

A photograph of a woman with dark hair tied up, wearing a red ribbed sweater, hugging a baby. The baby is wrapped in a patterned blanket and looking towards the camera. The background is a bright blue wall with a window.

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Annual Report for 2018

UNICEF DPR Korea Country Office



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UNICEF DPR KOREA
COUNTRY OFFICE
ANNUAL REPORT
FOR 2018

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ABBREVIATIONS AND ACRONYMS

CBS	Central Bureau of Statistics
CMAM	Community Management of Acute Malnutrition
CO	Country Office
CPD	Country Programme Document
DPRK	Democratic People's Republic of Korea
DRR	Disaster risk reduction
EmONC	Emergency Obstetric and Newborn Care
GPSH	Grand People's Study House
HAC	Humanitarian Action for Children
HI	Humanity and Inclusion
IFRC	International Federation of Red Cross and Red Crescent Societies
IMNCI	Integrated Management of Neonatal & Childhood Illness
INGO	International NGO
IYCF	Infant and Young Child Feeding
MICS	Multiple Indicator Survey
MoPH	Ministry of Public Health
MoUM	Ministry of Urban Management
ORS	Oral Rehydration Salts
PLW	Pregnant and Lactating Women
SAM	Severe acute malnutrition
SDC	Swiss Development Cooperation
SDG	Sustainable Development Goals
SIDA	Swedish International Development Cooperation Agency
SitAn	Situation Analysis
SWG	Sector Working Group
TB	Tuberculosis
UNFPA	United Nations Population Fund
UNSF	United Nations Strategic Framework
WASH	Water, sanitation and hygiene
WFP	World Food Programme
WHO	World Health Organization



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1. SITUATION UPDATE IN THE COUNTRY

Despite an extensive network of primary and secondary health-care facilities, essential drugs for the treatment of common childhood illnesses and basic equipment are both scarce, especially for obstetric and neonatal care. Limited international communication and exchange with professional peers has led to reduced capacities in the people who deliver health care. In the Democratic People's Republic Korea (DPRK), maternal and child mortality rates remain unacceptably high, with disparities between urban and rural areas as well as between provinces. According to the Annual Health Report (2014), infant mortality rates and under-five mortality rates were 1.2 times higher in rural than urban areas.

According to the United Nations Inter-agency Group for Child Mortality Estimation, between 2000 and 2017, the DPRK under-five mortality rate decreased steadily from 60 to 19 deaths per 1,000 live births, while the national official estimate puts it at 18 per 1,000 live births. The probabilities of dying during the first 28 days of life and before reaching age 1 have also lowered. Yet neonatal and infant mortality combined account for 84 per cent of all under-five deaths, implying a need to strengthen emergency obstetric and neonatal care (EmONC) and integrated management of neonatal and childhood illnesses (IMNCI) to further reduce child mortality.

Sustained high and equitable vaccination coverage of more than 96 per cent across the country for the last three years helped DPRK achieve measles-free status, attested by the World Health Organization (WHO) Regional Verification Committee in 2018. To date, WHO has defined DPRK as one of the countries most affected by tuberculosis (TB). In the fight against malaria, the shift from disease control to decisive malaria elimination status was achieved in 2017. The Global Fund withdrew unexpectedly in mid-2018. People, including a large number of women and children affected, notably by TB are at high risk of discontinuing treatment. Multi-drug resistant TB remains as a major concern in DPRK.

Between 2000 and the latest United Nations estimate for 2015, maternal deaths due to complications from pregnancy or childbirth decreased from 128 to 82 deaths per 100,000 live births. However, this is still higher than the estimates of the 1990s. While the 2017 DPRK Multiple Indicator Cluster Survey (MICS) showed high coverage for the requisite four antenatal care visits, further reducing the maternal mortality rate will depend on improving service quality and focusing on the 13 per cent of deliveries still taking place outside of a health facility in rural areas.

In 2018 approximately 200,000 children under 5 years of age across DPRK were estimated affected by under-nutrition, of whom around 60,000 had severe acute malnutrition (SAM), a life-threatening condition which, if not treated, could increase risk of death. Over 1.7 million under-five children and around 700,000 pregnant and lactating women (PLW) were exposed to micronutrient deficiencies which affect growth, development and well-being.

In 2019 around 140,000 children are estimated to suffer from undernutrition and need treatment annually; of these, 30,000 face an increased risk of death. There has been overall improvement in nutrition among children under 5 years of age: wasting improved from 4 per cent to 3 per cent, and stunting levels went from 28 per cent (National Nutrition Survey 2012) to 19 per cent (2017 MICS). Stunting in under-five children, a key indicator of malnutrition, dropped from 45 to 19 per cent between 2000 and the 2017 MICS. Acute malnutrition dropped more rapidly, and in 2017, only three per cent of under-five children suffered from acute malnutrition. Progress was supported by improvements in early initiation of breastfeeding and relatively high exclusive breastfeeding, at 71 per cent in 2017. However, inadequate dietary diversity is still a reality for over half of all children under 5 years of age, and only one in three receive both the right number of feedings and combination of foods.



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Significant disparities exist between geographic locations and provinces, and among wealth groups. The prevalence of SAM in the lowest wealth group is, for instance, three times the prevalence in the highest wealth group. In Ryanggang Province, 32 per cent of children are stunted compared with 10 per cent in the capital Pyongyang. Both chronic and acute malnutrition are much higher in rural than in urban areas. Another risk to the cognitive development of children is that only one in five households uses iodized salt.

Rights to safe drinking water and sanitation are still largely unrealized. Water, sanitation and hygiene (WASH) indicators are an important determinant of the incidence of diarrhoea, which is among the top childhood killers globally. The 2017 MICS revealed that six out of 10 people in the country (over 9.7 million people) do not have safely managed drinking water. Overall, 23.5 per cent of the population drink water from contaminated sources. Excreta from 90 per cent of on-site sanitation facilities are used unsafely for agricultural fields in rural areas. Children under 5 years of age living in households that drink contaminated water are three times as likely to be wasted as children living in households with access to safe drinking water. Under-five children using unimproved sanitation also have diarrhoea 36 per cent more often than those using improved sanitation. Half of all schools and health facilities lack adequate water and sanitation facilities.

DPRK's Early Child Development Index score increased from 75 to a comparatively high 88 between the MICS 2009 and 2017 rounds. Some 73 per cent of children aged 36–59 months attend early childhood education, with no disparity observed between urban and rural areas, girls and boys or wealth index groups. However, there are significant disparities between provinces, with North Hamgyong at 53 per cent attendance and Jagang at 88 per cent displaying the widest difference. Access to primary –and even secondary– education is near-universal, and parental support for learning measured by the 2017 MICS is high at 96 per cent. The 2017 MICS results for learning outcomes were favourable for reading (95 per cent), while numerical skills (82 per cent) can be improved. DPRK has newly prioritized human capital development through learning outcome assessments and curriculum revision, aiming to shift from rote learning to modern teaching methods; yet the demand for technical assistance in these areas, as well as disaster risk reduction (DRR) in schools, remains unmet.

Reduced data availability and limited management capacity of partners were key bottlenecks to the analysis, planning, monitoring, evaluation and reporting of results for children addressed by the DPRK Country Office (CO) in 2018, in line with the 2016 Situation Analysis (SitAn) and DPRK-UNICEF Country Programme Document (CPD) for 2017–2021.

2. KEY HUMANITARIAN RESULTS ACHIEVED

The Country Programme of Cooperation has a humanitarian focus and UNICEF assistance is conveyed through: procurement and delivery of life-saving humanitarian supplies; monitoring of their planned use; and internal and external leveraging of partnerships and resources based on assessed humanitarian needs and documented achievements. While offshore procurement and in-country distribution of humanitarian supplies attract 85–90 per cent of resources available for children annually, the process of jointly targeting the most vulnerable also provides a platform to advocate for improved policies and higher-quality, equity-focused social service delivery.

The approach of leveraging humanitarian aid for policy change, constantly and consistently applied in a more and more receptive and enabling environment, has proven itself through the strong gains made in access to reliable evidence and increased geographical areas for programme and situation monitoring, as well as the development of equity-focused sectoral policies. However, shrinking humanitarian space and declining funding have meant that opportunities for children and women could not be fully followed up, and even the delivery of basic humanitarian interventions crucial to safeguarding their lives is seriously compromised.

Despite continued geopolitical tensions and difficulties both in mobilizing funds for humanitarian assistance and making supplies available in-country, UNICEF DPRK made a significant contribution to the realization of rights for many children and women in the country. With a funding throughput of close to US\$26 million, it remained among the largest humanitarian United Nations partner for DPRK in terms of funding volume and geographical programme coverage.

Beyond addressing the chronic humanitarian situation, UNICEF and partners responded to sudden-onset emergencies. An influenza-like illness started in December 2017 and continued until January 2018 with 246,351 cases reported from across the country. Of these, 137,884 were confirmed by the Ministry of Public Health (MoPH) as Influenza Type A (H1N1) and 502 as cases of severe acute respiratory illness, with four deaths attributed to it. UNICEF released 20 inter-agency emergency health kits, 37 household doctor bags, oral and injectable antibiotics, antipyretics and other medicines for case management. In September 2018, when flash floods hit North and South Hwanghae Provinces a week after Typhoon Soulik and damaged or destroyed thousands of houses, public buildings and kindergartens, UNICEF participated in the inter-agency joint needs assessment for over 10,000 displaced people and was among the first to respond with pre-positioned WASH, health and nutrition emergency stocks. In follow-up, 1,200 children who lost all their belongings in the floods were provided with sets of warm winter clothes.

In 2018, supply requisitions amounting to US\$15million were raised with 93 per cent procurement sourced primarily from UNICEF Supply Division, including vaccines, cold chain equipment, pharmaceuticals, medical equipment and nutrition supplies. Procurement from China consisted mainly of WASH supplies, laboratory consumables and emergency supplies, while local supplies were mostly limited to materials for renovations, printing materials and household items.

However, increasingly stringent restrictions on UNICEF and partners – including scrutiny of in-country expenditures and requests by transit countries for sanction-related import waivers – led to considerable delays in importing life-saving relief items and increased the duration and cost of storage.

UNICEF DPRK proactively reviewed procurement against sanctions lists and ensured exemption requests were received before finalizing the procurement. Accordingly, the office made the best use of existing monitoring tools to closely follow up goods-in-transit status, and as a result the number of days of goods-in-transit and their value were reduced to the minimum levels possible.

Numerous advances were supported by UNICEF in the policy and procedure environment based on new evidence and global best practice, including with inter-agency support from United Nations and international NGO (INGO) humanitarian actors. The Government opened further to more inter-agency coordination and intersectoral cooperation because of the tangible difference in outcomes made by flagship collaborative initiatives such as expanded immunization with WHO; IMNCI and Integrated Management of Pregnancy and Childbirth

with WHO and the United Nations Population Fund (UNFPA); and prevention and treatment of malnutrition with World Food Programme (WFP).

To enable scale-up of successful approaches in both coverage and quality, and ultimately further reduce child and maternal mortality rates, capacity development events were held for over 4,300 officials and grass-roots practitioners on themes ranging from emergency obstetrics to data analysis. Sustainability of capacity was fostered by training national and provincial master trainers on IMNCI, EmONC, Community Management of Acute Malnutrition (CMAM) / Infant and Young Child Feeding (IYCF) and EPANET water system design; and their effectiveness in disseminating knowledge was confirmed through monitoring training demand and consistency of quality practice.

2.1. Goal Area 1: Every child survives and thrives

2.1.1. HEALTH

As co-chair of the Health Sector Working Group (SWG), UNICEF helped MoPH implement maternal and child health interventions including immunization, community-based IMNCI, EmONC and early detection and treatment of childhood TB. Through the extended immunization programme, which has nationwide coverage, 338,000 children under 1 received full courses of 11 vaccine doses; 337,000 pregnant women received tetanus vaccination; and 2018 passed with no outbreak of any vaccine-preventable disease. Sustained high and equitable vaccination coverage of more than 96 per cent across the country for the last three years helped the country achieve 'measles-free status', verified by WHO. The rubella control and measles elimination strategy was endorsed.

UNICEF supported updating of IMNCI and EmONC guidelines and protocols and helped develop pools of master trainers for capacity-building of health-care workers. It also provided the essential medicines, ORS, vaccines and storage equipment for routine immunization, as well as basic obstetric equipment for county hospitals in nine Convergence Counties. UNICEF worked with MoPH within the framework of the Health Medium Term Strategic Plan 2016–2020 to reduce infant, under-five and maternal mortality, and decrease the burden of the most prevalent diseases. UNICEF-supported achievements made by MoPH are as follows:

1. The DPRK five-year National Strategic Plan on measles elimination and rubella/congenital rubella syndrome control 2018–2022 was developed jointly by MoPH, WHO and UNICEF, and endorsed by the Inter-Agency Coordination Committee. Introducing the measles-rubella vaccine in 2019 will help achieve rubella-free status.
2. In conjunction with WHO, UNICEF mitigated the detrimental impact of Global Fund's withdrawal in June by mobilizing resources, simplifying protocols and integrating community intervention for childhood TB prevention, detection and treatment into the IMNCI protocol. Some 190 county hospitals provided TB treatment for 107,000 cases, including 6,000 children on treatment and 3,000 on prevention, despite challenges in procurement and delivery of TB medicines. A potential stockout was prevented through partial air shipment of essential TB drugs.
3. IMNCI continued to be rolled out in the 50 priority counties. Some 35 national and provincial master trainers took refresher training and delivered cascade training to 2,700 household doctors, thus completing the 5,700 planned for 2017–2018. Six thousand hard copies of IMNCI protocols were distributed and the IMNCI Computerized Adaptation and Training Tool e-learning platform was locally adapted and rolled out nationally.



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4. The national EmONC guidelines developed jointly with MoPH, WHO and UNFPA were validated for dissemination and implementation. A total of 163 obstetricians and midwives in four Convergence Counties were trained, and four maternity wards and neonatal units were fully equipped and refurbished.
5. UNICEF signed the first-ever Programme Cooperation Agreement in DPRK with the INGO Humanity and Inclusion (HI). With a focus on three articles of the United Nations Convention on the Rights of Persons with Disabilities and 2 articles of the Convention on the Rights of the Child, the project promotes early detection of disability in health facilities, through mobile screening services in selected pilot locations, awareness of disability rights and training. Under the strong leadership and advocacy of the Resident Coordinator, HI-Korean Federation of Persons with Disabilities-UNICEF also initiated partnerships with the UN Partnership on the Rights of Persons with Disabilities/Swedish International Development Cooperation Agency (SIDA) for early detection of and intervention in childhood disabilities.

Besides the DPRK five-year National Strategic Plan on measles elimination and rubella/congenital rubella syndrome control 2018–2022, the International Expanded Programme on Immunization/Vaccine-Preventable Disease Surveillance Review and Joint Appraisal update for Gavi were also conducted with UNICEF support. Successful implementation of the Gavi Health System Strengthening 2 grant and sustaining equitable vaccination coverage resulted in Gavi awarding performance-based funding. After two years' absence due to global availability issues, the inactivated poliomyelitis vaccine was reintroduced to the national immunization programme in May 2018. Jointly with WHO and MoPH, UNICEF supported training of 42 national and provincial

master trainers on 'Immunization in Practice', followed by cascade training for county and village staff. Similarly, 18 staff members from the Central Medical Warehouse and MoPH involved in vaccine and logistics procurement were trained in immunization forecasting and vaccine wastage calculation.

Nationwide, UNICEF provided vaccines and supplied 9.6 million ORS sachets, covering 100 per cent of diarrhoea cases in children under 5. Some 3,088 essential medicine kits and 4,332 household doctor's bags were distributed in the 50 priority counties and emergency areas, reaching a population of more than 5 million people. These supplies, in many places, are the only source of essential medicines such as antibiotics to treat children diagnosed with life-threatening pneumonia.

Complete sets of EmONC equipment were provided to four Convergence Counties and 8,080 Clean Delivery Kits were distributed in the 50 priority counties. Twenty inter-agency emergency health kits were procured to respond to the seasonal flu outbreak in January. To respond to floods that affected North and South Hwanghae Provinces in September, UNICEF distributed 258 Essential Medicine Kits, 110,000 sachets of ORS, seven inter-agency emergency health kits and seven tents to temporarily replace damaged health facilities. The emergency preparedness plan was developed and finalized with UNICEF Regional Office and Headquarters' support.

UNICEF provided ongoing support to MoPH to strengthen the Logistics Management Information System for health and nutrition commodities, and an assessment of the current system and recommendations were finalized. UNICEF co-leads the Health SWG with WHO, and joint MoPH and UNICEF technical monthly meetings were conducted.

2.1.2. NUTRITION

Despite funding challenges, UNICEF-supported life-saving high-impact nutrition interventions were sustained nationwide, providing a lifeline to approximately 1.6 million under-five children and PLW. Throughout the year, UNICEF DPRK as co-lead of the Nutrition SWG with WFP, ensured effective sector coordination among humanitarian partners.

In 2018 around 55,000 children with SAM (with or without concurrent illnesses) and children with moderate acute malnutrition with concurrent illnesses were successfully treated in provincial paediatric and counties' general hospitals in 189 out of 210 counties by MoPH with UNICEF support. Almost all children treated (99 per cent) fully recovered from malnutrition. The UNICEF-sponsored twice-yearly Child Health Days continue to provide a lifeline to children under 5, reaching about 1.51 million with vitamin A supplementation, screening and deworming, while nearly 506,000 children aged 6–23 months received multi-micronutrient powder supplements for home fortification of their complementary foods and integrated IYCF counselling. However, due to funding constraints, only about 86,000 pregnant women, representing 12 per cent of the national target for PLW, received multi-micronutrient tablets for six months.

In close collaboration with MoPH and the Institute of Child Nutrition, health-care providers' knowledge and skills on proper identification and treatment of malnutrition, infant feeding practices and nutrition in emergencies were improved, leading to delivery of enhanced quality services for children and women. Around 600 paediatricians, nurses and household doctors were trained thanks to UNICEF on an integrated package of CMAM, IYCF and micronutrient deficiencies.

In partnership with the Grand People's Study House (GPSH), child nutrition information is readily available to the public nationwide, particularly to women of childbearing age, through a nutrition web page and mobile-based application. Similarly, the knowledge and understanding of 14,820 PLW, health workers and university lecturers on the importance of nutrition in the first 1,000 days of life was broadened through GPSH's tele-advocacy system. Enough copies of the Korean-language Facts for Life in Convergence Counties were disseminated to give every potential mother access to vital knowledge on early child health and development.

At national level, the new nutrition initiatives piloted by MoPH are bringing positive changes for children and women through the issuance of general directives to promote optimal nutritional care and abandon harmful clinical practices in health facilities. As a result, children are no longer exposed to early cord cutting, colon washing and fresh blood transfusion from mothers to babies,

while benefiting from delayed cord cutting (to prevent neonatal death), early initiation of breastfeeding, skin-to-skin contact (kangaroo care), vitamin A supplementation and promotion of optimal IYCF practices.

To enhance the quality of nutrition services for children, in 2018 a two-year action plan to address recommendations from the 2017 CMAM evaluation was developed under the leadership of MoPH and involving other Government partners, WFP and WHO. The CMAM evaluation report and the management response to its recommendations were both endorsed and launched. The two-year evaluation management response plan, including a comprehensive review of CMAM programme guidelines and parts of treatment protocols, will enable efficiency gains and a better access to treatment of malnourished children in remote areas. Furthermore, a five-year National Nutrition Strategy aimed at guiding nutrition priorities for children and women was drafted. A five-year strategy on iodine deficiency disorders, and technical guidelines and standard operating procedures for raw salt iodization were drafted under the leadership of the State Planning Commission and Academy of Medical Science to guide production and iodization of raw salt.

Inter-agency collaboration with WFP facilitated delivery of essential nutrition services for under-five children and PLW as life-saving efforts were complemented by preventive nutrition services supported by WFP. The nutrition sector also provided life-saving essential supplies to eight flood-affected counties in North and South Hwanghae Provinces. UNICEF DPRK responded immediately using pre-positioned supplies, strengthening the capacity of health facilities to identify and treat acute malnutrition early. As a result, approximately 375 children received treatment for acute malnutrition.

Through collaboration with the Institute of Child Nutrition-Academy of Medical Science, the capacities of 77 officials from the State Committee for Emergency and Disaster Management, GPSH, MoPH, the Ministry of Urban Management (MoUM) and the Education Commission were increased in emergency nutrition preparedness and response and promotion of optimum IYCF practices in emergencies.

Children and women continue to face a precarious nutrition situation underpinned by inadequate water, hygiene and sanitation, health services and food insecurity with an estimated 140,000 under-five children remaining vulnerable to undernutrition. Thus, in 2019 UNICEF will continue to support high coverage nutrition services through the 189 CMAM sites, supplementation of multi-micronutrients and promotion and counselling on optimal feeding practices while enhancing quality through implementation of the two-year action plan while finalising nutrition strategies and enhancing technical capacity of health workers.

2.2. Goal Area 4: Every child lives in a safe and clean environment

UNICEF provided life-saving WASH support against natural disasters like floods and droughts which pose grave risks to children annually. In the context of the ongoing chronic humanitarian crisis, interventions mainly focused on delivering longer-term disaster-resilient WASH services in eight counties, five Convergence Counties and three other vulnerable counties with suitable topography.

In partnership with key WASH partners such as the Swiss Development Cooperation (SDC), the International Federation of Red Cross and Red Crescent Societies (IFRC), International Committee of the Red Cross and INGOs funded under European Union Programme Support, UNICEF also supported national systems strengthening, enhanced knowledge and evidence generation, and capacity building. This approach has helped better harness national capacity to orchestrate implementation of disaster-resilient WASH programmes and services with large contributions from the Government and local communities.

Under the leadership of MoUM, a five-year costed multi-sectoral National WASH Implementation Strategy is being drafted jointly with MoPH, the Ministry of Agriculture, academia and WASH partners. As part of the response to the WASH evaluation conducted in 2017, UNICEF and SDC enhanced the capacity of 215 national and sub-national engineers on computer-aided design of water supply networks.

Some 170,600 people received supplies for basic drinking water. 55,800 people in Jongju City and Rakwon county, including all schools and health facilities in the up-town area, accessed longer-term safely managed water services through completion of a gravity-fed water supply system. The remaining 106,400 people in Kosong, Myonggan, Orang, Kyonghung and Kyongsung counties have not yet received water supply, due to delays in securing exemption from the Sanctions Committee for remaining items with metallic parts.

Through the joint effort of WASH partners, focus has shifted from providing access to improved sanitation facilities to safely managing sanitation. The 2017 MICS new data on safe disposal of excreta and safely managed drinking water services were extensively deliberated during the WASH Strategy inception workshop and the Sanitation Workshop led by SDC. These findings helped reach consensus with the Government to prioritize urine-diverting dehydration toilets and composting toilets to safely manage sanitation in rural areas and optimally recover nutrients for reuse in agricultural fields. They are being trialled in Jongju City.

With IFRC and Concern Worldwide as co-chairs, UNICEF continued to lead the WASH SWG. Using pre-positioned supplies, 8,400 people from 3,400 families affected by the September floods in North and South Hwanghae Provinces were immediately supported with water purification tablets and jerry cans. Beyond regular updates on 3W matrices (who is doing what where), WASH partners coordinated efforts on joint preparedness and planning, harmonization of emergency response and implementation of longer-term humanitarian services.

Sector partners collectively delivered services for 138,400 people. However, 229,200 people are still without safely managed drinking water, partly due to late funding and mostly to the stringent conditions and lengthy exemption, clearance and importation processes of certain WASH supplies entailed by the sanctions.

In 2019, UNICEF will continue to support delivery of humanitarian WASH services to help children meet their basic vital needs, promote safely managed sanitation, finalize the National WASH strategy, implement the water quality protocol, and strengthen routine WASH sector SDG monitoring, tracking and reporting.

The United Nations Development Programme leads the DRR SWG, which includes the State Committee for Emergency and Disaster Management, the Ministry of Land and Environment Protection, the Central Bureau of Statistics (CBS), the State Hydro-Meteorological Agency, and DRR focal points. UNICEF attended DRR meetings and invited members to attend the SWGs it leads or co-leads. In 2019, UNICEF will work closely with this working group to pilot strengthened risk-informed programming in Convergence Counties, as a preparatory measure to support national systems in becoming more resilient to disasters and climate change. Through the global greening initiative, UNICEF reduced its carbon footprint by maintaining a second year of solar voltaic project, with an annual electricity saving of US\$ 16,000 and savings of 0.15 tons of coal per day. A second follow-up project of 60 KVA is being installed and expected to double electricity savings by end of 2019. Fifteen laptops were replaced with desk-tops, thereby halving the consumption of electricity from these work stations. Estimated cost savings from electricity consumption is US\$5,000 per annum.

2.3. Data-driven programming, management and advocacy

In 2018, following up on the recommendations of the Committee on the Rights of the Child, the Government continued strengthening data-collection systems and data sharing with UNICEF DPRK under an extended Memorandum of Understanding. The conclusion of the 2017 MICS and further analyses, the finalisation and uptake of a highly rated Nutrition programme evaluation and the initiation of a consultative process for an update of the Situation Analysis of Children and Women document constituted highlights of the joint evidence and learning agenda.

CBS finalized and disseminated the 2017 MICS with full access for survey fieldwork monitoring, technical assistance and quality assurance from the UNICEF global MICS team, and international experts from Regional and Country Offices. For the first time, a wealth index was used in analysing results, allowing correlation and highlighting of geographic and wealth disparities in the population. The locations of the most vulnerable children in DPRK and their most pressing needs are now better known, enabling improved targeting of scarce humanitarian funds.

Uptake and use of the 2017 MICS results triggered immediate consultations on implications for programming and targets with national institutions and humanitarian partners. Training was provided on key techniques for further thematic data analysis and four reports were produced after intersectoral consultation with CBS and line ministries, adding trends, comparisons and causal analysis to the 2017 MICS results. An equity-focused disparity analysis of the status of the general population compared with vulnerable groups according to their background characteristics, plus provincial profiles offering a quick situation and social sector performance overview, were made available. After a commissioned in-country data-collection and consultations, the revised SitAn will be published early in 2019, used in the CPD mid-term review and for advancing child rights.

As member of the United Nations Monitoring and Evaluation/Data Group for the United Nations Strategic Framework (UNSF) 2017–2021. DPRK CO also facilitated intra- and cross-sectoral reflection on the implications of 2017 MICS data for humanitarian programming and the UNSF 2017–2021. As a result, the situation analysis and calculation of targets/people in need for the DPRK 2019 Needs and Priorities appeal document will be based on reliable 2017 MICS indicators. Baselines and targets were also informed by the 2017 MICS for a good proportion of UNSF indicators and child-related SDG indicators. The UN M&E/Data Group collectively mapped available data and potential sources going forward to jointly support

the national Sustainable Development Goal (SDG) process and cross-sectoral SDG Implementation Task Force (SDG ITF), led by the Vice-Prime Minister and facilitated by CBS. Supporting the finalisation of SDG localisation and a Voluntary National Report drafted by the SDG ITF, will be a 2019 priority for the UN M&E/Data Group under the direct leadership of the UN Resident Coordinator. UNICEF DPRK will specifically focus on filling gaps in WASH sector data for both baselines and routine monitoring of SDG 4 and 6 targets by establishing pilot and regular reporting mechanisms with MoUM, MoPH and the Education Commission.

After a programme cycle with no evaluation, DPRK progressed from a fair to highly satisfactory rating within two evaluation reports in 2017–2018. The methodologically ambitious external evaluation of the Community Management of Acute Malnutrition (CMAM) programme received the highest quality rating and was publicly launched with a two-year follow-up action plan developed with the Ministry of Public Health (MoPH) and key stakeholders including World Food Programme (WFP) and World Health Organisation (WHO). MoUM successfully concluded the management response plan to the evaluation of gravity-fed water supply systems with frequent monitoring of its implementation. A joint delegation of CBS, MoUM and the Ministry of Foreign Affairs also participated in the EvalColombo 2018 Forum of Parliamentarians for Evaluation, gaining knowledge on using evaluations in the context of Agenda 2030. Participation in the event advanced Government's understanding of effective institutional arrangements and processes for evaluations and their uptake in policymaking. The delegation expressed interest in reviewing best practice examples of National Evaluation Policies (NEP) and designing a specific policy for DPRK with UNICEF support. CBS also directly supported the management response to the CMAM evaluation, which recommended establishing regular data reporting from programme sites with additional disaggregation; for example, of treatment outcomes.

After finalizing the 2017 MICS, CBS and UNICEF resumed and intensified their focus on administrative data for the monitoring, operational performance measurement, tracking of progress and donor accountability of UNICEF-supported programmes. The 2016 joint Memorandum of Understanding on establishing a Child Data Management Unit was revised and extended for 2018–2021.

A multisectoral matrix of indicators –with unprecedented disaggregation of certain indicators– was agreed, and full data sets were produced for the first three quarters of 2018. This included additional indicators and breakdowns as well as earlier unreported county-level data for the nine Convergence Counties central to the 2017–2021 CPD design. CBS provided three quarterly data sets within this matrix and quick impact data on floods in the south of the country. It also initiated capacity-building and quality assurance missions for statisticians in Convergence County People’s Committees to support situation analysis and planning/monitoring of local Child Well-being Action Plans in 2019. This systematic work on data enabled better measurement of programme performance and progress, triangulation with field monitoring results, and workplan reporting and planning processes.

Under the 2018 MoU, UNICEF DPRK also strengthened the capacity of the Child Data Management Unit of CBS to undertake equity-focused, age- and gender-disaggregated data analysis, with a special focus on humanitarian needs and risks, through the expert-led process of producing Further Analysis Reports based on the 2017



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MICS. Provincial statistics offices participated in the launch of the 2017 MICS to foster ownership and uptake at their level, while CBS published and disseminated the Korean-language 2017 MICS report to decentralized levels of governance for follow-up.

2.4. UNICEF programme development and monitoring

In 2018, UNICEF continued to use the ‘Four Programming Quadrants’ tool to plan and assess workplan implementation on a rolling basis and in a harmonized way along the CPD’s multilevel geographic targeting scheme, centred on nine Convergence Counties and further priority and scale-up counties. Resource allocation decisions and the intensity of monitoring and supportive supervision were directed by this framework, and despite severe constraints, several Convergence Counties were assisted to the point of becoming demonstration and learning sites of convergent programming effectiveness between WASH, nutrition, health and education interventions.

The CO restructured a dedicated cross-sectoral team with focal points for each Convergence County, which supported People’s Committee authorities in local-level planning and the development of specific Child Well-being Action Plans for 2018–2021. These Plans focus on delivering universal coverage of child-responsive services in health, nutrition and WASH through the integrated application of ‘the first 1,000 days of life’ approach, supported by behaviour change messaging. Further supporting cross-sectoral planning, monitoring and evaluation capacities of Convergence County authorities, including statistics units, will form a key priority in 2019.

An efficient and effective monitoring system to ensure correct distribution and use of humanitarian supplies

remained central to UNICEF’s work in DPRK. Monitoring data is crucial to ensuring UNICEF accountability for the proper use of donor assistance, which in turn is critical to mobilizing further humanitarian funding. Following the adoption by the CO of a new Field Monitoring Guide mid-year, minimum monitoring standards were applied to half-yearly and quarterly trip planning across the programme, in accordance with the level of programmatic investment and risks to manage. New Key Monitoring Questions enabled reporting on the status and use of programme inputs along common performance indicators, while monthly monitoring reports on recommendations enabled managerial oversight and in-course adaptations.

Out of DPRK’s 210 counties, 83 were visited at least once (119 per cent overachieved) during 156 days of field monitoring. The CO developed a simplified integrated monitoring checklist for health and nutrition and trained non-programme international staff for non-technical field monitoring and asset verification. The new standard operating procedure also institutionalized the yearly commissioning of external specialized expertise to carry out intensive monitoring and supervision exercises. The detailed results of the 2018 exercise which were shared with national programme partners and through the United Nations Monitoring and Evaluation Working Group for peer learning, bolstered UNICEF’s calls for further humanitarian support.



2.5. External advocacy and international support for child rights

In 2018 humanitarian funding overall declined. The inter-agency Needs and Priorities 2018 document, appealing for US\$111 million was only 24 per cent funded. UNICEF's Humanitarian Action for Children (HAC) 2018, appealing for US\$16.5 million, had a 69 per cent funding gap at year end, while the regular humanitarian programme for 2017–2021 remained underfunded by 60 per cent.

The HAC was the main avenue to continue raising awareness on the plight of children and women in DPRK. In the context of chronic needs exacerbated by tensions on the Korean Peninsula and a shrinking humanitarian space, funding contracted despite strong resource mobilization efforts. Unintended consequences of geopolitical tensions and international sanctions affected continuity of life-saving services for thousands of children and women.

Throughout 2018, UNICEF conducted advocacy and partnership development activities, using the HAC appeal and new evidence – notably from the 2017 MICS and the CMAM programme evaluation – to promote commitment to the realization of child rights. During country visits by the UNICEF Deputy Executive Director for Field Results and the Deputy Regional Director, engagement with senior Government levels on both public investment in social sectors and recommendations made by the Committee on the Rights of the Child, as well as exchanges with resident diplomatic/donor representatives, drew attention to the continued humanitarian needs of children and women. The launch of the 2017 MICS with a global press release on 20 June and a press conference in Geneva, in addition to the national launch event under the auspices of the Deputy Executive Director, resulted in higher international media coverage. The needs of children were also highlighted during celebrations of global days and campaigns related to handwashing and breastfeeding, and twice-yearly DPRK Child Health Days. Resident bilateral donors were invited to these events to see communities benefiting from successful interventions. Programmatic

results and continued needs were broadcast in the form of human interest stories and photos over a new website developed thanks to Regional Office support.

A SIDA Headquarters mission to visit beneficiaries of the Sweden-funded response to the 2016 North Hamgyong floods was co-hosted by WFP and UNICEF. SIDA is a long-term regular supporter of the DPRK HAC. The subsequent visit of the Asia Director of the Swedish Ministry of Foreign Affairs contributed to Sweden's principled communications in the United Nations on support for humanitarian action in DPRK by giving first-hand insight into unmet planned results due to unintended consequences of sanctions.

French Development Cooperation extended its seminal support for WFP-UNICEF joint nutrition programming. Agencies are planning to set up a Joint Programme using United Nations Development Group methods, which will be open to contributions from other donors. An International Expanded Programme on Immunization/Vaccine-Preventable Disease Surveillance Review and combined Gavi Joint Appraisal mission was co-hosted by WHO and UNICEF COs, with documented good performance leading to confirmation of further performance-based funding for immunization.

With the few exceptions above and a significant CERF allocation for drought response, UNICEF DPRK increasingly relied on thematic funds and core resources. It continued its privileged partnership with NatComs from the Republic of Korea, engaged with those in the United States and Switzerland, and consistently reached out to the local diplomatic and NGO communities. Five Nordic NatComs have confirmed their visit in early 2019. It contributed to resource mobilization efforts through the inter-agency Needs and Priorities 2018 document and hosted the Under-Secretary-General for Humanitarian Affairs' visit to DPRK, which helped renew Central Emergency Response Fund support.

3. LESSONS LEARNED AND CONSTRAINTS

In 2018, with UNICEF support, significant advances have been made in the realization of rights for children and women in the Democratic People’s Republic of Korea in 2018. Yet they continue to face risks from frequent natural hazards, chronic food insecurity and insufficient national capacity to provide life-saving basic services such as health care and water, sanitation and hygiene (WASH) facilities. According to new evidence from the 2017 MICS, marked disparities and mutually reinforcing deprivations exist for children and women by geographical and wealth characteristics. Continued international support, following the humanitarian imperative and first call for children, is urgently required to address disparities so that no child is left behind and to prevent backsliding on achieved progress.

In a complex operating environment, tangible humanitarian results in child survival and development and access to safe drinking water were achieved collaboratively in 2018. Correct distribution and use of assistance was documented by international staff through enhanced field monitoring practices, and the effectiveness of that assistance was attested by independent evaluation. While stringent sanctions imposed on the country were not meant to affect humanitarian assistance, their unintended consequences hampered the humanitarian community’s and UNICEF DPRK’s ability to deliver, exacerbated by a decline in donor funding.

3.1. Alignment with organizational priorities and opportunities for children

Humanitarian action was identified as the primary cross-cutting priority of the UNICEF Strategic Plan for 2018–2021, focused on delivering on the organizational mandate to implement child rights everywhere, anytime. DPRK continues to face a protracted, underfunded humanitarian situation, which has worsened through consecutive years of droughts and floods and is complicated by limited access to quality vital services. Current geopolitical tensions increasingly crowd out the humanitarian imperative and first call for children among donors.

Despite these challenges, there are numerous opportunities to accelerate progress for children in alignment with the Strategic Plan and regional headlines around Early Moments Matter, Safe and Sustainable Living Environment and Adolescent Potential Unleashed.

To realize the rights of every child, especially the most vulnerable, UNICEF DPRK continued focusing primarily on the goals ‘Every child survives and thrives’ through the Health and Nutrition programmes, with ‘Every child lives in a safe and clean environment’ as an interlinked priority served by the WASH programme.

While UNICEF DPRK does not have the financial or human resources to focus on ‘Every child learns’, it continued to gather data and evidence in the education sector to prepare for higher prioritization of this goal area, which also depends on more access to the country’s education system and data. ‘Every child has an equitable chance in life’ – which underpins the Strategic Plan as a cross-cutting goal and includes issues such as gender equality, the rights of persons with disability, human rights



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and adolescents – is pursued through all programmes as well as preparatory work on evidence and policies through the Programme Effectiveness and Monitoring and Evaluation components. While the programme is gender-sensitive and targets girls and boys equally, no specific gender results are targeted apart from a focus on adolescent girls’ health and nutrition. Available data and parity indices from the 2017 MICS show no sex-selective or discriminatory practices against girls up to higher education, but societal norms that prevent women from accessing leadership need to be challenged early and tackling them should be systematically mainstreamed in programming.

In 2018, the CO conducted an internal Strategic Moment of Reflection workshop to review and confirm its programme strategy considering the 2017 MICS results and

trends observed in supported programme areas. The programme strategy’s unique approach of combining humanitarian action with the power of evidence to drive policy change and generate at-scale results through partnerships and joint action with the United Nations family and other humanitarian partners was confirmed as a context-appropriate use of the UNICEF Strategic Plan enablers to ensure children in DPRK are not left behind. Key shifts are deliberate and sustained attention to the humanitarian-development continuum, gender-responsive programming and challenging of unequal opportunities to survive and thrive, with the gender focal point newly located at the level of the head of programmes. The SitAn update process, which will be concluded in 2019, provided an effective avenue to engage these shifts among an analysis and advocacy push for the implementation of the Convention on the Rights of the Child.

3.2. Evidence-based interventions and advocacy

Evidence generation has proven crucial to addressing the underlying resilience depletion and structural causes of deprivation which exacerbate disaster risk and impact in DPRK. UNICEF continued to advocate with the Government and support CBS in improved collection, management and analysis of reliable data and evaluative evidence across all sectors, underlining how critical they are for humanitarian planning and effective, equity-focused policies.

In a more open environment for data and information exchange, Government gave international experts access to CBS for the entire MICS process 2016–2018. It also supported a CMAM programme evaluation with unprecedented access to health facility records, disaggregated routine statistics and communities for a lot quality assurance sampling assessment to ensure effective service coverage in 2017. In 2018, opening up was sustained in publishing the 2017 DPRK MICS with disaggregation of all indicators by wealth index groups. With high international and national anticipation, the in-country launch by the UNICEF Deputy Executive Director for Field Results was organized simultaneously with a press conference held in Geneva by UNICEF East Asia and Pacific Regional Director to draw attention to the progress achieved for children in DPRK as well as the substantive challenges they still face.

Further MICS-based analyses of disparities between provinces, areas of residence and households in the wealth groups was a breakthrough for programmatic targeting of the most vulnerable. The evaluation of the CMAM programme also presented a breakthrough, demonstrating the feasibility of high-quality, credible evaluations and their uptake in partnership with national institutions. In addition, the evaluation findings strongly validated UNICEF DPRK’s programmatic effectiveness and its relevance to children’s needs in responding to emergency-related spikes of malnutrition. External advocacy of the CO extensively publicised that the CMAM programme averted an estimated 7,581 under-five deaths and provided appropriate treatment for over 180,000 acutely malnourished children during 2015–2016. Beginning a new equity-focused SitAn factoring in 2017 MICS data, evaluative evidence and changes in the policy environment was another sign of high-level commitment to advancing child rights and of the power of iterative trust-building through technical cooperation. The broad portfolio of both strategic policy and implementation documents adopted recently across all assisted sectors validated the approach of combining life-saving support with policy advocacy. In this context, generating and using reliable evidence for in-country and external advocacy as well as programme planning and performance reporting thus appears to be the support strategy with the highest potential for return on investment in terms of change effected for children.

3.3. Joined-up approaches benefiting children

Marked progress achieved in intra-government cross-sectoral coordination and in how United Nations agencies work together for results heralded a new era when joint mechanisms of Government-humanitarian partner coordination will replace formerly compartmentalized modes of cooperation.

Government made advances in recognizing the value added by whole-of-government consultation and coordination, as well as South-South exchanges, and coordination between and with its international partners. At the international level, Government delegations participated in exchange and learning events with other states on evaluation for effective pro-social policies towards Agenda 2030 (EvalColombo 2018) and fostering of children’s development potential through early childhood care and education (Third Asia-Pacific Regional Policy Forum on Early Childhood Care and Education). Government also views the Agenda 2030 process as an

avenue to work in a more integrated fashion between various levels of governance and intends to create an SDG Steering Committee in 2019.

Institutional counterparts expressed appreciation of the participatory methods used to further analyse 2017 MICS data and the implications for intersectoral response; joint analysis of the bottlenecks to rights realization in the SitAn process; and the generation of a five-year WASH Implementation Strategy. In these processes, ministries and institutions with converging remits consulted on collaborative solutions and integrated plans of action on cross-sectoral policy issues. During the WASH Strategy development, for instance, MoUM and the Ministry of Agriculture came together to deliberate on sanitation approaches to end ‘virtual open defecation’ while also catering for the equal priorities of safe water supply and optimal food production for the population.

Entering a revitalized United Nations joint delivery model, premised on a strengthened Resident Coordinator function, collaborative results between sister agencies and UNICEF DPRK have already demonstrated the added value of joined-up work. The Resident Coordinator has amplified the needs of beneficiaries and the harmonized position of United Nations agencies on crucial matters globally and voiced common advocacy points to the Government. These efforts were supported by information and common analysis of the issues by the relevant agencies. Finding solutions to important internal and external issues, such as access or the unintended consequences of sanctions on supplies and banking, were effectively advanced with fewer transaction costs for individual agencies.

Based on their comparative advantages and strengths, sister agencies and UNICEF entered synergistic arrangements in planning and implementing results in a way that tangibly enhanced outcomes for children and women. The system of SWGs, comprising bilateral development agencies and resident INGOS, has proven an effective way to maximize the outcomes of humanitarian aid to the country. This system received the full support of UNICEF DPRK, which undertook substantial coordination work in

the health, nutrition and WASH sectors. While this co-ordination has so far been most effective in humanitarian needs assessment and joint emergency response, it may be beneficial to expand it to ongoing programmatic interventions, including programming in Convergence Counties. Also, the principle of participation/co-chairing by national institutions in SWGs, which is thus far only operational in the WASH sector, could be expanded to plan, monitor and report on shared results.

In November 2018, the United Nations Development Group and the United Nations Economic and Social Commission for Asia and the Pacific co-hosted a Systemic Consultation Workshop on ways to continue to engage with DPRK under the UNSF 2017–2021 and contributions by resident and non-resident agencies in the SDG era. A first United Nations country team–DPRK Government steering meeting of the UNSF is planned in January 2019 to agree on strategic forms of coordination and cooperation within the framework of reinvigorated delivery as one United Nations. Increased intra-United Nations and United Nations-DPRK coordination are promising avenues to address operational challenges and operationalization of the SDG partnership, which UNICEF will actively follow up as related to the furthering of child rights.

3.4. Operations and accountability in a specific humanitarian environment

Principled humanitarian action and delivery against the UNICEF Core Commitments for Children in Humanitarian Action are essential parts of the UNICEF mandate and prioritized by the UNICEF Strategic Plan for 2018–2021. Protecting children in protracted humanitarian situations such as DPRK’s while addressing their needs and vulnerabilities is essential to ensure progress towards Agenda 2030. On the other hand, accountability for humanitarian effectiveness is crucial, and UNICEF DPRK developed mechanisms which enable assurance of the correct delivery and use of aid.

In the context of heightened accountability requirements and external scrutiny, UNICEF continued focusing on field monitoring with the adoption of new standard operating procedures and minimum monitoring standards in 2018. International staff spent 156 days on monitoring and supportive supervision. The monitoring coverage standard, requiring monitoring visits to one third of DPRK’s 210 counties at least once, was overachieved at 119 per cent (83 counties visited). The CO institutionalized the yearly conduct of intensive monitoring rounds with external expertise, and this third-party monitoring confirmed the correct distribution and use of supplies in

100 per cent of sites visited. UNICEF international staff were also able to conduct monitoring in Jagang Province for the first time in October. An internal audit which focused extensively on context-specific risks and controls in the CO concluded with no high priority/risk recommendations, while making valuable recommendations for further improvements to CO strategic positioning and procurement and monitoring processes.

In his report on the Human Rights situation in DPRK of 6 August 2018, the United Nations Secretary-General noted that: “Sanctions imposed on the country, while not intended to affect humanitarian assistance, have continued to generate serious, unintended consequences and major impacts on life-saving humanitarian programmes owing to disruptions to the banking channel, the breakdown of supply chains, delays in the transportation of vital goods into the country and a steady decline in donor funding”.

In response, he recommended that the international community: provide adequate and sustainable funding for humanitarian assistance, especially food and medicine, with a view to improving humanitarian conditions



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and the human rights situation; and take urgent steps to minimize the adverse humanitarian consequences of sanctions imposed on DPRK by extending full support to the United Nations agencies working in the country.

UNICEF has been able to continue its life-saving humanitarian work for women and children, despite these challenges.

3.5. Leaving no child behind

Over the two first years of the UNICEF CPD, the geopolitical situation on and surrounding the Korean Peninsula has significantly improved. This development has arisen against the backdrop of a multi-year trend of steady marginal improvement in social sectors indicative of increases in children's well-being and that of the population at large. While not yet conforming to the recommendation of the Committee on the Rights of the Child to open to scrutiny public finances and the specific ratios of Government expenditure directed to improving children's lives, the DPRK Government has announced a strategic shift to developing the economy and lifting the living standards of people. It has also used domestic resources to co-finance vaccination and WASH programmes. Access to data, geographical areas and people for the humanitarian community has gradually become more open, and concerted situation analysis and policy development advice by a United Nations team and humanitarian partners working closely together is slowly receiving a warmer welcome. On the other hand, humanitarian aid has been limited and certain transaction costs occurred in the implementation of humanitarian exemptions to the international sanctions.

If 2019 continues unchanged, crucial interventions for safeguarding every child's right will be either difficult or outright impossible to implement. For instance, sanctions temporarily hampered progress on the right to safe drinking water. The iodization of salt, which is crucial to children's cognitive development and part of UNICEF humanitarian interventions globally, is currently not implementable. Carriers are not willing to transport potassium iodate required for iodisation, because it is categorized as dangerous goods. External support for people affected by TB and malaria is only assured until 2020.

However, the global pledges contained in the 2030 agenda of sustainable development are made for every human being, without exception or exclusion. Children and their needs cannot be put on standby while solutions to the geopolitical challenges are being sought. Addressing these needs now is a must; ensuring the first call for children is answered is a duty. UNICEF DPRK will continue upholding a full and principled application of the humanitarian imperative and calls on all stakeholders to support children's rights without reservations, to ensure that no child is deliberately left behind.



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