



Consolidated Emergency Report for 2016

Prepared by UNICEF DPR Korea
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Executive Summary

UNICEF provides life-saving support in health; nutrition; Water, Sanitation and Hygiene (WASH); while supporting children and women to cope with protracted emergencies in Democratic People's Republic of Korea (DPRK). In 2016, over the two Child Health Days campaigns more than 1.7 million children aged under 5 had access to Oral Rehydration Salts (ORS) and 1,024,992 children aged 24 to 59 months (99 per cent) were dewormed and screened for treatment of malnutrition. more than 60,000 severe acute malnourished (SAM) children with and without complications and about 150,000 Moderate Acute Malnutrition (MAM) were treated, while 490,000 children aged 6–23 months (92 per cent) received four months' supply of multi-micronutrient powder for home fortification of complementary foods during the bi-annual Child Health Days (CHDs). In addition, 270,000 pregnant women (10 per cent of the target) received weekly iron-folate supplements and 360,000 pregnant and lactating women (47 per cent) received at least two months' supply of multi-micronutrient tablets during pregnancy and at least one month's supply for use during lactation. Over 91,000 people were supplied with water purification tablets, buckets and soap, ensuring access to clean drinking water and hygiene.

UNICEF actively communicated humanitarian needs of children and women through Humanitarian Action for Children (HAC). However, International sanctions, donor fatigue and competing global humanitarian crises resulted in limited funding for UNICEF's humanitarian response in country. The programme received only 28 per cent of the US\$27.8 million funding required and due to funding shortfalls, UNICEF DPRK was only able to provide 5,413 of a planned 10,400 Essential Medicines Kits. This allowed about 364,337 children aged under 5 (of the 700,000 target) to access treatment for pneumonia, preventing an estimated 4,372 deaths. Estimates show that even provision of enough ORS by UNICEF in the country may have helped avert over 10,200 deaths among under five children. UNICEF wishes to express its gratitude for the generous, critical and lifesaving humanitarian funding provided by the Government of Canada, Sweden, the USAID Office of U.S. Foreign Disaster Assistance (OFDA), Central Emergency Response Fund and the National Committees of UNICEF in the Republic of Korea and the US.

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Abbreviations and Acronyms

CBS – Central Bureau of Statistics

CMAM – Community Management of Acute Malnutrition

CMT – Country Management Team

CPD – Country Programme Document

GAVI – Global Alliance for Vaccines and Immunization

GFWS – Gravity-Fed Water Supply

HAC – Humanitarian Action for Children

ICT – Information and Communications Technology

ICN – Institute of Child Nutrition

MAM – Moderate Acute Malnutrition

MICS – Multiple Indicator Cluster Survey

MoCM – Ministry of City Management

MoPH – Ministry of Public Health

MUAC – Mid Upper Arm Circumference

ORS – Oral Rehydration Salts

RCSA – Risk Control Self-Assessment

SAM – Severe Acute Malnutrition

TB – Tuberculosis

WASH – Water, Sanitation and Hygiene

WHO – World Health Organization

Humanitarian Context

The humanitarian situation in the Democratic People's Republic of Korea is characterized by chronic food insecurity and limited access to quality health and water, sanitation and hygiene (WASH) services, which have resulted in chronic undernutrition and poor health outcomes. An estimated 18 million people are food insecure and 200,000 children are affected by acute malnutrition.ⁱ At the same time, the country is maintaining an impressive network of social services reaching down to the village level, and has made significant progress in increasing enrolment in both primary and secondary education, screening services for malnutrition using MUAC and geographical expansion of CMAM services as well as decreasing mortality due to preventable causes. The progress on key social indicators have been uneven across regions, with Pyongyang city generally faring the best, and provinces in the Northeast faring less well. Noticeable gender and age inequities in terms of health and welfare among men, women, and children appears to be existent. Recurring natural disasters such as flooding and drought have exacerbated existing vulnerabilities. Although exemption granted to humanitarian assistance, imposition of sanctions, coupled with donor fatigue, have reduced the availability of resources to address even the most pressing life-threatening situations. As a result of many complex factors, several key social indicators, such as under-five mortality and maternal mortality, are lower than before 1990.

In August 2016, heavy rains from Typhoon Lionrock in North Hamgyong Province resulted in widespread flooding and the destruction of infrastructure, livestock and crops, affecting more than 600,000 people.ⁱⁱ Children, pregnant women and lactating mothers faced an increased risk of water-borne diseases – with a four-fold increase in diarrhoea – as well as communicable disease outbreaks. The number of children suffering from acute malnutrition in flood-affected areas in need of life-saving treatment quadrupled from 500 to 2,000 during the first three month of the emergency. The Government had requested the support of the international community to meet humanitarian needs and international community including UNICEF responded.

Humanitarian Results

In 2016, UNICEF DPRK responded to the protracted humanitarian situation, characterized by drought and the sudden onset of floods which resulted in acute malnutrition and poor health outcomes for children and women. An estimated 11 million people, including more than 789,000 children aged under 5 and 318,000 pregnant and lactating women living in North and South Hwanghae (south), South Hamgyong (central) and South Pyongan (south) were affected by the severe drought. UNICEF provided essential medicines, ORS and water purification tablets to treat and prevent diarrhoea and pneumonia and, 4,000 children with acute malnutrition were treated in the four drought-affected provinces.

In August 2016, Typhoon Lionrock resulted in widespread destruction of livelihoods, as well as health, WASH and education infrastructures in six counties of North Hamgyong Province (north). About 600,000 people, including 44,706 children aged under 5 and 18,969 pregnant and lactating women, were affected by the floods. In response to appeal of the Government for international support, UNICEF DPRK co-led the inter-agency joint assessment mission and released pre-positioned nutrition, health and WASH emergency stocks for 100,000 people. UNICEF raised US\$5.6 million for emergency response and deployed a team comprised of international and national seconded personnel in the flood-affected areas. The team provided technical assistance, monitored distribution and use of emergency supplies.

Twenty temporary health clinics were established, and essential medicines and emergency health kits were provided to meet the needs of 600,000 people. Approximately 91,200 people had access to safe drinking water and hygiene through provision of water purification tablets, soap and buckets. The nutrition programme facilitated an emergency workshop for 30 doctors, established 108 Community Management of Acute Malnutrition (CMAM) sites and more than 16,000 children aged under 5 suffering from severe acute malnutrition were treated. In addition, 44,706 children aged under 5 received vitamin A and were

screened for early detection and referral for treatment at CMAM sites. In total, 14,216 children aged 6–23 months were provided with two months' supply of multi-micronutrient powder for home fortification of complementary food. A total of 9,025 pregnant and lactating women received multi-micronutrient tablets and key messages on promotion of optimum infant and young child feeding practices. Of these women, 3,234 were given blankets for the harsh winter, while 30,000 homeless children aged under 16 received winter clothes. Educational support was delivered through provision of 530 emergency classroom kits and educational supplies for 1,500 school children. Spare parts to restore the water supply systems for 50,000 households were procured and repair work is expected to be completed in 2017.

Due to funding shortfalls, UNICEF DPRK was only able to provide 5,413 of a planned 10,400 Essential Medicines Kits. This allowed about 364,337 children aged under 5 (of the 700,000 target) to access treatment for pneumonia, preventing an estimated 4,372 deaths. More than 5.3 million ORS sachets were provided nationwide for 1.7 million children aged under 5. Estimates show that additional ORS may have helped avert over 10,200 deaths among these children.

		UNICEF 2016 target	UNICEF total results
NUTRITION			
Children aged 0 to 59 months with complications treated for SAM and moderate acute malnutrition	Regular humanitarian response	25,000	25,000 ⁱⁱⁱ
	Floods	20,000	4,021
Children aged 6 to 23 months who received multi-micronutrient supplementation	Floods	14,222	11,374
People (including women of child-bearing age, pregnant and lactating women and children aged 6 to 23 months) who received multi-micronutrient supplementation	Regular humanitarian response	4,900,000	2,820,000
HEALTH			
Children under 12 months with access to routine immunization and essential newborn services	Regular humanitarian response	370,000	302,167
Pregnant women with access to antenatal care, immunization and safe delivery services	Regular humanitarian response	372,000	306,820
	Floods	15,175	6,762
Children dewormed twice a year	Regular humanitarian response	1,500,000	1,033,192
Children aged 6 to 59 months who received two doses of vitamin A	Regular humanitarian response	1,700,000	1,549,478
	Floods	40,235	44,706
Children aged 5 to 14 years who received warm clothing for winter protection	Floods	28,000	28,000
WATER, SANITATION AND HYGIENE			
People, including schoolchildren, with access to clean water	Regular humanitarian response	250,000	109,200
	Floods	138,214	91,200
People provided with information on appropriate hygiene practices	Regular humanitarian response	2,000,000	1,000,000
	Floods	75,970	20,000
People with access to treated water and safe storage	Regular humanitarian response	1,000,000	497,000
People, including children and women, accessing toilets and washing facilities that are appropriate, secure, sanitary, user-friendly and gender-appropriate	Floods	63,675	40,000

Monitoring and Evaluation

UNICEF has 16 international staff and 40 nationally seconded personnel in DPRK. Over the years, a strong monitoring system has been developed, with different programmes using the office established guidelines for monitoring with specific checklists. The UNICEF Country Office used all opportunities to collaborate with other United Nations agencies and donor embassies to closely monitor programme inputs in order to ensure adequate technical oversight on the use of humanitarian supplies brought in to the country.

UNICEF international staff have visited almost all project sites in the four central provinces in North and South Hwanghae, South Pyongan and South Hamgyong affected by the drought and North Hamgyong Province effected by the floods in 2016. International technical experts of UNICEF in health, nutrition, WASH sectors spent 158 person days in the field using standard monitoring checklists. UNICEF facilitated weekly monitoring visits to operational service delivery sites, as well as joint supportive supervision activities with Ministry of Public Health, Ministry of City Management, Central Bureau of Statistics and other partners' technical officers.

UNICEF also organized field visits together with representatives from the British, German and Russian embassies to monitor the delivery and use of life-saving supplies provided by the health, nutrition and WASH sectors. These events and other specific donor visits to project sites (including by the Australian Government) provided opportunities for the donor community to have the first-hand experience in DPRK.

UNICEF worked very closely with the Central Bureau of Statistics and strengthened the Child Data Management Unit in provision of health, nutrition and WASH related programme monitoring data on a regular basis at national and provincial levels, including a specific set of performance indicators. Continuous flow of information and data helped partners to be informed and guided in making adjustment to programmatic interventions. For the first time, the Government provided gender- and age-disaggregated data related to flood emergency response in North Hamgyong Province (north), which helped UNICEF provide 28,000 children with gender- and age-appropriate emergency supplies.

Financial Analysis

Fundraising for the Democratic People's Republic of Korea remains constrained, inadequate and unpredictable due to the specific political context of the Korean peninsula. International sanctions, donor fatigue and competing global humanitarian crises resulted in limited funding for humanitarian response in the Democratic People's Republic of Korea. The programme was only 28 per cent funded (US\$7,855,937), in addition to rollover funds of US\$236,203 from 2015, in comparison to the US\$27,750,000 million humanitarian appeal of 2016.

No	Donor	Grant Reference	Sector	Amount (USD)
1	Canada	SM160151	Health	524,345
2	SIDA-Sweden	SM160106	Health, Education, WASH	1,211,442
3	United States Fund for UNICEF (Gates Foundation)	SM160506	WASH	550,000
4	SIDA-Sweden	SM140226	Health, Nutrition, WASH	125,562
5	SIDA-Sweden	SM150197	Health, WASH	18,929
6	Republic of Korea	SM150265	Health	91,510
7	UNOCHA	SM150375	WASH	202
8	UNOCHA	SM160110	Nutrition	1,650,732
9	UNOCHA	SM160123	Health	995,982
10	UNOCHA	SM160459	Nutrition	462,882
11	UNOCHA	SM160460	WASH	1,208,351
12	The United Kingdom	SM150317	Nutrition, Health	216,000
13	RR (EPF)	GE160026	Health	800,000
	Total			7,855,937

UNICEF's proactive cooperation and communication of its funding needs attracted the attention of Government partners, United Nations agencies and other international donors to extend support through UNICEF. UNICEF was not only able to receive a good portion of Central Emergency Response Fund funding (US\$800,000) but also received funding from the Governments of Canada, Sweden and the United

Kingdom, and the United States Fund for UNICEF, the latter being a potential emerging donor for the first time through its response to the flood emergency.

Future work plan

UNICEF will continue supporting humanitarian service delivery and influencing national policies to be child and women friendly through the provision of life-saving supplies in health, nutrition and WASH sectors and will promote global standards and best practices. UNICEF will integrate interventions in nutrition, health and WASH to improve child well-being using the 'first 1,000 days of life' approach. Integrated services will contribute to reducing maternal and under-five mortality, promoting early childhood development, addressing undernutrition among women and girls, facilitating equitable access to WASH services in meeting humanitarian needs. In 2017, health and nutrition programmes will reach 50 counties with life-saving interventions. UNICEF will also work to strengthen the availability and quality of child-related data, which will be critical to identifying and reaching most at-risk children. UNICEF will continue to coordinate the response in the nutrition and WASH sectors and co-lead the health sector.

Given the current situation in the country, fundraising for UNICEF DPRK remains a challenge. In line with the inter-agency Needs and Priorities Plan, UNICEF is requesting US\$16.5 million to meet the humanitarian needs of children and women in 2017. With the requested funding, UNICEF will continue to support life-saving interventions in health, nutrition and WASH in response to recurrent disasters and the ongoing humanitarian situation.

Sector	2017 requirements (US\$)
Nutrition	7,000,000
Health	6,000,000
WASH	3,500,000
Total	16,500,000

Expression of thanks

UNICEF wishes to express its gratitude for the Government of Canada, Sweden, the USAID Office of U.S. Foreign Disaster Assistance (OFDA), the National Committees for UNICEF in the US and Republic of Korea for their generous support to humanitarian programming in DPRK. UNICEF looks forward to continuing this partnership in order to realize the rights and survival of the most vulnerable children and hasten their development to achieve their full potential.

Annexes to the CER

Some examples of the human interest stories communicated throughout 2016 include:

1. <https://blogs.unicef.org/east-asia-pacific/dpr-korea-building-back-stronger-floods/>.
2. <https://blogs.unicef.org/east-asia-pacific/dpr-korea-floods-huddle-together-keep-warm/>
3. <https://blogs.unicef.org/east-asia-pacific/survivors-north-hamgyong-floods-dpr-korea/>
4. <https://blogs.unicef.org/east-asia-pacific/unicef-supporting-children-affected-floods-dpr-korea/>.

Annex: Stories from Field-Reduction of Child Undernutrition, DPR Korea

Stories from the field: Treatment of SAM	Stories from the field: Child Health Days
 <p><i>Kim Jo Sung's 7-month-old boy, admitted to hospital with SAM and pneumonia</i></p> <p>Kim Jo Sung's 7-month-old boy was admitted with SAM and was treated with antibiotics and therapeutic milk for one week. After one week, the treatment was changed from milk to Plumpy'Nut ready-to-use therapeutic food. "Children like Plumpy' Nut and gain weight and recover from malnutrition very well and fast with Plumpy'Nut treatment," said the doctor treating the boy at South Pyongyan Province Paediatric Hospital.</p> <p>"Before UNICEF supported the CMAM programme," he continued, "the doctors did not know how to treat undernutrition and a lot of children died because of ineffective treatment. In the past three years since UNICEF introduced the CMAM programme and trained the doctors in the use of therapeutic milk and Plumpy'Nut, we have reported no deaths during the treatment phase. The CMAM programme really is a life-saving programme."</p> <p>Kim Jo Sung confirmed this, saying, "Plumpy'Nut helped my child. I brought him here when he was very thin and weak, lost interest to play and interact with me. He was not able to suck on my breast either and I did not know if he'd ever be able to survive or recover from this... when the doctors started the treatment, I could see the difference in his response. My baby started to be more attentive and interactive, now he gained 1.5 kg and became stronger."</p>	 <p><i>Ri Yong Sim, 11 months, received MMNP during a Child Health Day</i></p> <p>The photo above is of eleven-month-old Ri Yong Sim and her mother at Kangan Ri Clinic in Horyong City, where the baby received vitamin A and MMNP (Sprinkles) to ensure good health and development and was screened for malnutrition. The doctors in the village clinic said "the turn-up for U5 children during the CHDs is around 99%".</p>  <p><i>A child receiving vitamin A supplements and deworming tablets</i></p>



Early initiation of breastfeeding

The director of Hwangju county hospital in North Hwanghae said that before practicing early initiation of breastfeeding, the hospital reported a lot of newborns with moderate to severe jaundice; almost all newborns were developing 'normal' jaundice within three days of delivery. The situation changed dramatically when the hospital started practicing early initiation of breastfeeding, and since then has reported only a few cases of 'mild' jaundice. "We appreciate UNICEF technical support in promoting early initiation of breastfeeding along with technical support to health workers in all the CMAM hospitals in 189 counties in the country," said the director.

At left: a young mother is supported in early initiation of breastfeeding at Hwangju county hospital in North Hwanghae