

Appealing Agency:	UNITED NATIONS CHILDREN'S FUND
Project Title:	Essential Medicines
Project Code:	DPRK-04/H01
Sector:	Health and Nutrition
Themes:	Children / Youth, Safe-motherhood, Rights of the Child
Objective:	To ensure that the most essential medicines are always available for the health services to be able to treat the highest priority illnesses for all children and women
Supporting CAP Objective:	Health and Nutrition Sector: Operational Objective One
Targeted Beneficiaries: (total # & description)	Whole population 23 million Children: 7 million (under 18 years)
Implementing Partners:	Ministry of Public Health, Provincial / County health authorities, Diakonie Emergency Aid, WHO, IFRC
Project Duration:	January – December 2004
Funds Requested:	US\$ 5,118,400

Project Outputs

- 3,060 ri level health clinics/ri hospitals and 117 county hospitals in six provinces and two cities (serving 70% of total country population) receive a basic set of vital medicines every three months.
- 24 provincial paediatric and provincial maternity referral hospitals in all provinces receive a basic set of vital medicines every three months.
- Central medical warehouse (MoPH/CMW) capacity increased to be able to complete at least 90% of planned deliveries to all provinces on time.
- ORS (oral rehydration solution) local production increased to 3 million sachets for 162 counties.
- Six basic medicines locally produced (in collaboration with Diakonie Emergency Aid).
- 50 factory technicians trained in good manufacturing practices (in collaboration with Diakonie Emergency Aid).
- 500 health staff trained in the proper diagnosis and treatment of the highest priority illnesses (diarrhoeal diseases, pneumonia).
- Standard integrated training course (IMCI) developed for health staff.

The project will increase the capacity of the health services to treat the most common, highest priority, and life-threatening illnesses for children and women. The main priority is to ensure both 12 "very vital" medicines are available in adequate quantities, all year round and that health staffs are trained in their proper use. The second priority, if adequate funding is received, is to expand the number of medicines to 22 "vital" items.

The MoPH continues to be unable to fund the cost of essential medicines and supplies for its extensive network of well-staffed hospitals and clinics. Most essential medicines are now provided by aid agencies and this will have to continue for the near future. Without external aid for medicines, the public health services would be unable to effectively treat a range of common, but life-threatening, illnesses including diarrhoea and acute respiratory infections, which together account for more than half of all child illnesses and deaths. Since the onset of the emergency, UNICEF has been the main source of essential medicines and support for training in their use. In 2003, UNICEF provided around 12,000 essential medicine kits to health facilities in six provinces and two cities of over 15 million (more than 70% of the total population) as well as to all provincial paediatric and maternity hospitals nation-wide. Health facilities are now able to treat significantly more children and women than in 2001 and 2002. UNICEF funding remains, however, insufficient to provide more than the most essential items – termed "very vital items." In a prioritisation exercise carried out by UNICEF, in collaboration with the MoPH as well as the IFRC and the WHO, 12 items are now classed as very vital. Emphasis will be placed on better quality health worker training. Although training courses on the management of most childhood problems have already been developed, training is usually given on a single topic basis, and multiple training courses are given at great additional cost. An integrated training – based on the IMCI approach - suitable for basic health workers, will be written and adopted as the official training course by the MoPH. In 2004 around 500 health workers will be trained.

The main problems to be addressed by the project in 2004 are:

- widespread shortages of essential medicines, and therefore inability of the health services to treat the most common, life threatening illnesses in children and women (unless provided by international assistance);
- the limited capacity of the MoPH's central medical warehouse storage and logistics system;
- the inadequate knowledge of health staff on use of modern medicines and current international treatment practices;
- the low quality of locally produced medicines (collaboration with Diakonie).

In 2004 the over-riding priority will be to ensure the regular availability, in adequate quantities of the 12 "very vital" items, at all health facilities and that health staff are trained in their proper use. The second priority is to expand the range of items to 22 "vital" items - only if adequate funding is received. UNICEF will support the following activities in 2004:

Provision of essential medicines to 3,201 health facilities:

Essential medicine kits will be provided to health facilities every three months to treat common priority illnesses for children and women. Essential medicines will be procured in bulk and locally repacked for cost effectiveness. Technical assistance for proper storage, packaging, and distribution at the Central Medical warehouse will be given. Priority will be to provide "very vital" medicines for the health facilities at the first level of care, the ri (group of villages) level.

Coverage will be:

- all health facilities (3,060 ri clinics / hospitals, 117 county hospitals) in the six provinces¹;
- provincial paediatric and maternity hospitals (24) in all 12 provinces and cities.

Local ORS / local production: Support will be provided for the local production of ORS – for the treatment of childhood diarrhoea. This will be in cooperation with WHO and the Diakonie Emergency Aid, a non-resident NGO, for local production of six selected essential drugs at the Pyongyang Pharmaceutical Factory and in collaboration with WHO.

Training of health staff: Technical support for updating of essential treatment protocols and guidelines as well as for training of health staff in the proper diagnosis and treatment of diarrhoeal diseases and pneumonia. Until the IMCI training course is finalised, stand-alone training will be supported.

Monitoring and Evaluation: At least six field visits conducted jointly with MoPH staff, quarterly review meetings, at least six coordination meetings with IFRC, WHO and UNFPA, one drug availability/drug use study.

Prioritisation according to project funding levels:

25% funded	50% funded	75% funded	100% funded
"Very vital" 12 medicines for 3,060 ri level clinics / ri hospitals	"Very vital" 12 medicines for 141 county and provincial hospitals	"Vital" 10 additional medicines for ri level clinics / ri hospitals	"Vital" 10 additional medicines for 141 county and provincial hospitals
Raw materials for 3 million ORS production			
Training 500 health staff			
Monitoring and supervision			
Provision of technical assistance			

¹ Ryanggang, North Hamgyong, South Hamgyong, Kangwon, South Hwanghae, North Hwanghae as well as the two cities of Nampo and Pyongyang

FINANCIAL SUMMARY	
Budget Items	US\$
Essential medicines	
Provision of basic essential drugs for maternal and child care	
a. "Very vital" medicines	2,600,000
b. "Vital" medicines	1,450,000
Raw materials and supplies and spare parts for ORS factory	250,000
Raw materials for the local production of drugs	Diakonie Emergency Aid, WHO, UNFPA
Logistics support for the distribution of drugs to remote areas	100,000
Training of health staff	30,000
Public IEC materials on home management of diarrhoea	Nutrition and Care project
Project monitoring, planning and evaluation	
Field monitoring and evaluation	20,000
Technical Assistance (International)	120,000
Project Support Cost	*
Sub-total	4,570,000
Cost recovery (see footnote)	548,400
Total	5,118,400

(* Denotes regular programme funding)

Note: Actual recovery rate on individual contributions will be calculated in accordance with Executive Board decision 2003/9 of 5 June 2003.