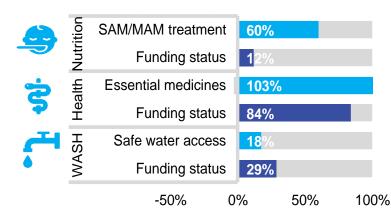


Reporting Period: January to December 2020

## **Highlights**

- Since January 2020, UNICEF operated with a limited number of international staff on the ground and by December all international staff had temporarily exited the country due to continued border closures and travel restrictions related to COVID-19 prevention measures.
- The UNICEF Country Office remains open and continues to support essential basic service delivery in Health, Immunization, Water, Sanitation and Hygiene (WASH), Nutrition and COVID-19 response despite disruptions. The Country Office is now managed remotely by interntional staff with support from seconded national staff.
- There have been no official reported cases of COVID-19 in DPRK. However, strict prevention measures have indirectly impacted humanitarian operations thus reducing the scope and delivery of UNICEF's Country Programme. Meanwhile humanitarian needs have increased and the situation threatens to reverse significant progress made on key indicators of child welfare.
- In the first half of 2020, prevention measures delayed the importation of lifesaving supplies. Nonetheless, UNICEF did manage to bring in a number of critical supplies including but not limited to BCG and Pentavalent vaccines. However, from August onwards, there has been a complete suspension of humanitarian supply flows across the border.
- UNICEF received only US\$8.6 million from the US\$22.5 million funding requirement, leaving the programme 62 per cent unfunded thus limiting UNICEF's ability to provide life-saving services for children across sectors.

## UNICEF's Response and Funding Status



# **UNICEF DPRK**

Humanitarian Situation Report No. 2







### 2,670,000

children in need of humanitarian assistance



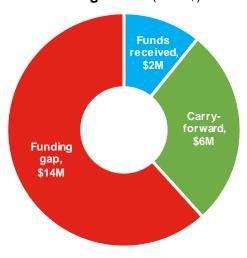
### 10,400,000

people in need (2020 DPRK Needs and Priorities)

## **UNICEF Appeal 2020**

**US\$22.5 million** (non-COVID)

### Funding Status (in US\$)



<sup>\*</sup>Funding available includes: funds received in the current year; carry-overfrom the previous year; and repurposed funds with agreement from donors.

## Funding Overview and Partnerships

To help support the activities in the Democratic People's Republic of Korea, UNICEF is thankful for the funds received in 2020 from Canada, the Republic of Korea (RoK), Sweden, CERF, the Global Fund as well as through the UNICEF Global Humanitarian Thematic Fund (GHTF). There were also funds carried over from CERF, Russia, Republic of Korea and previous GHTF allocations. By the end of the year, despite these generous contributions, the funding gap remains at 62 per cent. This has limited UNICEF's ability to provide adequate programme delivery, thus increasing the risk of malnutrition and inadequate access to clean water and health services with a direct impact on the most vulnerable children and women. Existing vulnerabilities have most likely been further exacerbated by COVID-19 and would require additional funding to address them once the supply routes re-open.

### Situation Overview & Humanitarian Needs

In 2020, children in DPRK faced multiple burdens, further exacerbating the humanitarian situation: (1) the indirect impact of the COVID-19 pandemic, including lockdowns, travel bans and border closures causing the closing of schools and disruption of the humanitarian programmes and supplies; (2) torrential rains in August followed by unprecedented three consecutive typhoons in less than three weeks in the agriculturally rich southern and eastern provinces and; (3) the impacts of banking sanctions and limited availability of cash. These events, somewhat, impacted the quality and availability of basic services.

Beginning in January, border closures and travel restrictions enforced by the government as part of COVID-19 prevention measures have caused significant programmatic and operational disruptions. Nonetheless, UNICEF has maintained the ongoing delivery of essential services throughout 2020 thanks to existing in-country stocks of life-saving supplies. Prevention measures have also impacted the movement of international staff and UNICEF's presence on the ground. Throughout most of 2020, UNICEF operated with a limited international staff presence in Pyongyang. As of December, all international staff had temporarily exited the country as the government further strengthened Top Class Anti-Epidemic measures. Travel inside the country has been suspended, including all field monitoring activities. UNICEF's Country Office (CO) remains open through remote operations to maintain prioritized essential functions and critical programmes while international staff are away from the duty station. UNICEF and the international community continue to advocate for unimpeded humanitarian access and a resumption of humanitarian supply flows.

In October, DPRK experienced its first-ever stock-out of polio vaccines. This impacted Oral Polio Vaccine (OPV3) vaccination coverage decreasing to 84.3 per cent in the third quarter of 2020, compared with 97.3 per cent in the same period of 2019. UNICEF expects the OPV3 coverage rate to further drop drastically, given the unavailability of vaccines in the fourth quarter and into early 2021. TB drugs, diagnostics and essential medicines are also facing stock-outs, further threatening the situation for an estimated 9 million people, including 2.7 million children with already limited access to quality health services.

Despite these challenges, the Ministry of Public Health (MoPH) with UNICEF support maintained an overall high immunization coverage for other routine vaccinations with the nationwide Diphtheria-Tetanus-Pertussis (DTP3) coverage rate increasing to 97.2 per cent in 2020 compared with 96.9 per cent in 2019. In collaboration with the WHO, UNICEF supported the Government in developing the Country Strategic Preparedness and Response Plan for COVID-19. UNICEF was the first agency to procure and pre-position Personal Protective Equipment (PPEs) for up to 500 frontline healthcare workers and distributed critical WASH items supporting handwashing and hygiene practices to more than 41,573 people and 121 health facilities.

In-country stocks of therapeutic nutrition supplies including Ready-to-Use Therapeutic Food (RUTFs) are also dwindling leading to a revision of treatment protocols in November 2020 and rationing of the last remaining treatments for the most severely malnourished children. Consequently, children with moderate acute malnutrition (MAM) are no longer accessing therapeutic feeds, and the CO only reached about 60 per cent of its target for the treatment of malnutrition in 2020. This is a major concern in the context of chronic food insecurity, where more than 10 million people are considered food insecure, and an estimated 140,000 children under 5 suffer from acute malnutrition and need treatment. Higher malnutrition caseloads and mortality rates are anticipated in 2021. Stocks of multiple micronutrient powders and therapeutic items ran out by the end of December while new supplies have remained stranded at Dalian port in China since August. As a result, targeted children aged 6-23 months did not receive planned supplements for Child Health Day in November. The devastation of three consecutive typhoons on the agricultural rich southern and eastern provinces have caused population displacement and damaged crops further compounding food insecurity. The annual recurrence of natural hazards underscores DPRK's continued high risk for life-threatening environmental shocks and the need for a strong disaster risk reduction framework.

Despite receiving regular updates on key child rights indicators from the Central Bureau of Statistics (CBS), the lack of field monitoring and delays in conducting needs assessments and evaluations left a data gap in 2020 at a critical time where the available evidence suggests that humanitarian needs have increased, and existing vulnerabilities are exacerbated. Therefore, it is crucial that humanitarian support and funding are stepped up in 2021 to offset the impact of COVID-19 on previous gains.

## Summary Analysis of Programme Response

#### Nutrition

UNICEF continued to support sustained preventive and curative nutrition services such as early detection, referral and treatment of acute malnutrition through the Community-based Management of Acute Malnutrition (CMAM) in 189 CMAM sites across the country. UNICEF sustained activities for preventing micronutrient deficiencies with supplementation, including Vitamin A, multiple micronutrient powders for under-five children, and multiple micronutrient tablets and messages to promote optimal nutrition for pregnant and lactating women (PLW) through health facilities and biannual Child Health Days (CHD) across the country.

Given the challenges related to COVID-19, the nutrition annual work plan was revised in consultation with the MoPH and the National Coordination Committee (NCC) to focus on life-saving activities such as malnutrition treatment, and micronutrient supplementation for children under 5 and PLW. Related capacity development activities requiring inperson training have been postponed until the re-opening of borders. With supplies running short following a complete suspension on supply importation in the second half of 2020, dwindling stocks of therapeutic foods were reprioritized to reach only the most critically ill children suffering from Severe Acute Malnutrition (SAM) while children with Moderate Acute Malnutrition (MAM) are no longer accessing therapeutic foods in treatment at CMAM sites. Throughout the year, a total of 57,446 children under 5 received SAM/MAM treatment 60 per cent of the annual target). While borders remain closed, sustaining these life-saving services in 2021 will not be possible. Enough nutrition supplies to treat 35,000 acutely malnourished children and provide 500,000 children under two years of age with micronutrient supplementation remain stranded in ports across the border in China.

Through the CHDs, nearly 1.5 million under-five children (93 per cent of annual national target) have been provided with Vitamin A and nutrition screening while close to half a million children aged 6-23 months (98 per cent of annual target) have received multiple micronutrient powder supplementation to prevent micronutrient deficiencies. In the context of COVID-19, CHD activities were implemented differently this year. To avoid gatherings and observe physical distancing, services were delivered door-to-door by Household doctors. These activities were complemented through public lectures disseminating nutrition messages on optimal child feeding practices by the Grand People's Study House using Tele-Advocacy System benefiting approximately 3,632 women of childbearing age and healthcare providers. In addition, a total of 191,227 (61 per cent of annual target) PLW received multiple micronutrient tablets through maternity clinics and hospitals throughout the country for a period of three to six months.

#### Health

UNICEF, in collaboration with the WHO, supported the MoPH in developing the Country Strategic Preparedness and Response Plan (CSPRP) for COVID-19. Based on this plan, Rapid Response Teams are operational in central, provincial and county anti-epidemic institutes. The MoPH prepared Intensive Care Units for case management at designated hospitals. UNICEF was the first agency to procure and pre-position 500 PPE to support frontline healthcare workers in case of COVID-19 outbreak. As of December, 33,044 people underwent quarantine<sup>1</sup>, 26,244 COVID-19 tests were administered with zero cases reported in DPRK.

In 2020, UNICEF supported the MoPH under the framework of the Health Medium Term Strategic Plan (MTSP) 2016-2020 to reduce neonatal, infant, under-five and maternal mortality, and decrease the burden of the most prevalent diseases among the most vulnerable populations through Integrated Management of Newborn and Childhood Illnesses (IMNCI) and immunization services.

5,000 essential medicine kits were delivered to 1,968 health centres in 50 priority counties ensuring access to basic health care services for 6.2 million people including 432,000 children under 5. A further 1,956 cartons of Oral Rehydration Salt (ORS) were distributed from the Central Medical Warehouses to replenish stocks at county medical warehouses and health facilities. In 2020, 286,817 cases of diarrhoea were diagnosed in children under the age of 5 with 246,687 (86 per cent) receiving ORS alone whilst 51.9 per cent received ORS and Zinc. The number of diagnosed cases reduced almost threefold compared with 2019 (246,687 in 2020 to 609,629 in 2019) with similar trends observed

3

<sup>&</sup>lt;sup>1</sup> Data reported to WHO by Government

for pneumonia cases. The reduction can either be attributed to positive effects of national campaigns on handwashing and hygiene awareness as part of COVID-19 response activities or potentially reduced access to health services (the number of health consultations for children under 5 reduced threefold in 2020 compared with 2019).

Due to the unprecedented COVID-19 situation, key results on Maternal and New-born Health could not be achieved as planned, following the postponement of training, mentoring of healthcare workers and supervision visits. Procurements of specialized drugs and equipment for additional facilities for Basic Emergency Obstetric and Newborn Care (BEMONC) and Comprehensive Emergency Obstetric and Newborn Care (CEMONC) were initiated. However, supplies could not be brought in the country. The evaluation of the Integrated Management of Newborn and Childhood Illnesses (IMNCI) programme was initiated with a finalized inception report; however, the substantive evaluation has been postponed due to travel restrictions.

Overall, routine immunization coverage remained high in 2020 at 97.2 per cent as measured by DTP3 coverage, with a dropout rate of less than 1 per cent. Stock-outs of DTP3 and Measles-Rubella (MR) vaccines were averted in the first half of 2020 as UNICEF changed its importation modality to bringing in supplies by road from China using refrigerated trucks as a result of restrictions on air cargo. The MR vaccine was successfully introduced into the national routine immunization schedule in 2020. A Post Supplementary Immunization Activity (SIA) Coverage Survey was completed with an estimated national coverage of 99.9 per cent. In October, DPRK experienced its first-ever stock-out of polio vaccines with batches of vaccines stuck on the Chinese side of the border. This impacted OPV3 vaccination coverage, which decreased to 84.3 per cent in the third quarter of 2020 compared to 97.3 per cent in the third quarter of 2019. UNICEF expects the OPV3 coverage rate to further drop drastically, given the unavailability of vaccines in the fourth quarter and beyond, thus increasing the risks of Polio outbreaks.

#### **WASH**

UNICEF continued to remotely lead the WASH sector working group with the International Federation of Red Cross and Red Crescent Societies (IFRC) and EUPS 3 (Concern Worldwide) as co-chairs with the participation of other EUPS<sup>2</sup> sector members and the Swiss Development Cooperation (SDC).

As part of the Country Strategic Preparedness and Response plan, UNICEF has supported the government in carrying out risk communication, mobilising and engaging communities to raise awareness about COVID-19. Information Education and Communication/Behaviour Change Communication (IEC/BCC) activities are being conducted in the communities by Household doctors. During household visits, the doctors promote Infection Prevention Control (IPC) measures such as hand hygiene, wearing masks, cough etiquette, physical distancing, self-isolation and voluntarily reporting. Besides, they also educate household members on food safety and disinfection of houses and workplaces. These messages are being communicated through mass media, TV, radio and local newspapers. It is estimated that about 100,000 officers and health workers are conducting IEC activities on COVID-19 nationally every day.

Through continued engagement with the Ministry of Urban Management (MoUM), 123,835 people benefitted from distributing critical WASH supplies (including hygiene kits for 41,573 people) preventing diseases and reducing mortality, especially among vulnerable children, women and the elderly. The MoUM also implemented Communication for Development campaigns on hygiene awareness, including the commemoration of Global Handwashing Day and messaging on good hygiene behaviour through newspapers and billboards. In addition, 91,625 people affected by flooding caused by Tropical Cyclone Lingling in 2019 received emergency supplies (soap, buckets, jerrycans and water purification tablets) delivered in February 2020 as a result of restrictions on the flow of supplies in the country.

Notwithstanding enormous challenges related to the importation of humanitarian supplies, 39,209 people including 6,240 children in 28 kindergartens and 12 primary schools were provided with access to clean drinking water upon completing three water supply systems in the Convergence Counties of Jongju, Rakwon and Kosang. Procurement of supplies for additional 16 new and rehabilitated water supply systems are in progress. After completion of these 16 projects, 301,099 people will have access to safe drinking water services.

In 2020, UNICEF continued to support system strengthening for improved WASH services in DPRK. The multi-sectoral five-year WASH Sector Implementation Strategy (2020-2024) which was reviewed by the Cabinet with a further recommendation of aligning the strategy with the government's new five-year Economic Development Plan to be launched in the first quarter of 2021. A series of guidelines were finalized with support of UNICEF technical assistance to improve the access and quality of water supply systems including: 1. design of water supply systems using EPANET;

<sup>&</sup>lt;sup>2</sup> European Union Project Support (EUPS) comprises international NGOs. EUPS 1: Première Urgence Internationale; EUPS 4: Deutsche Welthungerhilfe; EUPS 5: Triangle Génération Humanitaire

2. water treatment, surveillance, testing and reporting protocol; 3. safely managed sanitation in rural areas; 4. construction and operation and maintenance (O&M) of water supply systems and a catalogue of WASH items; 5. improved management of waste for composting; and, 6. improved hygiene in schools and kindergartens.

In 2020, UNICEF finalized the assessment of WASH services in hospitals at County and Ri levels in the nine Convergence Counties. Of the County-level hospitals, 83 per cent have access to an improved water source at the premises, 10 per cent have improved water sources but not located at premises, and 7 per cent have no access to an improved water source. The situation of Ri-level hospitals shows that just 53 per cent have improved water sources at premises, 29 per cent have improved water but not at premises, and 19 per cent are using unimproved water sources. Based on this assessment, more focus is needed to provide basic WASH services to Ri-level hospitals. These findings, along with the 2019 assessment of WASH facilities in schools in the Convergence Counties, will inform priorities and programme planning and design of WASH interventions in 2021.

## Humanitarian Leadership, Coordination and Strategy

UNICEF continued leading remotely the Nutrition and WASH sector working groups and co-leading locally in Health sector with WHO. Despite the challenges and impact of the pandemic on operations, UNICEF further focused on four priorities to sustain the delivery of life-saving interventions in the sectors of health, nutrition and water, sanitation and hygiene for the most vulnerable children and women. These included: (1) Immunization; (2) treatment of Severe and Acute Malnutritiion; (3) TB/Malaria interventions; and (4) COVID-19 preparedness and response.

During the year, UNICEF worked closely with UN sister agencies through the established sector coordination groups, thematic groups, the UNCT/Humanitarian Country Team (HCT) and on a bilateral basis. UNICEF's Representative was acting Resident Coordinator from 17 January to 2 December, in addition to serving as Officer-in-Charge for UNFPA and UNDP between July and December 2020.

In the context of COVID-19 preparedness and response measures, UNICEF and WHO have been working closely through the coordination mechanisms set up by the government. Collaboration continued with UN sister agencies and other local partners including the Swiss Agency for Development and Cooperation (SDC), the International Federation of the Red Cross and Crescent (IFRC) and Médecins Sans Frontières (MSF), to support inter-agency response activities, provide technical support and assistance to health care facilities. Early on, UNICEF and WHO responded to the government requests for support, especially in relation to the provision of medical supplies and Personal Protective Equipment (PPE). Under WHO's leadership, UNICEF also contributed to the revision of the UN Pandemic Contingency Plan and the development of inter-agency multi-sectoral response plans as appropriate. Support for the implementation of the strategic operational plan to country preparedness and response for COVID-19 (CSPRP) was provided by the Health Sector Working Group in dialogue with the Ministry of Public Health to help minimize any emergent secondary impacts of the pandemic.

Under UNDP's leadership, a working group including UNICEF was established to elaborate the Terms of Reference and Concept Note for the Socio-Economic Impact Assessment (SEIA) and Child Well-Being Index to be conducted in 2021. The SEIA will attempt to provide further evidence on the indirect impact of COVID-19 in DPRK.

## Human Interest Stories and External Media

During the reporting period, the Country Office received support from the Regional Communications Specialists. Human interest stories on the transportation of BCG and Pentavalent vaccines by land route in June were produced and uploaded onto the regional blog.

Click here to see the full story on ICON:

 $\frac{https://unicef.sharepoint.com/sites/ICON/\_layouts/15/listform.aspx?PageType=4\&ListId=8e97a3fd-9d47-4675-a965-dfe76c62d004\&ID=715\&ContentTypeID=0x01007BF49FE834BB7C4FBE93BF7DFAAF0F6A\_$ 

UNICEF DPRK: <a href="https://www.unicef.org/dprk">https://www.unicef.org/dprk</a>

UNICEF DPRK Humanitarian Action for Children Appeal: <a href="https://www.unicef.org/appeals/">https://www.unicef.org/appeals/</a>

Who to contact for further information:

Myo-Zin Nyunt
Representative,
UNICEF, DPR Korea
Tel: +850 2381 7234
Email: mnyunt@unicef.org

Odile Bulten
Deputy Representative,
UNICEF, DPR Korea
Tel: +850 2381 7146
Email: obulten@unicef.org

Bishnu Pokhrel
Chief WASH/Emergency Focal Point
UNICEF, DPR Korea
Tel: +850 2381 7150
Email: bpokhrel@unicef.org

### Annex A

### Summary of Programme Results

|  | UNICEF         |                            |   |  |  |  |
|--|----------------|----------------------------|---|--|--|--|
|  | 2020<br>Target | Total Results <sup>3</sup> | Change since last report <sup>4</sup> ▲ ▼ |  |  |  |
| NUTRITION  |                |                            |   |  |  |  |
| Children under 5 years suffering from wasting treated through inpatient and outpatient therapeutic feeding programmes  | 95,000         | 57,446                     | <b>A</b>                                  |  |  |  |
| Children under 5 years provided with micronutrient supplementation   | 1,600,000      | 1,485,889                  | <b>A</b>                                  |  |  |  |
| HEALTH CONTRACTOR OF THE CONTR |                |                            |   |  |  |  |
| Children under 5 years with diarrhoea treated with oral rehydration salts  | 800,000        | 246,687                    | <b>A</b>                                  |  |  |  |
| People accessing essential medicines   | 6,000,000      | 6,176,897                  | <b>A</b>                                  |  |  |  |
| Pregnant mothers in 50 counties accessing emergency obstetric neonatal care services <sup>5</sup>  | 35,000         | 9,793                      | ▼   |  |  |  |
| WATER, SANITATION & HYGIENE  |                |                            |   |  |  |  |
| Number of people with access to safe drinking water with long-term services  | 183,000        | 32,290 <sup>6</sup>        | ▼   |  |  |  |
| Access to safe water for drinking, cooking and personal hygiene with pre-positioned supplies   | 40,000         | 123,835                    | <b>A</b>                                  |  |  |  |
| Number of people who received sanitation or hygiene kits and items   | 50,000         | 41,573 <sup>7</sup>        | <b>A</b>                                  |  |  |  |

 $<sup>^3</sup>$  Due to government-imposed movement restrictions, international staff have been unable to undertake programmatic field monitoring visits since end January 2020. In particular, Health results are estimated based on the 2019 distribution plan for EMK kits provided by MoPH.

<sup>4</sup> This is the second report for 2020.

<sup>&</sup>lt;sup>5</sup> Data on pregnant women accessing EmONC only available for nine Convergence Counties

<sup>&</sup>lt;sup>6</sup> Three water supply projects were completed, which provided access to safe drinking water services to 32,290 people. Procurement of supplies for additional 16 new and rehabilitated water supply systems is in progress. After completion of these 16 projects, 301,099 people will have access to safe drinking water services.

Them received only includes soap.

## Annex B

## Funding Status\* (non-COVID-19)

| Sector I  | Requirements | Funds available                               |   | Funding gap |    |
|-----------|--------------|---|---|-------------|----|
|           |              | Humanitarian<br>resources<br>received in 2020 | Resources<br>available from<br>2019<br>(Carry-over) | \$          | %  |
| Nutrition | 9,891,808    | 563,245                                       | 635,710   | 8,692,853   | 88 |
| Health    | 6,808,245    | 838,792                                       | 4,894,771   | 1,074,682   | 16 |
| WASH      | 5,800,000    | 1,030,535                                     | 652,215   | 4,117,250   | 71 |
| Total     | 22,500,053   | 2,432,572                                     | 6,182,696   | 13,884,785  | 62 |

<sup>\*</sup>As defined in the revised Humanitarian Appeal of April 2020 for a period of 12 months

### Funding Status\*\* (COVID-19)

| Sector    | Requirements | Funds available                               |   | Funding gap |     |
|-----------|--------------|---|---|-------------|-----|
|           |              | Humanitarian<br>resources<br>received in 2020 | Resources<br>available from<br>carry-over | \$          | %   |
| Nutrition | 1,978,362    | 0   | 0   | 1,978,362   | 100 |
| Health    | 1,400,000    | 2,006,738***                                  | 0   | -606,738    | 0   |
| WASH      | 1,280,000    | 132,000                                       | 0   | 1,148,000   | 90  |
| Total     | 4,658,362    | 2,138,738                                     | 0   | 2,519,624   | 54  |

<sup>\*\*</sup>As defined in the Global Humanitarian Action for Children COVID-19 Response Appeal through 31 December 2020. Results against COVID-19 indicators can be found in the Global Humanitarian Situation Reports.

<sup>\*\*\*</sup>This includes US\$1,668,738 received from the Global Fund COVID-19 Response Mechanism (C-19 RM) window.