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UNICEF HUMANITARIAN ACTION

DPR KOREA

DONOR UPDATE 15 NOVEMBER 2001

URGENT NEEDS IN HEALTH, NUTRITION AND WATER & SANITATION

- Severe flooding in Kangwon province
- Severe risk of child deaths and malnutrition if health care and clean water not addressed along with food deficit
- Only one-third of Emergency Appeal requirements funded in 2001
- UNICEF to appeal for US\$10.37 in 2002

1. EMERGENCY OVERVIEW AND RECENT DEVELOPMENTS

Severe flooding in Kangwon province results in human casualties and damage to crops

Floods triggered by heavy rains, along with strong winds and sea surges, between 9 and 10 October 2001 caused heavy casualties and substantial damage on the eastern coast of DPR Korea, in particular, in Kangwon province. According to reports from the Flood Damage Rehabilitation Committee of the Government of DPRK, 81 people were killed with 82 injured and 27 missing and 11,207 people were made homeless in Kangwon province. Kangwon province is a food deficit area and is vulnerable to the effects of adverse climatic conditions. The floods have also caused damage to housing and affected infrastructure including the road network, bridges, railway lines, electricity, telephone lines and water supplies. It is expected that the country will not be able to meet its projected grain production targets this year. The food deficit of 1.8 million tonnes is contributing to an acute food shortage not seen since 1997. The latest FAO/WFP Crop and Food Supply Assessment report indicates that the domestic production will fall well below the minimum food needs and the country will again have to depend on substantial external food assistance for next year.

Increased risk of child death and malnutrition

Young children in DPRK face increased risk of death and malnutrition not only due to food shortage. Already weakened by inadequate diets they are more susceptible to diarrhoea and other gastro-intestinal diseases, which will become more common during adverse environmental conditions being experienced with the floods. Food alone cannot alleviate this problem. Without greater attention to support for basic health services, clean water and sanitation, even if there is increased food availability, children's lives are still at risk and their growth and development during vital formative years will be impaired.

Recent government statistics indicate that the mortality rate for children under five years rose during



the 1990s from 27 to 48 deaths per 1,000 live births. Infant mortality rose from 14 to 23 per 1,000 live births. Meanwhile, the per capita gross national product dropped from US\$ 991 to US\$ 457 in the same period. A nutrition survey conducted by the Government in 2000 indicated that 45.2 percent of children under five are stunted (too short for their age) or suffering from chronic malnutrition. These figures represent a very worrying trend in the situation of children in DPRK and are an indication of their extreme vulnerability.

The slow economic recovery also contributes to acute power shortages that affect essential services such as the refrigeration of vaccines and water pumping systems. More resources are needed to provide back-up systems and explore appropriate technologies that are less reliant on electric power.

New UNICEF DPRK Appeal for 2002

UNICEF is to appeal for an amount of US\$10.37 million for 2002 as part of the UN Consolidated Appeal for DPR Korea. The 2002 programme finalised in collaboration with the Government line ministries and other partner agencies will have the following components: (i) Expanded Programme on Immunisation (ii) Essential Drugs (iii) Maternal and Child Health (iv) Emergency Nutrition Rehabilitation, Prevention of Malnutrition and Control of Micronutrient Deficiencies (v) Water and Environmental Sanitation and (v) Basic Education.

Advances and setbacks in relations with international community

The European Union (EU) undertook a landmark visit to Pyongyang early May. The high level delegation was headed by the Swedish Prime Minister. The establishment of diplomatic relations between the EU and the country is expected to facilitate the EU's efforts in supporting reconciliation in the Korean Peninsula and assisting in economic reforms, including support to alleviate the acute food and health problems. Only two members of the EU's 15 member States, France and Ireland, have yet to open diplomatic relations with DPRK. Currently Sweden, Germany and the UK have resident diplomatic missions in Pyongyang.

Australia and DPRK have agreed to establish embassies in their respective capitals by 2003. The recently concluded joint declaration between DPRK and the Russian Federation also emphasizes the importance of progress in North-South reconciliation. A visit to Pyongyang later in the year by the President of the People's Republic of China is expected to provide further impetus in this direction from another of DPRK's regional neighbours.

While significant progress has been made at all levels after the historic inter-Korean summit in June 2000, the hiatus in contacts between the USA and DPRK has, however, adversely affected the pace of rapprochement on the Korean peninsula. This has resulted in several elements of the Joint Declaration being put on hold, including DPRK leader Kim Jong Il's reciprocal visit to the south and construction of a railway link between the two Koreas. Economic cooperation has also been hampered by current financial difficulties faced by South Korean companies, energy shortages and the low profitability of ventures begun thus far.

Despite this, a third round of family reunions was held in late February for 100 people from each side. Mail was also exchanged across the demilitarized zone for the first time for a selected 600 people.

2. UNICEF RESPONSE: ACTIVITIES, ACHIEVEMENTS AND CONSTRAINTS

Flood response

UNICEF and the IFRC were among the first international agencies to respond to the immediate needs in Kangwon province following the severe flooding during the night of October 9-10. UNICEF handed over 40 basic hospital medicine kits, oral rehydration sachets, water containers and 160,000 water purification tablets to 40 Ri hospital directors from the most affected areas of the province. In the following days, additional medicine supplies were provided to 5 county hospitals and to 100 clinics. UNICEF fielded four short assessment missions in the two weeks period following the flood including assessments of the health, water and sanitation situation in the province. UNICEF continues to follow the situation closely and to coordinate its response closely with other partners to ensure complementarity of support.

Other recent highlights

With limited funds, UNICEF has concentrated on supporting the most essential life-saving and growth-enhancing strategies. These include immunization and micronutrient supplementation to prevent disease and nutritional deficiency, treatment of common illnesses among young children, provision of essential maternity care for women, rehabilitation of severely malnourished children, and improvement of drinking water supplies. The mid-year review of cooperation, conducted with the Government on 25 and 26 July, confirmed this approach in focusing UNICEF support on areas of highest priority and on more sustainable strategies. The following are highlights of cooperation thus far during 2001.

Vitamin A and de-worming campaign

DPRK observed the first of two annual rounds of vitamin A supplementation on 22 May. Vitamin A boosts the body's natural immunity to disease and is a major part of the strategy to reduce mortality. The nationwide campaign focused on 2.1 million children aged 6-59 months. For the first time, this was combined with de-worming. All children between 1 and 5 years of age were targeted to receive one de-worming tablet (mebendazole), a contribution from the (South) Korean National Committee for UNICEF. Eleven observation teams, who visited many supplementation posts in the country, included staff from UNICEF, WHO, WFP and IFRC. A representative from the German Embassy also joined the team. A good turnout was reported from all the posts visited. Coverage figures are expected from

the Government soon.

National Immunisation Days (NIDs)

The first and second rounds of 2001 National Immunisation Day were successfully conducted on 20 October and 20 November targeting around 2.5 children under five. Early estimates indicate that over 95% of all children below the age of five years, or more than 2.2 million children received polio vaccine on these days. Actual vaccination coverage is still being calculated by the Ministry of Public Health. The Minister of Public Health formally opened the first round at a ceremony in Pyongyang, attended by UNICEF, WHO, and several ambassadors of donor countries. Field monitoring visits were made by teams of international agency staff in Pyongyang and in eight provinces. UNICEF fielded monitoring teams in five of the eight provinces and WFP fielded staff in the other three provinces. Preparatory activities included the supply of vaccine to several thousand immunisation posts around the country, printing of public information posters and broadcasting of TV and radio spots. During the second round on 20 November, children below 5 years of age also received deworming medicine (children between 2 years and five years of age) and a vitamin A supplement (children between 6 months and 5 years of age) together with another dose of polio vaccine. The polio NID is carried out as part of the country's effort to eradicate polio. Deworming medicine is given to reduce the heavy burden of intestinal parasites in children - which contributes to malnutrition and anaemia. Vitamin A supplements are given to improve children's immune status and to reduce morbidity and mortality.

Data collection on cold chain

An assessment of the national immunisation cold chain has been concluded in November. The assessment, carried out jointly by the Ministry of Public Health, UNICEF and WHO, will result in the preparation of a medium term plan for revitalization of the national cold chain system - essential to ensure that all vaccines used in the immunisation programme remain fully potent right up to the time of administration.

Expanded Programme on Immunization (EPI) /Global Alliance for Vaccines & Immunization (GAVI)

The country has by 1st of October 2001, submitted application for GAVI requesting for immunization service strengthening, support for injection safety and the extension of immunization to include Hepatitis B vaccination. The application is in the process of being reviewed by the GAVI Board. The five-year EPI plan of action is completed and the Inter Agency Coordination Committee working group established in March 2001 is functioning. The report of the recently concluded cold chain assessment jointly conducted by the Government, UNICEF and WHO is crucial in providing guidance on future support to the cold chain system in the country, especially with regards to the proposed intention to introduce Hepatitis B.

Integrated Management of Childhood Illnesses (IMCI)

A four-member DPRK team participated in the WHO-organized inter-country training course on IMCI in Java, Indonesia, 4-15 June. The UNICEF health project officer accompanied the Government delegation. The training linked home management of childhood illnesses with first level case management and referral. The illnesses being studied in depth included diarrhoea, acute respiratory infections, measles, malaria and malnutrition. Country-level implementation will include the following: establishment of a working group on IMCI, adaptation of manuals from generic to country-specific and national lower-level training. An early implementation phase will be carried out in selected districts to be followed by an expansion phase. This is, however, highly contingent on funding.

Successful UNICEF advocacy for breastfeeding

In August a joint Government/UNICEF seminar on nutrition looked at ways of heightening awareness of the nutritional problems in the country (increases in child and infant mortality rates and in levels of child malnutrition) and at possible responses (awareness of the multi-sectoral causes of malnutrition and of the need for local action). In-depth discussions were held on breastfeeding and complementary feeding practices, feeding schedules, home care versus nursery care and the difficulties in achieving best childcare practices. Subsequently, UNICEF organised a series of nutrition briefings for the benefit of humanitarian agency staff in Pyongyang and a seminar at the Grand People's Study House for the benefit of the public. Government officials stated that a policy change in 2001 to promote "exclusive breastfeeding up to six months of age" was the result of UNICEF advocacy.

As part of the programme to promote breastfeeding, Ministry of Public Health (MoPH) and UNICEF are preparing to organise training in the Baby Friendly Hospital Initiative, in breastfeeding and in counselling for midwives and senior doctors from maternity hospitals. This will be the beginning of a long-term campaign to promote good breastfeeding practices as a key factor in reducing malnutrition. An external consultant is being identified. The consultant will pay a visit in November and thereafter in March and August next year to provide support to the MoPH. Poor infant feeding practices, non-exclusive breastfeeding and late introduction of complementary food are some of the major contributing factors to malnutrition.

WES sectoral meeting

UNICEF and the National Coordination Committee, in collaboration with OCHA, facilitated a Ministry of City Management (MoCM)-led meeting of WES partners on 20 September. This is the first time that a line ministry in DPRK has chaired a sector wide meeting. The Government's policies and priorities in the sector were presented and discussed. MoCM reconfirmed that sanitation is a component of the WES programme. It was clarified in the meeting that, if absolutely, essential water quality testing will be allowed provided testing is done with local involvement. A follow-up meeting will be held in early 2002.

Distribution of iodised salt

Field monitoring in October confirmed that the distribution of iodised salt, recently provided by UNICEF using a contribution from the Government of Italy, is going well. This iodised salt, supplied as an emergency measure to meet part of the shortfalls in national supply, is being provided to households in the 5 provinces most affected by iodine deficiency, as well as to all baby homes, boarding schools and orphanages nationwide.

Geographic Information System (GIS) and ChildInfo training workshop

UNICEF supported the Central Bureau of Statistics (CBS) in organizing a GIS and ChildInfo training on July 2-7 for 20 Government counterparts at the MoPH, MoE, Ministry of City Management (MoCM), State Planning Committee (SPC) and the CBS. Three external trainers from Thailand and India conducted this hands-on training. ChildInfo is a comprehensive database on the situation of children and women used by UNICEF, governments and other partners for planning and advocacy. The training will support the establishment of databases with mapping capacities in Government ministries. The database will contain multiple sources of national and sub-national information for better targeting of resources for children, including analyses on the trends and contrasts of key child development indicators.

Training for DPRK statisticians in Australia

A four-member delegation from the Central Bureau of Statistics (CBS) is undergoing a two-month intensive course on modern statistical techniques at University of Sydney. The training will further enhance the capacity of DPRK officials to undertake a more contemporary approach in data collection, data processing, analysis and dissemination, and increase their capability to utilise data for planning and evaluative purposes.

HIV/AIDS study visit to Thailand, 22-25 October 2001

UNICEF regional office for East Asia and the Pacific in Bangkok, Thailand hosted a two-member DPRK delegation from the National Coordinating Committee (NCC) for UNICEF for an HIV/AIDS study visit. According to Government reports there is reportedly no HIV in the DPRK, however, the delegation acknowledged that close proximity to its neighbors especially China warranted a better understanding of the disease in order to effect policy development and to deter a serious potential spread of HIV in the country. The delegation met with Thai NGOs, UNAIDS, and Thailand's line ministries for health, education, and social welfare. Topics of discussion covered counseling and support, testing and treatment, multisectoral approaches for the prevention of mother-to-child transmission, affected orphans, programme funding, AIDS rights and discrimination issues as well as monitoring, geographical and social mapping. As a result of the study visit, the Government aims to develop focussed prevention activities in 2002, including relevant proposals for supplementary funding, in cooperation with the UN Theme Group on HIV/AIDS.

Regional Consultation for the Second World Congress against Commercial Sexual Exploitation of Children, 16-18 October 2001

A two-member DPRK delegation from the National Coordinating Committee for UNICEF participated in a preparatory consultation for the Second World Congress against Commercial Sexual Exploitation of Children (CSEC) to be held in Yokohama, Japan from 17-20 December 2001. The consultation was attended by 252 representatives from governments of East Asia and the Pacific, UN bodies and specialised agencies, inter-governmental organisations, donors and NGOs. Participants met the following objectives of the consultation: review of progress in the implementation of the Stockholm Agenda for Action; highlight and share good practices; identify priority concerns for further action; and formulate a Regional Commitment and Action Plan to be presented to the Second World Congress in December. Some main points from delegates' exchanges include: poverty reduction was crucial to prevent CSEC; efforts were needed to reduce demand for sex with children; as well as the need for improved law enforcement, including training of personnel in social work skills so that they could respond more sensitively to child victims. DPRK delegates listened to the deliberations but indicated that CSEC was not an issue of concern in the country.

Key observations from field visits

Key observations from an extensive field visit undertaken by UNICEF project officers to North Hamgyong and Ryanggang provinces are as below:

- Diarrhoea and Acute Respiratory Infections (ARI) are still the most common diseases reported.
- Less cases of acute malnutrition were reported compared to last year.
- Most institutions visited confirmed receipt of essential drug kits.
- There are requests for more multivitamins.
- Immunization activities seem to be on schedule. Temperature monitoring was largely accomplished, but cold chain monitoring needs to be improved.
- Antenatal care was provided at county and ri-levels, but essential preventive services such as urine and blood tests are reportedly not carried out due to a lack of equipment.

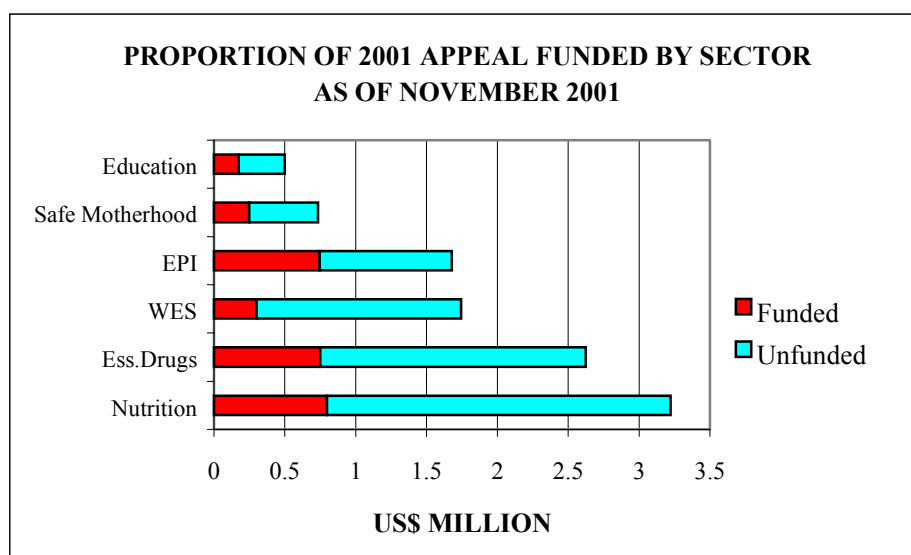
Other field monitoring also confirms that, at present funding levels, UNICEF supplies of essential drugs cover at best requirements during only four months of the year.

As is the case for other UN agencies, UNICEF currently has access to 167 out of 211 counties.

3. APPEAL REQUIREMENTS AND RECEIPTS

UNICEF DPRK appealed for US\$ 10.5 million to cover implementation costs of the 2001 Emergency Programme. The table and graph below show the current funding status of the Appeal, by sector. Water and sanitation sector, one of the key priority areas, remains poorly funded at only 18% of the requirement.

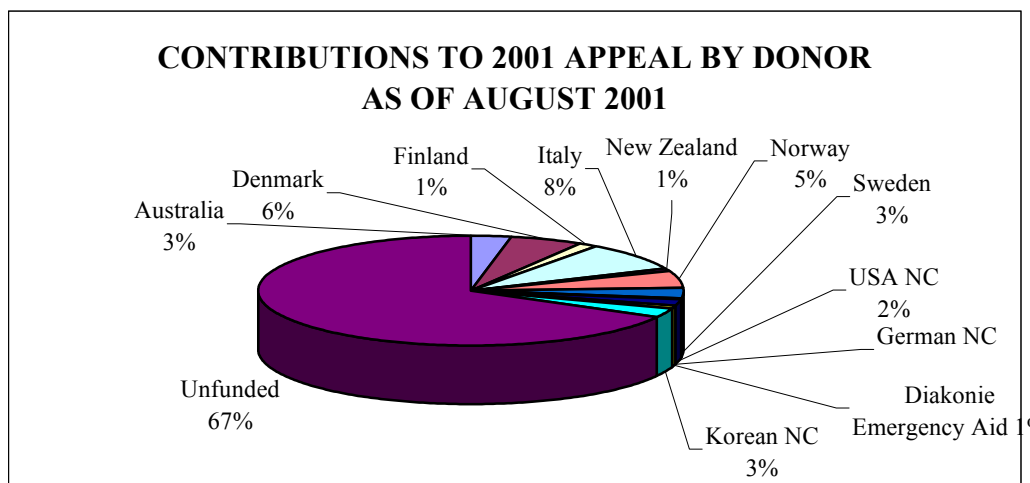
| TABLE 1: 2001 APPEAL REQUIREMENTS AND FUNDING BY SECTOR AS OF NOVEMBER 2001 | | | | |
|--|----------------------|----------------------|-----------------|------------------------|
| Sector | Target (US\$) | Funded (US\$) | % Funded | Unfunded (US\$) |
| Nutrition Rehabilitation/ Micronutrient Deficiencies | 3,223,500 | 759,200 | 24 | 2,464,300 |
| Essential Drugs | 2,625,000 | 1,161,562 | 44 | 1,463,438 |
| Water and Sanitation | 1,743,000 | 312,503 | 18 | 1,430,497 |
| EPI (Immunisation) | 1,677,690 | 784,480 | 47 | 893,210 |
| Safe Motherhood | 735,000 | 264,733 | 36 | 470,267 |
| Basic Education | 498,750 | 182,840 | 37 | 315,910 |
| Total | 10,502,940 | 3,465,318 | 33 | 7,037,622 |



The following table and graph indicates the contributions received for the Appeal, by donor. As indicated, largest contributions to DPRK Emergency Programme have been received from Italy (US\$ 858,755), followed by Denmark (US\$ 592,400) and Norway (US\$ 548,250).

| TABLE 2: DONORS FUNDS RECEIVED FOR 2001 APPEAL AS OF NOVEMBER 2001 | | |
|---|----------------------|---|
| Donors | Income/Pledge (US\$) | Purpose |
| Australia | 318,545 | Nutrition Rehabilitation (Control of Micronutrient Deficiencies - Food fortification) |
| Denmark | 592,400 | EPI, Essential Drugs |
| Finland | 148,710 | EPI |
| German NC* | 1,892 | Nutrition rehabilitation |
| Germany (Diakonie Emergency Aid) | 80,000 | Essential drugs |
| Italy | 858,755 | Nutrition Rehabilitation, Essential Drugs, EPI, Salt iodisation |
| Korean NC | 295,430 | Essential Drugs |
| New Zealand | 82,840 | Education |
| Norway | 548,250 | Safe Motherhood, WES |
| Sweden | 312,510 | EPI, Education |
| UK NC | 28,986 | Safe Motherhood |
| USA NC | 197,000 | Essential Drugs |
| Total | 3,465,318 | |

*Only against CAP contribution – additional contribution of US\$213,158 received from the donor for regular programme



4. IMPACT OF UNDER-FUNDING AND CURRENT PRIORITIES

Strong donor support to alleviate DPRK's chronic food crisis is gratefully acknowledged. However, additional resources are urgently required also to back up the impact of greater food availability. Children's survival, growth and development do not rely on food alone, but also on adequate basic health care, proper nutritional management and increased availability of clean water. With less than one-third of CAP 2001 funded, UNICEF DPRK is seeking funds for its emergency projects in health, nutrition, and water and environmental sanitation (WES). **Under-funding will prevent UNICEF from providing adequate support and put children at greater risk of death and malnutrition.** The table below outlines the urgent priority requirements.

| TABLE 3: PRIORITY REQUIREMENTS AS OF NOVEMBER 2001 | | |
|---|--|-------------------------------|
| Project | Beneficiaries/coverage | Amount Required (US\$) |
| 1. Immunization | 2.3 million children under five years and 430,000 pregnant women | 893,210 |
| 2. Essential drugs | 12 million people in UNICEF-designated areas and child care institutions nationwide | 1,463,438 |
| 3. Nutrition Rehabilitation control of micronutrient deficiencies | Severely malnourished children in 13 baby homes, 13 provincial paediatric hospitals and 200 county hospitals; 2.1 million children for Vitamin A supplementation; whole population for salt iodisation | 2,464,300 |
| 4. Water and sanitation | 256 children's institutions, 13 provincial paediatric hospitals, 30 settlements in disadvantaged areas | 1,430,497 |

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