

# UNICEF HUMANITARIAN ACTION

## DPR KOREA

### DONOR UPDATE 12 MARCH 2004

## CHILDREN IN DPRK STILL IN GREAT NEED OF HUMANITARIAN ASSISTANCE

- UNICEF appeals for US\$ 12.7 million for action in 2004
- Government and UNICEF review cooperation in 2003
- DPRK-UNICEF sign new three year Programme of Co-operation for 2004-2006

### 1. EMERGENCY OVERVIEW AND RECENT DEVELOPMENTS

#### International and inter-Korean developments

The second round of six-party talks were held in Beijing at the end of February but ended without substantial progress. The complexity of the issues being discussed at the talks, not least the nuclear issue, means that no early agreement can be expected. The most likely scenario is one of prolonged negotiations over the remainder of this year and possibly into 2005. Meanwhile, the most vulnerable of the population, including children and women, continue to suffer. UNICEF looks forward to an early resolution of the conflict on the Korean Peninsula, to the launch of a much-needed rehabilitation and development assistance package and to sustained improvements in the well being of the children in the north.



The boundaries and names shown do not imply official UN endorsement.

#### Humanitarian assistance still needed to save lives

The humanitarian crisis continues and external support for the humanitarian effort remains vital if gains made in child survival over the past several years are not to be reversed. 42% of all children below the age of seven years are chronically malnourished and around 70,000 are severely malnourished with their survival threatened, if not provided with hospital-based nutrition rehabilitation. While there are large unmet needs in both the food and non-food sectors, of particular concern is the possible break in the food pipeline. WFP and UNICEF staff will be monitoring the impact of any food shortages very carefully over the coming months.

### 2. UNICEF RESPONSE : ACTIVITIES, ACHIEVEMENTS AND CONSTRAINTS

#### DPRK-UNICEF Annual Review of Cooperation in 2003

The annual review of co-operation in 2003 was held in December. Greater results were achieved in 2003 year than ever before, largely attributed to a continued focus on priorities and good joint collaboration as well as reasonable funding levels. Much was learned about the situation of children and women during the year as the October 2002 nutrition assessment results were further analysed, new county surveys were completed and as the quality of dialogue with provincial and county authorities improved during field visits. There is now a much better understanding about malnutrition, its causes and possible responses and the links between maternal nutritional status and that of the child. There is consensus that actions focusing on the youngest children are the best contribution that UNICEF co-operation can make at this time.

Some key results from joint Government-UNICEF action in 2003 were:

- Over 350,000 infants fully immunised protecting them against disease and disability
- Around 10,000 severely malnourished children treated, many of whom would otherwise have died
- Almost 2 million children in all villages received vitamin A and deworming through two child health days boosting their immunity / helping nutritional status
- Millions of children (unquantified) treated at health clinics as a result of the all year round availability of vital medicines for simple but life threatening illnesses including diarrhoea and pneumonia
- Millions of women and children (unquantified) benefited from iodine intake through iodised salt, with 18,000 MT or half of the country needs now being produced
- Over 10,000 additional families gained access to clean water through renewed piped water supply (another 15,000 in early 2004) and over 500,000 families through chlorinating city water supplies
- 650,000 children in primary schools in the northeast provinces and orphanage centres countrywide received textbooks and basic school materials
- 15,000 kindergartens received textbooks benefiting 600,000 children

The main constraints to greater progress were:

- Under funding. Under-funding and late arrival of funding delayed provision of supplies especially for water supply rehabilitation, resulting in 285,000 people in two vulnerable counties not benefiting as planned.
- Because of travel restrictions due to SARS, progress in programme implementation was affected, especially in the education sector.

### **UNICEF seeks US\$ 12,776,960 for 2004 in the new inter-agency appeal**

In the Inter-Agency Consolidated Appeal for 2004, issued by the United Nations in November 2003, UNICEF is seeking US\$ 12.7 million to meet the immediate humanitarian needs of the most vulnerable population. The main stakeholders are about 15 million children and women, including 2 million children under five, and 480,000 pregnant and 500,000 lactating women. Priorities are:

- To support the delivery of basic life-sustaining services in health and nutrition, including hospital-based rehabilitation of severely malnourished children.
- To support critical prevention programmes, such as malnutrition reduction, immunization plus, water and environmental sanitation and basic education.
- To develop model approaches using effective low-cost strategies that can later be replicated in other areas when additional funding becomes available.
- To support the development of national capacity of service providers, caregivers and families through training, technical assistance, planning and monitoring.
- To respond to short-term natural disasters.
- To improve and sustain the quality of the learning environment for primary school and kindergarten pupils with a focus on the most disadvantaged.
- To improve access to adequate quantities of clean water and upgraded sanitation for high-risk populations.

### **DPRK-UNICEF sign a new Programme of Cooperation for 2004-2006**

On January 20<sup>th</sup>, the DPRK and UNICEF signed a new co-operation agreement for the three years period 2004-2006. The Programme will continue to address the humanitarian needs of the most vulnerable children and women and at the same time initiate more development oriented actions in a number of selected counties. More details can be found on the UNICEF DPRK web-site <http://www.unicef.org/dprk>.

### **Early Childhood Development policy and programming**

Early childhood development is the major focus of the Care for Children and Women Project that UNICEF will continue to support in 2004. As part of strengthening capacity for Early Childhood Development (ECD) policy and planning through institutional linkages, a visit of the senior policy makers to Regional Training Resource Center (RTRC) Singapore was completed in collaboration with the UNICEF Regional Office. During the visit, areas of collaboration, mainly on the training of staff of care institutions, revision of curriculum of Care College, and early child education (ECC), were discussed.

Strengthening skills and knowledge of care takers of child-care institutions is one of the major planned activities. The training of core group of care takers and an orientation for a core group of 25 senior staff in the Ministry of Public Health and Institute of Child Nutrition on growth and early child development are planned for March. Apart from a series of training courses, the project will also entail rehabilitation of physical infrastructure and supplies for model nurseries, develop operational guidelines for best practices on growth monitoring and child feeding based on the findings. There will be a focus on "local level" implementation and addressing families directly with necessary information through an appropriately developed, inter-departmental collaboration.

### Ensuring the treatment of sick children

Essential medicines were provided to health clinics and hospitals in all provinces and cities during the first three months of the year (March deliveries are in process at the time of writing) ensuring that sick children receive essential treatment for simple but lifesaving illnesses such as diarrhoea and respiratory infection. Local production of medicines continued with raw materials supplied by Diakonie (Germany), WHO and UNFPA. An updated treatment guidelines / essential medicines manual was printed to improve health worker knowledge.

The project will continue to further strengthen the planning of Ministry of Public Health, Central Medical Warehouse and Drug Bureau, and their managerial and logistics capacity through overseas and in-country training. It will ensure that health facilities receive a basic set of vital medicines every three months. The essential medicine lists and quantification for most essential items that have been agreed among MoPH, WHO, IFRC and UNICEF will be used as the basis for UNICEF support.



A sick child receives treatment at the Hyesan Paediatric Hospital, Ryanggang Province.

Local production of Oral Rehydration Salt (ORS) and six basic medicines will be assisted so as to meet 50% of the local needs.

### Promoting safe-motherhood

In January, UNICEF chaired the third meeting of the inter-agency working group on safe-motherhood. The working group, set up last year, will improve coordination among agencies active in safe-motherhood. The number of maternal deaths in the DPRK has doubled since 1990.

### Immunization Plus

As for the routine immunization, in 2004 the project aims to maintain the high immunization coverage achieved of 470,000 infants and 480,000 pregnant women nation-wide through uninterrupted supply of adequate quantities of vaccines, auto-disable syringes and safety boxes. Cold chain equipment and transport equipment will be improved, and technical training imparted to central, provincial, county and ri (village) level EPI staff on vaccine handling, injection safety, cold chain management and surveillance. During the year, there will be an assessment of complete routine immunisation coverage.

### Maternal and child Health

UNICEF will continue to organize national "health child days" targeting children with vitamin A supplements and deworming, and ensure that at least 95% of children 6 months to 59 months receive vitamin A twice each year and all pregnant women receive vitamin A once immediately after delivery. Health staff will be trained on proper case management of the most common childhood problems, including control of diarrhoeal diseases and acute respiratory infections management with external consultancy support.

As a continuation of previous steps of Integrated Management of Childhood Illnesses (IMCI), UNICEF in collaboration with WHO will support the development of a standard integrated training course for health staff, which will integrate all the main child health problems, including diarrhoea, pneumonia and malnutrition, with an adoption of a large-scale training plan in 2005.

UNICEF will continue support to rehabilitation foods and medicines to rehabilitate more than 21,000 severely malnourished children. Severe malnutrition treatment protocols will be updated to meet international standards and health staff from 12 pediatric hospitals, 13 baby homes and 200 from county/district hospitals trained in treatment of severe malnutrition according to latest international protocols.

UNICEF assistance will continue for the reduction of maternal morbidity and mortality. This will entail supplies and equipment of 2 provincial maternity hospitals and 3 county hospitals to be able to provide Emergency Obstetric Care (EOC) and 50 ri clinics to provide Basic Obstetric Care and training of national core safe-motherhood team overseas.

### Extending clean water supply and sanitation facilities

Building on the experience gained in 2003, the Water and Environmental Sanitation programme has set up three main

priorities for 2004. These include further construction of water supply systems and continuation of rehabilitation of existing but inoperative systems and sanitation facilities in the counties and limited cities. A new direction adopted by the programme is the primary focus on rural water supply and household sanitation. UNICEF is in the process of concluding planning of new water supply schemes and sanitation facilities for three additional focused counties in the most vulnerable northeast of the country. The scope of the programme will expand to villages down from county levels that have been hitherto covered.

The new schemes for the counties and ris (villages) will involve changing the water sources entirely from the existing ones, free from any human habitation and completely free from contamination. The programme will continue to use gravity-fed systems to pipe the water from the source to the targeted beneficiaries, a low-cost, replicable technology that had been successfully demonstrated during 2003. Setting up such schemes are usually labour intensive, however this will provide additional employment to the local people, with WFP providing food-for-work. In addition, the new schemes will see the installation of sanitary latrines for rural families, thus reducing the threat of communicable disease for children and others. When completed, the new schemes will benefit an additional 200,000 urban and 100,000 rural population.

### **Rehabilitation of existing systems**

Rehabilitation of existing systems will include, in some instances, changing the existing water source. The new scheme in Hyesan city, for instance, will develop a new source 15km away from human habitation and from any contamination in the mountains. The water will also pass through a sedimentation and filtration chamber to ensure that all particles have been removed. About 70,000 more families in Hyesan (Ryanggang province) and Hwaeryong (North Hamgyong province) cities will have access to clean drinking water and 30,000 children in child care institutions including schools and hospitals will benefit from improved sanitation facilities. As a result of recent funds received from ECHO, the implementation process has now begun by the ordering of construction materials.

### **Improving quality of education**

The Education programme will focus on increased quality improvement as a high priority for 2004, to enhance efficiency and child-friendliness in schools. This will include physical improvement of pilot schools equipped with classroom materials, introducing life-skills training and improved teaching method through learning assessment, increased awareness on prevention of HIV/AIDS and awareness about child rights and the Convention on the Rights of the Child (CRC). The renovation of 5 primary schools in the disadvantaged counties and cities will be continued in 2004, combined with sanitation rehabilitation. External consultancy will be required for training of life-skills and improved teaching method.

### **Provision of textbook and basic school materials**

The programme will continue to provide essential school supplies and textbooks to 1.25 million primary school children and kindergartens to meet needs of all in the targeted provinces.

All these inputs are expected to improve overall quality of education which will benefit both boys and girls. If quality is allowed to drop, girl's education would suffer first, and more severely than boys'.

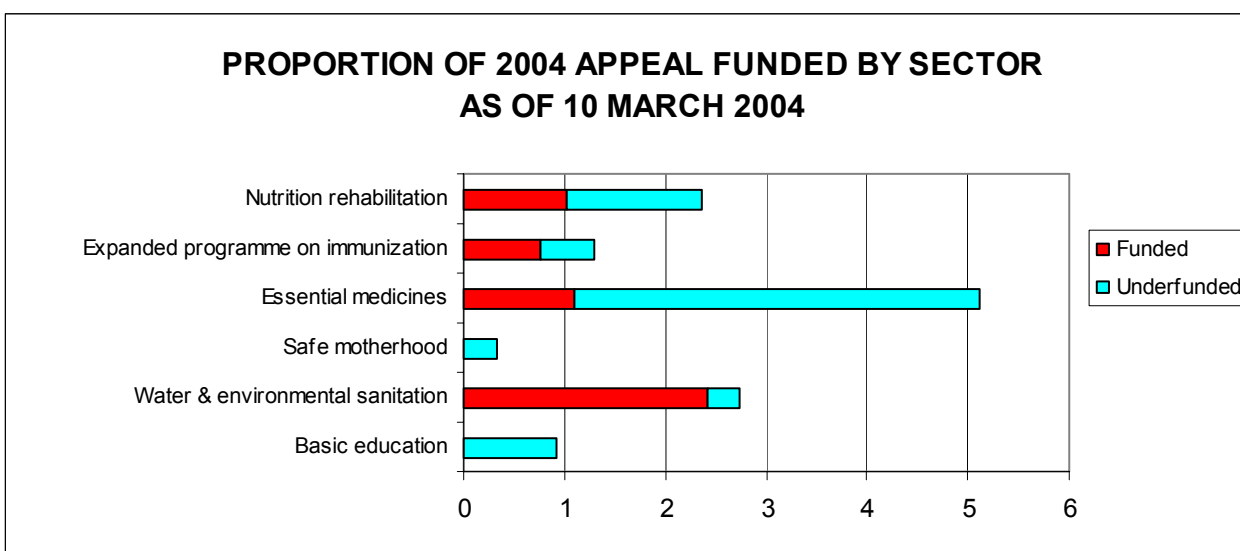
### **UNICEF Executive Director to visit DPRK**

Carol Bellamy, Executive Director of UNICEF, will visit DPRK from 13 to 16 March to gain first hand knowledge of the situation of children and UNICEF activities.

## 2004 APPEAL REQUIREMENTS AND RECEIPTS

As part of the 2004 UN Inter-Agency Consolidated Appeal for the DPRK, UNICEF appealed for US\$ 12,776,960 to support its Emergency Programme for children and women in the country. The table and graph below show the current funding status of the Appeal, by sector.

<b>TABLE 1: 2004 APPEAL REQUIREMENTS AND FUNDING BY SECTOR AS OF 10 MARCH 2004</b>				
<b>Sector</b>	<b>Target (US\$)</b>	<b>Funded (US\$)</b>	<b>% Funded</b>	<b>Unfunded (US\$)</b>
Emergency Nutrition Rehabilitation, Prevention of Malnutrition and the Control of Micro-nutrients	2,358,720	1,016,981	43	1,341,739
Expanded Programme on Immunisation	1,299,200	775,255	60	523,945
Essential Medicines	5,118,400	1,097,360	21	4,021,040
Safe Motherhood	343,840	0	0	343,840
Water and Environmental Sanitation	2,732,800	2,421,001	89	311,799
Education	924,000	0	0	924,000
<b>Total</b>	<b>12,776,960</b>	<b>5,310,597</b>	<b>42</b>	<b>7,466,363</b>



The following table indicates the contributions received for the Appeal, by donor. UNICEF is grateful to the generous donor contributions, which have greatly assisted in continuing humanitarian interventions for the most vulnerable children and women in the DPRK.

<b>TABLE 2: FUNDS RECEIVED FOR 2004 APPEAL BY DONOR AS OF 10 MARCH 2004</b>		
<b>Donor</b>	<b>Contribution (US\$)</b>	<b>Purpose</b>
Canada	451,128	Essential medicines, water supply and sanitation
Norway	426,750	Immunization, water supply and sanitation
European Community (ECHO)	998,752	Nutrition Rehabilitation, essential medicines
European Community (ECHO)	1,616,914	Water supply and sanitation
United Kingdom	1,817,053	Nutrition Rehabilitation, immunization, essential medicines, water supply and sanitation
<b>Total</b>	<b>5,310,597</b>	

ECHO remains the largest donor for DPRK with combined contribution of \$4,012,437 against CAP 2003 and CAP 2004. An amount of \$1,396,771 allocated in 2003 was utilized for the prevention and treatment of malnutrition.

## IMPACT OF UNDER-FUNDING AND CURRENT PRIORITIES

Under funding and late funding for UNICEF programmes in the DPRK has usually forced postponement of activities, slowed implementation of activities and reduced programme coverage. **Shortfalls in funding prevent UNICEF from providing adequate support and puts children at greater risk of death and malnutrition.** For example, UNICEF is currently only able to provide several “very vital” medicines out of the more than 200 items on the WHO essential medicines list.

The table below outlines the most urgent priority requirements:

<b>Project</b>	<b>Beneficiaries/coverage</b>	<b>Amount Required (US\$)</b>
1. Essential drugs	<ul style="list-style-type: none"><li>• 12 million people in eight provinces/cities</li><li>• Children and pregnant women referred to provincial hospitals in three provinces and one city</li></ul>	1,000,000 (for vital medicines)
2. Safe-motherhood	<ul style="list-style-type: none"><li>• 480,000 pregnant women</li></ul>	200,000 (for equipment for safe child deliveries)
3. Education	<ul style="list-style-type: none"><li>• 650,000 girls and boys in the most vulnerable provinces (north-east) as well as in orphanages in all provinces countrywide</li></ul>	500,000 (for textbooks and basic school materials)

Details of the UNICEF DPRK Emergency Programme can be obtained from:

Pierrette Vu Thi  
Representative  
DPR Korea

Tel: + 850 2 381 7150  
Fax: + 850 2 381 7676  
E-mail: [pvuthi@unicef.org](mailto:pvuthi@unicef.org)

Olivier Degreef  
UNICEF EMOPS  
Geneva

Tel: + 41 22 909 5651  
Fax: + 41 22 909 5902  
E-mail: [odegreef@unicef.org](mailto:odegreef@unicef.org)

Dan Rohrmann  
UNICEF PFO  
New York

Tel: + 1 212 326 7009  
Fax: + 1 212 326 7165  
E-mail: [drohrmann@unicef.org](mailto:drohrmann@unicef.org)