



unicef

# UNICEF HUMANITARIAN ACTION

# DPR KOREA

## DONOR UPDATE 3 DECEMBER 2001

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

- UNICEF appeals for US\$ 10.37 million in 2002
- 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
- Flood damage in Kangwon province

#### 1. EMERGENCY OVERVIEW AND RECENT DEVELOPMENTS

##### New UNICEF DPRK Appeal for 2002

UNICEF has appealed for US\$ 10.37 million as part of the 2002 Consolidated Appeal for DPR Korea. The 2002 programme, finalized in collaboration with the Government line ministries and other partner agencies, has the following components:

Project	Budget (US\$)
Expanded Programme for Immunization	2,220,750
Essential drugs	3,790,500
Maternal and child health	1,092,000
Emergency nutritional rehabilitation, prevention of malnutrition and control of micronutrient deficiencies	1,564,500
Water and environmental sanitation	1,176,000
Basic education	530,250

Further information on the 2002 appeal can be found at <http://www.reliefweb.int>.

##### Increased risk of child deaths and malnutrition

Young children in DPRK face increased risk of deaths 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 have become more common during adverse environmental conditions experienced with the recent floods. Food alone cannot alleviate this problem. Without greater attention to 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 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



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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% 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 DPRK children 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.

### **Severe flooding in Kangwon province: human casualties and damage to crops**

Floods triggered by heavy rains, along with strong winds and sea surges, 9-10 October caused heavy casualties and substantial damage on the eastern coast of DPRK, particularly, in Kangwon province. According to reports from the Government's Flood Damage Rehabilitation Committee, 81 people were killed with 82 injured and 27 missing, and 11,207 people were made homeless. 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.

### **FAO/WFP crop and food supply assessment**

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. The cereal deficit for 2001/02 (November/October) is estimated at 1.47 million tonnes. The mission recommended the mobilization of 525,000 tonnes of food aid in cereals and 85,000 tonnes of other food items for the population groups particularly at risk.

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

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 amongst 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 25-26 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.

### **Flood response**

UNICEF and the International Federation of Red Cross and Red Crescent Societies (IFRC) were amongst the first international agencies to respond to the immediate needs in Kangwon province following the 9-10 October flooding. UNICEF provided 40 basic hospital medicine kits, oral rehydration sachets, water containers and 160,000 water purification tablets for 40 Ri hospitals in the most affected areas of the province. In the following days, additional medicine supplies were provided to 5 county hospitals and 100 clinics. UNICEF fielded four brief missions in the province in the two weeks following the flood to assess the health, water and sanitation situation. UNICEF continues to follow the situation closely, coordinating responses with other partners.

### **“Health days”**

A highly successful feature of the programme has been special days, organized by the Ministry of Public Health with WHO and UNICEF, in which preventive health measures are implemented in a campaign mode. These have been done on three occasions in 2001: on 22 May, children were given vitamin A supplements and de-worming pills; on 20 October, they received polio vaccinations; and on 22 November, all three were combined. Given the Government's high capacity for social mobilization, these “health days” achieve extremely high coverage, estimated at around 95 percent or almost 2.5 million children below 5 years of age. The inclusion of other areas for preventive and promotive health is under consideration. These “health days” are equally a focus for inter-agency collaboration on monitoring. Teams composed of embassy donor representatives (Sweden, Italy, Germany and UK), IFRC, NGOs and UN agencies (WFP, UNDP, UNFPA, WHO and UNICEF) visited all provinces in the country to witness these remarkable gatherings of children.

### **Cold chain assessment**

An assessment of the national immunization cold chain was concluded in November. Carried out jointly by the Ministry of Public Health, UNICEF and WHO, this 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 immunization programme remain fully potent right up to the time of administration.

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

On 1 October 2001, with the support of UNICEF and WHO, DPRK submitted an application to GAVI for funding of 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. A five-year EPI plan of action has been formulated, and an inter-agency working group established in March 2001 is functioning.

### **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 and possible responses: awareness of multi-sectoral causes of malnutrition and the need for action at family and community level. In-depth discussions were held on breastfeeding and complementary feeding practices, feeding schedules, home care versus nursery care and the difficulties in achieving best child care practices. Subsequently, UNICEF organised a series of nutrition briefings for humanitarian agency staff in Pyongyang and a seminar for members 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 organize training on 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 to support MoPH. Poor infant feeding practices, non-exclusive breastfeeding and late introduction of complementary food are some of the major contributing factors to malnutrition.

### **Water and environmental sanitation (WES) sectoral meeting**

The National Coordination Committee for UNICEF 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/water quality is amongst its highest priorities. A follow-up meeting will be held in early 2002.

### **Distribution of iodized salt**

Field monitoring in October confirmed that the distribution of iodized salt, recently provided by UNICEF using a contribution from the Government of Italy, is going well. This iodized 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. Iodine deficiency is the most important cause of mental impairment of children worldwide.

### **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, processing, analysis and dissemination, and increase their capacities in evidence-based planning and evaluation.

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

The UNICEF East Asia and Pacific Regional Office in Bangkok, Thailand hosted a two-member DPRK delegation from the National Coordinating Committee for UNICEF for a study visit on HIV/AIDS. According to Government reports, there is yet no HIV in DPRK. However, the delegation acknowledged that the general situation of the AIDS epidemic in Asia 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 counselling 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 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.

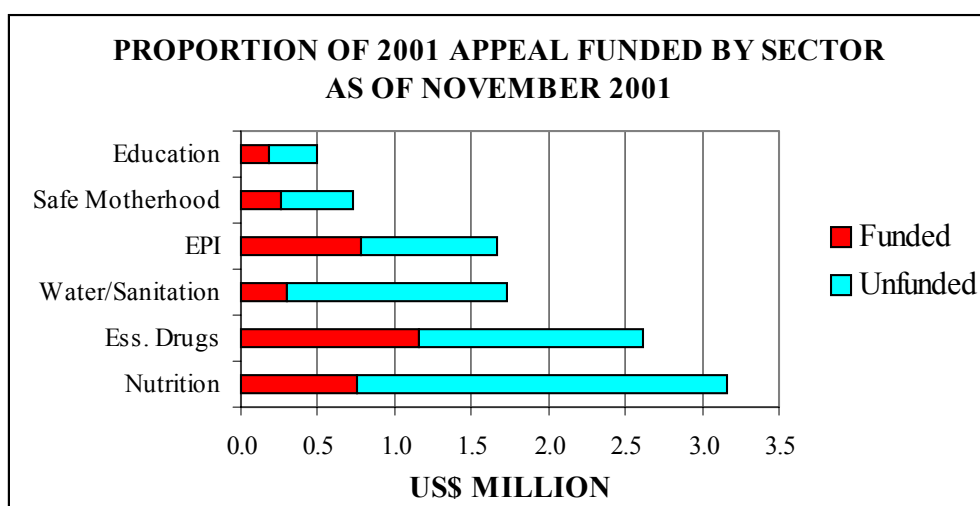
### **Field visits**

During the period of August-November 2001, UNICEF staff undertook several field visits outside Pyongyang, concentrating on the north and east of the country, where the situation of children is most acute. These visits confirmed, for instance, that UNICEF supplies of essential drugs cover at best requirements during only 3-4 months of the year. As is the case for other UN agencies, UNICEF currently has access to 168 out of 211 counties. This represents an increase of one county since the last update

## **3. APPEAL REQUIREMENTS AND RECEIPTS**

UNICEF appealed for US\$ 10.5 million to cover implementation costs of the 2001 DPRK 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, remain poorly funded at only 18% of the requirement.

<b>TABLE 1: 2001 APPEAL REQUIREMENTS AND FUNDING BY SECTOR AS OF NOVEMBER 2001</b>				
<b>Sector</b>	<b>Target (US\$)</b>	<b>Funded (US\$)</b>	<b>% Funded</b>	<b>Unfunded (US\$)</b>
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
<b>Total</b>	<b>10,502,940</b>	<b>3,465,318</b>	<b>33</b>	<b>7,037,622</b>

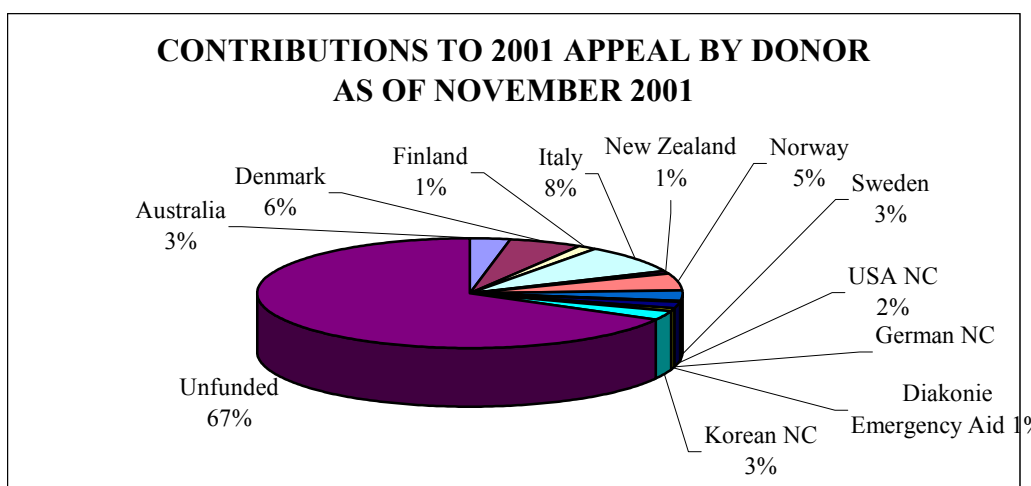


The following table and graph indicates the contributions received for the Appeal, by donor. As indicated, largest contributions to the Programme have been received from Italy (US\$ 858,755), followed by Denmark (US\$ 592,400) and Norway (US\$ 548,250).

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

NC = National Committee for UNICEF

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



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#### 4. IMPACT OF UNDER-FUNDING AND CURRENT PRIORITIES

Strong donor support through WFP and other channels to alleviate DPRK's chronic food crisis is gratefully acknowledged. This needs to continue. However, additional resources are also urgently required 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, increased availability of clean water, and quality primary education. With less than one-third of CAP 2001 funded, UNICEF DPRK is seeking funds for its emergency projects in health, nutrition, water and environmental sanitation (WES), and education. **Under-funding prevents UNICEF from providing adequate support and put children at greater risk of death and malnutrition.** The table below outlines the urgent priority requirements that still remain in 2001. For requirements in 2002, please refer to the beginning of this update.

**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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