Significant progress has been made in the area of reduction of severe child malnutrition over the last decade. However the current levels of child mortality and chronic malnutrition still remain a concern and reflect a combination of the reduced capacity of the health system, the degraded quality of water and sanitation systems and fragile food security. The improvement of the situation of about 2 million young children and 300,000 pregnant/lactating women will continue to rely on the support of the international community to respond to their immediate needs as well as to enable a comprehensive approach to early childhood and to develop the technical and managerial capacity of basic health, education and safe water service providers.

### Summary of UNICEF Emergency Needs for 2007

<table>
<thead>
<tr>
<th>Sector</th>
<th>US$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health and Nutrition</td>
<td>6,450,000</td>
</tr>
<tr>
<td>Water and Environmental Sanitation</td>
<td>2,600,000</td>
</tr>
<tr>
<td>Education</td>
<td>950,000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>10,000,000</strong></td>
</tr>
</tbody>
</table>

1 The total includes a maximum recovery rate of 7%. The actual recovery rate on contributions will be calculated in accordance with UNICEF Executive Board Decision 2006/7 dated 9 June 2006.
1. Critical issues for children and women

According to government figures, from 1993 to 1998, the infant mortality rate increased from 14 to 23 per 1,000 live births and the under-five mortality rate from 27 to 55 per 1,000 live births. This increase in child mortality resulted from acute food shortages, combined with heightened morbidity and reduced capacity of the health system to manage childhood illness caused by shortages of essential drugs and degraded quality of water and sanitation systems. Though government statistics indicate that 100% of the population has access to an improved drinking water source, field observations show that most of the piped systems are old, in very poor conditions and often contaminated. They also provide water very irregularly as they are in most cases pump based systems requiring fuel which is very scarce. As a result the occurrence of diarrhoea is high, causing malnutrition and remaining together with acute respiratory infections the main cause of child deaths.

Considerable progress has been made in the area of child malnutrition over the last decade due to large scale assistance provided by international community. As documented in the nutrition surveys, between 1998 and 2004, acute malnutrition fell from 16 per cent to 7 per cent, chronic malnutrition from 62 to 37 per cent and underweight from 60 to 23 per cent. The 2004 nutrition survey highlighted moderate improvements since 2002 in the nutritional status of younger children pointing to a positive trend. However, current levels of malnutrition are still considered high by World Health Organization (WHO) standards. Moreover, some one third of mothers were found to be malnourished and anaemic, as was the case in 2002. There is a need to sustain assistance to vulnerable groups such as young children and mothers.

Primary and secondary schooling in the DPR Korea is free and compulsory, and all children up to the age of 17 years are enrolled, with the country reporting universal literacy. However, economic difficulties have resulted in shortages of textbooks, school materials and fuel for heating during the long sub-zero winters. Learning methods have also not evolved in line with international developments. All these factors have combined to affect negatively the quality of education.

Weak managerial capacity of government counterparts involved in the provision of basic health, water and education services has constrained progress on delivery of inputs and project implementation highlighting the need to pursue capacity building efforts.

2. Key Actions and Achievements in 2006

In close collaboration with local, national and international partners, UNICEF has continued to respond to the needs of the population affected by the adverse situation. It has mainly focused on the priority areas of health, nutrition, water and sanitation, and education. However, progress for these interventions was hindered due to lack of major investments and large scale assistance necessary for achieving targets in areas such as reduction of child mortality and improvement of maternal health.

In the area of health and nutrition, routine immunization services have been maintained through increased technical and supply assistance to the Ministry of Health. For the first time after a decade, the coverage of DPT3 has reached 82% and more than 90% of children under one year old are immunized against tuberculosis, polio, measles and Hepatitis B. With support of Global Alliance for Vaccine and Immunization (GAVI) new combined vaccine (DPT + Hep B) was introduced nationally and an EPI multi-year plan has been developed for 2007-2011. About 5,000 EPI service providers were trained in proper handling of vaccine. 500 section doctors received section doctor bags strengthening antenatal, natal and postnatal care services. Operation Theatres of five provincial maternity hospitals were rehabilitated and equipped with necessary equipment. Regular supply of essential medicine was provided to 2,800 health facilities covering around 60% of the population. Health facilities covering the remaining 40% of the population received support from the International Federation of the Red Cross (IFRC). Continued support was given for the local production of ORS. About 3,000 health service providers were trained in proper diagnosis and treatment of diarrhoeal diseases and respiratory tract infections. About 2 million under-five children received Vitamin A supplementation, and almost 97% of children aged two to five years received deworming tablets through National Health Days. The treatment protocol of severe malnutrition was upgraded and key staff trained on the subject. The new WHO growth chart has been adopted and will be used as a pilot project in selected facilities. The Family Book, a Korean booklet inspired from the UNICEF publication, Facts for Life, has been updated and printed in 250,000 copies distributed to communities to increase awareness of key caring practices for children and women.
During the year, some 3.5 million people in provincial cities and focus counties have access to clean drinking water and more regular water supply through different means, including construction of gravity-fed systems, drilling of hand pump wells and provision of spare parts and chemical treatment materials. Some 10,000 children in 20 childcare institutions have access to upgraded sanitation facilities. The capacity of staff of the Ministry of City Management in designing and implementing gravity-fed water supply systems has increased through the in-depth training of 15 counterparts coming from the central level and from all nine provinces as well as hands on experience in 4 focus counties. The scaling up of this water supply technology is critical as it is well suited to the abundance of water sources in the many mountainous areas of the country and constitutes a more sustainable alternative than pump based systems which require fuel.

In education, UNICEF is really the only agency providing significant support. Paper and printing press spare parts were provided to support the printing of basic text books which have benefited about 100,000 school children. In seven focus counties where UNICEF is promoting improvement of the learning environment, over 7,000 children in 7 schools have benefited from new school furniture. The learning assessment project was completed successfully in 20 pilot schools and will be expanded to the national scale with government’s own resources. Activities to strengthen hygiene promotion and introduce life skills based education in the primary and secondary curriculum have begun with the production of a colourful manual on health and hygiene promotion for primary schools.


<table>
<thead>
<tr>
<th>Coordination and Partnership</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inter-agency theme groups comprising UN agencies, development partners and government meet monthly to discuss progress, issues, plans and strategies. Weekly inter-agency meetings exchange information among UN agencies and other development partners.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Linkages of HAR with Country Programme</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Country Programme benefited from generous contributions, mostly through the Consolidated Appeal (CAP) until 2005 when Government called for an end to the humanitarian assistance to move to development. In the absence of CAP, funds have been secured through the Humanitarian Action Report (HAR), which were always used for maximum results. Continuing fundraising through HAR will ensure that the programme can maintain the progress already made and also further improve the quality of selected services. This includes responding to the immediate needs of children and addressing some of the underlying causes of the situation through implementation of a comprehensive approach to early childhood care and a cross-cutting strategy of capacity building.</td>
</tr>
</tbody>
</table>

In DPRK, UNICEF is implementing a two-tier system of national and focus county interventions. At the national level UNICEF will support capacity-building of government counterparts providing basic social services, formulation or strengthening of policies and guidelines and implementation of national programmes such as immunization, essential drugs deworming and vitamin A supplementation. In a limited number of focus counties, sectoral programmes will converge to assure greater impact with limited resources and allow for innovation and modelling that could later be replicated or taken to scale with the Government’s own or external resources that might be available in the future;

<table>
<thead>
<tr>
<th>Health and Nutrition (US$ 6,450,000)</th>
</tr>
</thead>
<tbody>
<tr>
<td>All children, especially under-five year old children, will benefit from the following key interventions:</td>
</tr>
</tbody>
</table>

**At the national level:**

- Maintain high coverage (more than 90%) of immunization for all antigens
- Extend cooperation with GAVI and other partners to sustain the achievements of immunization and integration of additional health interventions
- Continue procurement and distribution of essential medicine kits to more than 2,800 health facilities covering about 14 million people,
- Develop in collaboration with WHO and IFRC, a strategy for scaling down the procurement of essential medicines over the next three years
- Support local production of ORS for treatment of childhood diarrhoea, aiming at increasing the yearly production to 7 million sachets (about 90% of local needs)
- Provide nutritional supplementation to all pregnant women estimated at 300,000: iron/folic acid before pregnancy, multi-micronutrient to pregnant women during the first six months of pregnancy and vitamin A to women after delivery
- Provide Vitamin A and deworming two times per year to all under-five children estimated at two million
- Provide deworming tablets to 3 millions primary school children
- Print and disseminate at least 250,000 additional copies of the Family Book (Korean version of Facts for Life) to increase awareness of caring practices for children and women
- Assess the situation of salt iodization and increase production of iodized salt
- Support growth monitoring in all child care institutions

In selected focus counties:

- Support the promotion of a range of feeding and care practices both in nurseries and at the household level in 10 focus counties
- Expand Integrated Management of Childhood Illness (IMCI) model in at least three focus counties
- Strengthen health management information system (HMIS) in 10 focus counties
- Implement new growth chart in selected counties
- Develop in selected focus counties, a pilot project to provide newlywed couples with a package of information on their upcoming responsibilities and roles as parents including caring practices for young children, caring practices for women before, during and after pregnancies and HIV/AIDS awareness.
- Procure vitamins and minerals to produce, in partnership with World Food Programme, around 36,000 MT of blended foods to be distributed to child care institutions and pregnant and lactating women in 30 counties

Water and Environmental Sanitation (US$ 2,600,000)

Some 5 million people— including children in institutions such as baby homes, nurseries, kindergartens and primary schools – will benefit from the following key interventions:

At the national level:

- Provide water treatment chemicals and spare parts to provide safe water for 5 million urban population
- Train 1,000 water engineers and technicians nationwide on design, operation and management of gravity fed water supply system

In selected focus counties:

- Consolidate the gravity fed water supply system construction experience into manuals to be used for national training
- Rehabilitate and construct water supply systems in two focus counties to provide safe drinking water to 80,000 people through gravity-fed system
- Rehabilitate water and sanitation facilities in 20 child care institutions benefitting 10,000 children
- Construct demonstration household latrines and support household hygiene promotion in 10 focus counties
- Provide potable water quality monitoring laboratories to two anti-epidemiological stations in focus counties to upgrade their monitoring capacity
- Provide safe drinking water to 30,000 children in child care institutions at village level through installation of 100 borehole hand pumps wells.
- Promote hygiene education in 50 schools where water supply and sanitation facilities have been upgraded
Education (US$ 950,000)

A total of 200,000 children will benefit directly from the following key interventions:

At the national level:

- Supply basic school materials including 150 tons of papers for printing of textbooks benefiting 150,000 children in primary schools and kindergartens nationwide.
- Increase technical skills of 50 Ministry of Education officials on expanding the learning assessment pilot and developing other initiatives such as curriculum revision, in service teacher training and life skills based education with a focus on health and hygiene.

In selected focus counties:

- Provide comprehensive rehabilitation for at least five primary schools/kindergartens in focus counties with double-glazed windows, upgraded kitchens and water & sanitation facilities benefiting about 10,000 children, including provision of basic education supplies, such as desks and chairs.
- Pilot quality-related activities related to curriculum revision, in-service teacher training and life skills based education in 20 schools in focus counties upon which experience will be provided to national education policy makers.