

UNICEF HUMANITARIAN ACTION

DPR KOREA

DONOR UPDATE 24 JUNE 2003

FOOD DONATIONS PICK UP, BUT SERIOUS SHORTFALLS REMAIN IN NON-FOOD COMPONENTS OF CONSOLIDATED APPEAL

- ◆ UNICEF funding still only 27 per cent half way through 2003
- ◆ Continued success of national child health days

1. EMERGENCY OVERVIEW AND RECENT DEVELOPMENTS

Funding shortfalls

The situation on funding has improved since the first quarter of the year, but the pattern of inequitable contributions to the food and non-food components of the appeal has resurfaced. Thus WFP has now fulfilled over 90 per cent of its emergency operation for 2003. UNICEF funding, however, runs at 27 per cent. That for WHO is at 34 per cent. Food is extremely important, but food does not cure diarrhoea and pneumonia, does not immunize children against communicable diseases and cannot be used in the treatment of some 70,000 children at risk of death with severe acute malnutrition. All this occurs as we are about to enter the peak diarrhoea season, the major instance of severe malnutrition in young children.

International and inter-Korean developments

The issue of the DPRK's nuclear programme, and its potential uses, has come to dominate all of its external relations. A meeting held in Beijing in April between the US Assistant Secretary of State and the Deputy Director of the DPRK Foreign Ministry's America Department, hosted by China, made no headway in resolving the dispute between the countries. Diplomacy is still, however, the preferred course of both parties for the present.

The same issue is now permanently on the agenda of all north-south meetings. This has changed the atmosphere of the exchanges, which had been very positive following the inauguration of South Korean President Roh Moo Hyun in February. Nevertheless, inter-Korean projects do still seem to be progressing. The latest economic cooperation meeting between the North and the South, held in Pyongyang in May, continued moves to relink roads and railways, open an industrial zone in Kaesong, just north of the truce line, and resume tourism from South Korea to Mount Kumgang in the North. The Republic of Korea also agreed to provide 400,000MT of rice as humanitarian assistance.



The boundaries and names shown do not imply official UN endorsement.

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Impact of SARS prevention measures

In order to prevent the introduction of severe acute respiratory syndrome (SARS), the government has taken a series of drastic measures. These include:

- suspension of almost all flights in and out of the country, with the exception of one a week to/from Vladivostok, and
- compulsory ten-day quarantine at Anju (approx. 100 km north of Pyongyang) for all incoming passengers having visited any of some 35 countries designated by the government to be SARS affected.

The measures have naturally had some impact on operational capacity, with some staff stuck outside of the country beyond the scheduled duration of their travel and almost all being sequestered for ten days on return. There has equally been disruption to government participation in overseas meetings and training, as well as in the receipt of supplies via China. Agencies have also had to revise many of their administrative and human resources procedures, which were based on availability of services in Beijing.

Despite these difficulties, UNICEF has maintained a regular schedule of field travel (see below).

2. UNICEF RESPONSE: ACTIVITIES, ACHIEVEMENTS AND CONSTRAINTS

National child health day – reaching every child

The first national child health day for 2003 was held on May 20. On that day, around 2 million children received a dose of vitamin A (children 6 months to 5 years of age) as well as deworming medicine (2 years to 5 years of age). The final number of children reached is still being tallied but it is again expected that over 95% of children will have been reached in all villages countrywide. As usual, UNICEF and the Ministry of Public Health (MoPH) organized field visits for partner agencies and representatives of resident donor missions to observe child health day activities. A second national day is planned for November 20. Vitamin A supplements boost children's immunity, helping to protect them from illness and increasing their survival. The DPRK has a very successful vitamin A supplementation programme with the two national health days each year regularly achieving the highest vitamin A coverage of all countries in the region. This high coverage was confirmed by the recent nutrition assessment in ten provinces / cities. The same assessment showed that only around 30 per cent of women receive vitamin A supplements after delivery and a priority for this year is for **all** women to receive vitamin A soon after delivery, thereby ensuring adequate intake of vitamin A, through breast milk, throughout the first six months of every child's life.



A girl receives vitamin A at a ri hospital in Huichon City, Chagang Province

Immunizations continue for children and pregnant women

Vaccination services continue countrywide with no shortages of vaccines / injection equipment. Technical support to the Ministry of Public Health (MoPH) for upgrading the vaccination cold chain was completed, a new MoPH cold chain technical team was formed and 70 immunization staff from all provinces were trained. An inventory of cold chain equipment throughout DPRK is in process and the results will guide future procurement of equipment. The first GAVI-funded hepatitis B vaccine was used. A new child vaccination card is currently being printed for introduction mid-year. The vaccination card, one for each child, will be used to record every child's vaccination history and importantly these cards will be retained by the child's family. As well as being an important record card for the family, this new card will also help the national programme and UNICEF to identify those counties where infant immunization coverage is lower than it should be, that is, where children are being missed and where the programme needs to give a special emphasis. Immunization coverage for infants has doubled in the past five years, but there are still an estimated 100,000 infants who do not benefit from the full series of immunizations.

Ensuring essential health treatments for children and women

Good progress continues to be made to ensure that the health services are able to treat the most common illnesses for children and women. Field visits so far this year showed that over 90 per cent of health facilities visited have the essential medicines to treat the most common illnesses in children – diarrhoea and pneumonia. This is a very significant improvement compared to recent years. This is attributed to increased funding for UNICEF in the second half of 2002 and better prioritization so that fewer medicines (the most essential medicines or "very vital") are provided **in adequate quantities all year round**. In the first quarter of the year "very vital" medicines were delivered to all provinces and cities, and in the second quarter all deliveries are on schedule. In June, medicine deliveries are planned to the vulnerable provinces of Ryanggang, North Hamgyong, South Hamgyong and Kangwon, using UNICEF's own transport. Full details of the 2003 annual delivery plan, the current health facilities coverage plan and the types of medicines provided are

available from the UNICEF Pyongyang office. Lack of funding does, however, mean that UNICEF is only able to provide limited types of medicines, mainly for treatment of child illnesses. With increased funding, additional items could be provided, especially to better meet the needs of women.

Improving breast-feeding practices

The first phase in the renewed effort to improve breastfeeding practices was completed with a national breastfeeding training team formed and 35 staff from all provinces trained in breastfeeding practices. The training, carried out in collaboration with an expert from the Institute of Child Health (ICH) London, was held at the Pyongyang Maternity Hospital. For the first time ever, UNICEF and ICH staff, together with the trainees, were able to counsel mothers on good breastfeeding techniques immediately after delivery. Follow-up trainings are planned for all provinces and counties countrywide over the next two years. During field trips, breastfeeding and lactation problems are regularly reported by both mothers and caregivers and the recent nutrition assessment showed that exclusive breastfeeding rates varied widely between provinces / cities. Improving infant and young child feeding practices, including breastfeeding practices, is a priority for UNICEF support.

Water and Sanitation – continued focus for better impact but underfunding delays activities

The programme continues its focus in three counties for greater impact. Rehabilitation of town and rural water supplies is ongoing in three focus counties in Kangwon (one county) and South Hamgyong (two counties) provinces. Piped water systems are being replaced, and bore-wells are being drilled in institutions. Seventy-two small-scale institution based sanitation projects in the three counties were recently completed. Low funding for the programme has, however, hindered progress this year. Water assessments in two additional focus counties in the more vulnerable north-east of the country are underway (in Hyesan, Ryanggang province and in Hwaeryong, in North Hamgyong province), but water and sanitation rehabilitation is not expected to begin in these two counties until the second half of the year, when new funding is identified.

Education – under-funding limits progress

Progress so far this year has been low. Severe under-funding has meant that printing of new textbooks and procurement of basic school materials has not been possible – priority has been given for funding the health and nutrition programmes to ensure the necessary supplies of medicines, vaccines and therapeutic foods. A planned education for all policy/strategy seminar and a consultancy for review of textbook production / needs have both been postponed because of SARS impact on consultants travel. It is expected that the postponed activities will take place in the second half of the year.

Field visits

So far in 2003, UNICEF staff have undertaken field monitoring visits to health facilities (hospitals and clinics), children's institutions, kindergartens and primary schools, nurseries and other specific project sites in all of the 12 provinces/cities countrywide. Main findings are:

- Acute respiratory infections (pneumonia) and diarrhoea are still the most common illnesses in children.
- On the day of the visit to health facilities more than 90 per cent had the very vital essential medicines to treat pneumonia and diarrhoea.
- Paediatric hospitals and baby homes have high-energy therapeutic milk for the treatment of severe malnutrition until mid-year.
- Moderate malnutrition continues to be widespread and severe malnutrition continues to be seen.
- Availability of textbooks in primary schools is the highest since the early 1990s.
- All primary school students in schools visited in the northeast of the country had received UNICEF basic school materials – pencil, ruler and eraser.

UNICEF, as is the case for other UN agencies, currently has access to 162 out of 206 counties (85 per cent of the population).

Programme Planning

On March 10, the government and UNICEF held a country programme strategy meeting to review draft plans for cooperation for the period 2004-2006. The UNICEF Regional Director for East Asia and the Pacific attended together with other staff from the UNICEF regional office and headquarters in New York. Other members of the UN Country Team and the International Federation of Red Cross and Red Crescent Societies also attended. In the afternoon of the same day, a briefing on the draft programme was held for representatives of resident donor missions together with the Swiss Agency for Development Cooperation and the Italian Development Co-operation.

UNICEF - People's Committee consultation meetings

In May, consultation meetings were held between UNICEF and five People's Committees in South Hamgyong province (Provincial People's Committee, Kowon County People's Committee and Jongpyong County People's Committees) and Kangwon province (Provincial People's Committee, Kosan County People's Committee). The meetings discussed:

- Aspects of early childhood development;
- key objectives/targets for the new 2004-2006 country programme of cooperation;
- current UNICEF support to these provinces/counties;

- the rationale for a more “convergent” programming approach; and
- why the three counties have been designated “focus counties” in the 2004-2006 programme.

Two cross cutting activities for implementation in each province / county over the remainder of this year were discussed:

- introduction of ChildInfo, UNICEF global software for collating and displaying information on children and women; and
- baseline assessments of the situation of children and women following the format of the recent nutrition assessment.

These activities are already included in the UNICEF-Government plans of action for 2003 but had not previously been discussed with provincial or county counterparts. A follow-up progress meeting with the Committees was agreed for August.

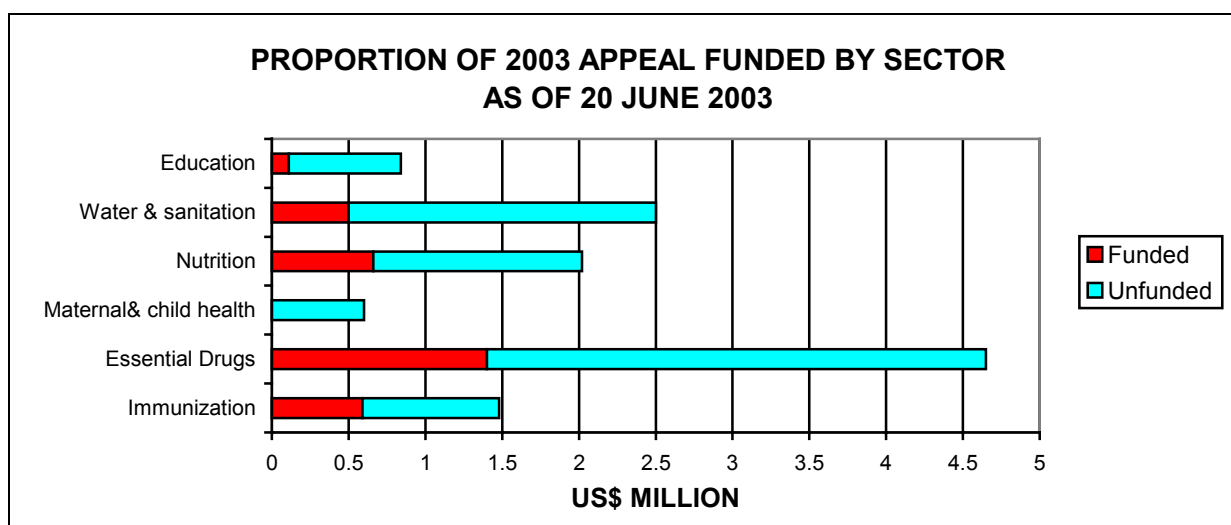
UNICEF Representative’s visit to Seoul

The UNICEF Representative made an official visit to the Republic of Korea from 12 to 18 April meeting with representatives of the government, parliamentarians, Red Cross, academia, civil society figures and the media. The visit confirmed continuing interest in investing in children in the North of the peninsula, and increased interest in doing so through multilateral channels, partly to respond to a public debate on transparency and accountability of aid. This year has been significant in that UNICEF DPRK received its first ever contribution from the government of the ROK, as well as continuing support from the Korean Committee for UNICEF.

3. APPEAL REQUIREMENTS AND RECEIPTS

As part of the UN Consolidated Appeal for DPRK, UNICEF appealed for US\$ 12,096,000 to support its Emergency Programme for children and women in the country. The table and graph below show the current funding status of the Appeal, by sector. This includes an additional US\$ 900,000 from UNICEF regular resources. In addition, UNICEF has received a formal pledge from the Government of Italy of US\$ 107,643 for health and nutrition. Moreover, new grants are expected from the European Commission Humanitarian Office of some € 1.2 million for EPI, essential drugs and nutrition, and from the Government of Canada of some 1 million Canadian dollars for health and EPI activities.

TABLE 1: 2003 APPEAL REQUIREMENTS AND FUNDING BY SECTOR AS OF 20 JUNE 2003				
Sector	Target (US\$)	Funded (US\$)	% Funded	Unfunded (US\$)
Expanded programme on immunization (EPI)	1,480,500	590,596	40	889,904
Essential drugs	4,646,250	1,397,620	30	3,248,630
Maternal and child health	598,500	0	0	598,500
Nutrition	2,016,000	656,265	33	1,359,735
Water and environmental sanitation	2,509,500	499,856	20	2,009,644
Education	845,250	112,933	13	732,317
Total	12,096,000	3,257,270	27	8,838,730



The following table indicates the contributions received for the Appeal, by donor.

TABLE 2: FUNDS RECEIVED FOR 2003 APPEAL BY DONOR AS OF 20 JUNE 2003		
Donor	Contribution (US\$)	Purpose
UNICEF (additional RR)	900,000	EPI, essential drugs, nutrition
Sweden	582,050	EPI, essential drugs, nutrition
Norway	561,960	EPI, essential drugs, water & sanitation
Republic of Korea	500,000	EPI, essential drugs, nutrition
Korean Committee for UNICEF	390,331	EPI, essential drugs, nutrition
Finland	322,929	Water & sanitation, education
Total	3,257,270	

4. IMPACT OF UNDER-FUNDING AND CURRENT PRIORITIES

Underfunding and late funding for UNICEF programmes in the DPRK has forced postponement of activities, slowed implementation of activities and reduced programme coverage. **Shortfalls in funding prevent UNICEF from providing adequate support and puts children at greater risk of death and malnutrition.** For example, UNICEF is currently only able to provide several very vital medicines out of the more than 200 items on the WHO essential medicines list. Additional funding for the procurement of vital medicines is urgently needed. Because of the lack of funding, supplementary foods for school children and pregnant women cannot be fortified. Contributions are urgently needed to initiate procurement of the necessary vitamins and minerals for fortification. Water rehabilitation activities and printing of new primary school textbooks have been postponed until new funding is received.

The table below outlines the most urgent priority requirements.

TABLE 3: REQUIREMENTS AS OF JUNE 2003		
Project	Beneficiaries/coverage	Amount Required (US\$)
1. Essential drugs	<ul style="list-style-type: none"> 12 million people in eight provinces/cities and child care institutions nationwide 	2,000,000 for vital medicines
2. Immunization	<ul style="list-style-type: none"> 470,000 children under the age of one year 480,000 pregnant women 	500,000 for vaccines and critical cold chain equipment
3. Nutrition rehabilitation / control of micronutrient deficiencies	<ul style="list-style-type: none"> All children below 5 years of age 480,000 pregnant and 450,000 lactating women 70,000 severely malnourished children Whole population for iodized salt 	400,000 for vitamin-mineral premix for children and pregnant women

Details of the UNICEF DPRK Emergency Programme can be obtained from:

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