.IX.4), annex J.
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