

PROVISIONAL*

NEEDS AND PRIORITIES

DPR KOREA OVERVIEW

HUMANITARIAN PROGRAMME CYCLE 2020

ISSUED FEBRUARY 2020

**Subject to adjustment related to the 2019 crop production figures yet to be released.*

TOTAL POPULATION

25 m

PEOPLE IN NEED (PIN)

10.4 m

PEOPLE TARGETED

5.5 m

REQUIREMENTS (US\$)

\$107 m

STRATEGIC OBJECTIVE 1

Reduce morbidity and mortality from malnutrition of the most vulnerable people with an integrated, community-based approach and improve equitable access to quality essential health services.

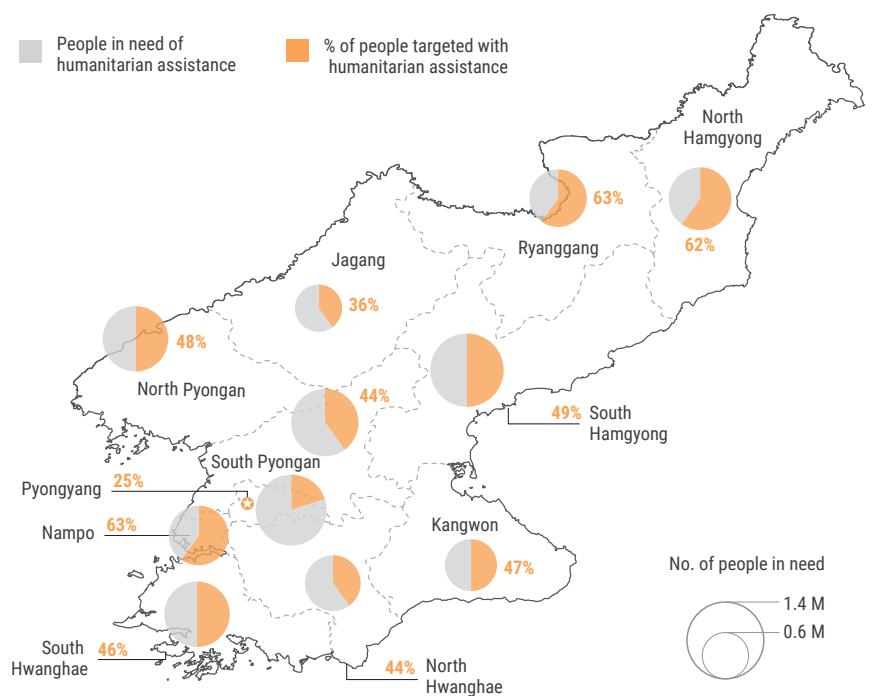
STRATEGIC OBJECTIVE 2

Reduce preventable mortality and morbidity, improve quality of life and living standard through equitable access to safely managed water, sanitation and hygiene services.

STRATEGIC OBJECTIVE 3

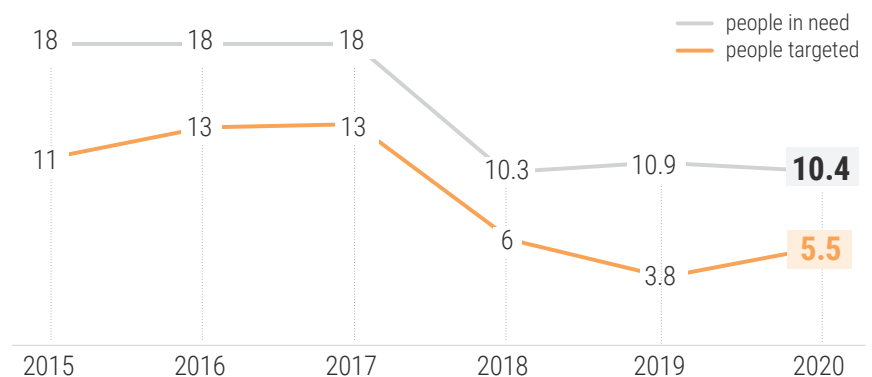
Build the resilience and improve food security of the most vulnerable people and communities to the impacts of climate change and natural disasters.

PEOPLE IN NEED AND TARGETED WITH HUMANITARIAN ASSISTANCE



TREND OF PEOPLE IN NEED AND TARGETED (2015 - 2020)

In millions of people



OCHA/Anthony Burke.

HUMANITARIAN CONTEXT

The humanitarian situation in DPRK is characterized by chronic food insecurity and lack of access to life-saving quality services, with profound impacts on the most vulnerable. Deterioration of critical agricultural infrastructure and recurrent natural disasters have resulted in about 10.1 million people in urgent need of food assistance. 10.4 million people throughout the country need nutrition support and food and improved access to basic services such as health, clean water, sanitation and hygiene.



Photo: OCHA/Anthony Burke.

HUMANITARIAN RESPONSE BY GENDER AND AGE

SECTOR	TOTAL			BY SEX & AGE		UNDER 5		OVER 5	
	PEOPLE IN NEED (PIN)	PEOPLE TARGETED*	% OF PIN TARGETED	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
FOOD SECURITY AND AGRIC.	10,075,568	1,338,091	13%	632,590 47%	705,501 53%	66,403 5%	72,842 5%	566,187 42%	632,659 47%
NUTRITION	10,429,535	2,024,995	19%	904,271 45%	1,120,724 55%	800,000 40%	800,000 40%	104,271 5%	320,724 16%
HEALTH	8,652,072	5,459,159	63%	2,620,396 48%	2,838,763 52%	825,600 15%	894,400 16%	1,794,796 33%	1,944,363 36%
WASH	8,438,100	306,847	4%	147,519 48%	159,328 52%	14,456 5%	15,161 5%	133,062 43%	144,167 47%
TOTAL*	10,429,535	5,459,159	52%	2,620,396 48%	2,838,763 52%	825,600 15%	894,400 16%	1,794,796 33%	1,944,363 36%

*Total figure is note the total of the column as it accounts for double counting.

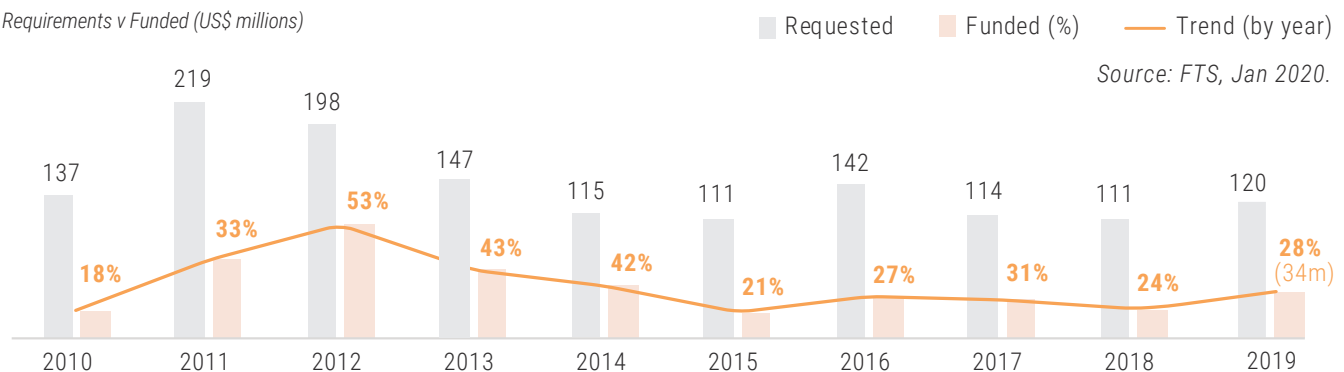
FINANCIAL REQUIREMENTS BY SECTOR

Requirements v Funded (US\$ millions)



FINANCIAL REQUIREMENTS (2010 - 2019)

Requirements v Funded (US\$ millions)



RESPONSE STRATEGY

Response priorities for DPRK continue to focus on food insecurity, undernutrition and improved access to basic services such as health and water, sanitation and hygiene.

For 2020, UN agencies and humanitarian partners are requesting approximately \$107 million to target an estimated 5.5 million people with humanitarian assistance. The people in need (PiN) number decreased from 10.9 million in 2019 to 10.4 million in 2020 mostly due to the different methodology as per the Humanitarian Programme Cycle approach applied to calculating sector-level and the overarching PiN. There is a 45 per cent increase in the number of people targeted with assistance rising from 3.8 million in 2019 to 5.5 million in 2020, thanks to the WHO coverage expansion to children under 15. Notably in 2019, WHO targeted only children under five.

Food security, agriculture and nutrition will remain key response priorities due to low agricultural production and increasingly frequent dry spells and floods. Unsafe drinking water, poor hygiene practices and inadequate health services contribute to a cycle where the most vulnerable people's health and wellbeing is compromised. Therefore, humanitarian interventions will continue to focus on the most vulnerable women and children, in particular, children under-five and pregnant and lactating women who represent 32 per cent and 7 per cent of the total number of people targeted respectively.

To address the humanitarian consequences for the most vulnerable people, in particular, the ones residing in Jagang, Kangwon, North and South Hwanghae provinces and Nampo municipality, the Humanitarian Country Team formulated the following strategic objectives: 1) reduce morbidity and mortality from malnutrition of the most vulnerable people with an integrated, community-based multi-sectoral approach and improve equitable access to quality essential health services;

2) reduce preventable mortality and morbidity and, improve quality of life and living standard through equitable access to safely managed water, sanitation and hygiene services; 3) build the resilience and improve the food security of the vulnerable people and communities affected by the impacts of climate change and natural disasters.

The strategic objectives of the 2020 Needs and Priorities plan were developed in complementarity with the Strategic Framework for Cooperation between the United Nations and the Democratic People's Republic of Korea (2017-2021) identifying four strategic priorities, which the UN seeks to address at the country level, working in support of the Government programmes, namely: 1. Food and Nutrition Security, 2. Social Development Services, 3. Resilience and Sustainability and, 4. Data and Development Management.

The response plan reflects the HCT's current operational

environment, although agencies' capacity to reach those identified in the plan with a full package of assistance will remain contingent on adequate and timely funding which has not been the trend over the last decade. The UN agencies and INGOs will continue to rigorously monitor humanitarian activities and programmes. In 2019, 1,516 project site visits were conducted over 1,047 monitoring days by humanitarian organizations, covering all provinces in the country.

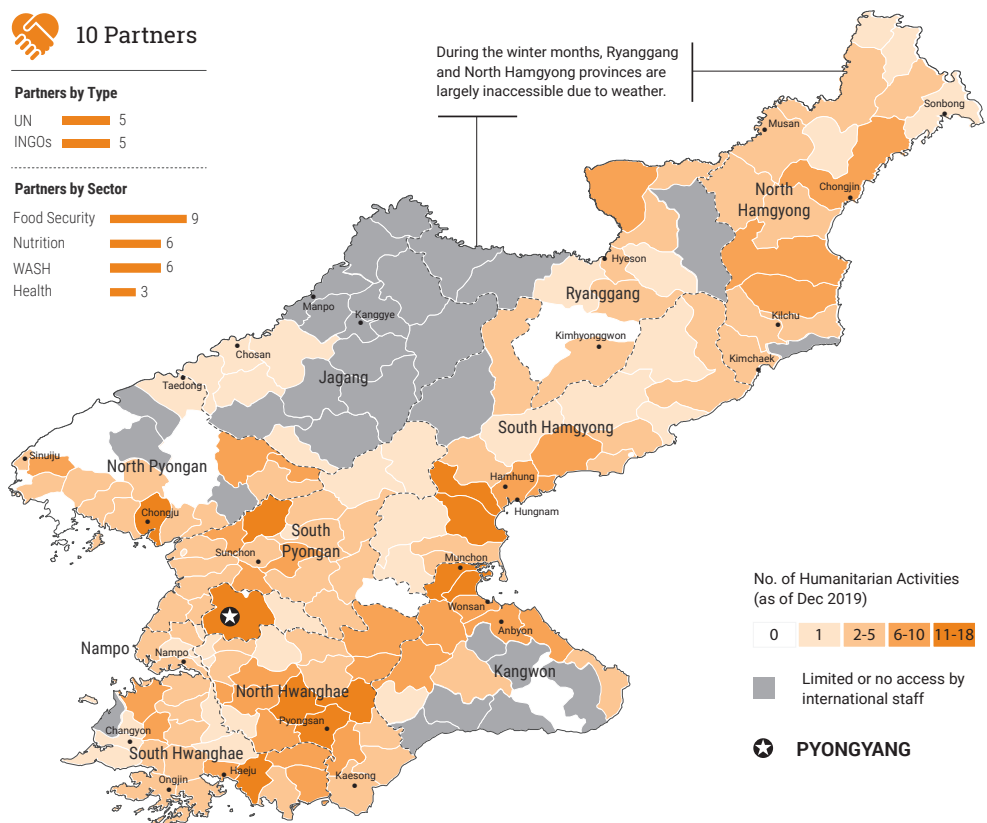
The HCT identified access and monitoring of aid activities as a key issue for development, joint understanding and collective effort. The access initiative launched on 23 October 2019 is under implementation aiming at creating a coordinated approach on access; monitoring access constraints; and developing an evidence-based narrative to support advocacy and resource mobilization activities.

To ensure adequate capacity to monitor the implementation of

the 2020 Needs and Priorities plan, the Humanitarian Country Team established the Results Working Group (RWG). The RWG is developing a monitoring framework to be put into implementation in early 2020.

As per the enhanced Humanitarian Programme Cycle methodology, the RWG will oversee monitoring of the implementation of the 2020 Needs and Priorities plan as well as monitoring of transformation of needs and changes in the humanitarian situation. However, the gains made with access and monitoring are at risk of being reversed if the agencies do not have the funding to implement and continue their programmes. As access is strongly linked to operational presence, funding constraints force agencies to draw-down programming and therefore reduce their humanitarian footprint. Once access is lost, it is difficult to obtain it again.

OPERATIONAL PRESENCE AND ACCESS IN 2019



Food Security & Agriculture



PEOPLE IN NEED

10.1m

PEOPLE TARGETED

1.3m

REQUIREMENTS (US\$)

\$29m

PARTNERS

9

SECTOR OBJECTIVE 1

Increase availability of food and improve nutrition for the population by increasing the production of staples and other food products using sustainable production practices (Supports Strategic Objective 3)

SECTOR OBJECTIVE 2

Increase resilience of vulnerable communities, farmers and cooperative farms to the impacts of recurrent natural disasters and climate change (Supports Sector Objective 3)

Around 10.1 million people, or 40 per cent of the country's population, are food insecure. Food insecurity is mainly driven by insufficient agriculture production, households' inability to cope with recurrent natural disasters, which have major impact on productive assets. Poor food consumption and inadequate dietary diversity, resulting from an insufficient supply of fruits, vegetables and animal-source foods, have a direct impact on the chronic malnutrition situation, especially on children, women of reproductive age and the elderly.

To address the food security and agriculture needs, the partners will work on all food security pillars: availability, access, utilization and stability, focusing on the following areas: 1) reinforcing household and community resilience, especially against natural hazards, by building and rehabilitating productive assets and providing conditional food transfers; 2) increasing access to more diverse, safe and nutritious food for the food insecure population, with special emphasis given to children, women, and the elderly, including through specific interventions, such as supportive cooperative farms and household agriculture production; 3) strengthening the national capacity for food production and food system.

Nutrition



PEOPLE IN NEED

10.4 m

PEOPLE TARGETED

2.0m

REQUIREMENTS (US\$)

\$50m

PARTNERS

3

SECTOR OBJECTIVE 1

Support equitable access to quality preventive and curative nutrition services among under-five children and women of childbearing age (Supports Sector Objective 1)

SECTOR OBJECTIVE 2

Support equitable access to nutritious, safe and sufficient food and micronutrients for vulnerable groups: under-seven children, pregnant women, lactating mothers and TB patients (Supports Sector Objective 1)

Malnutrition among children and women of reproductive age is a nationwide problem. Young children and pregnant and lactating women particularly suffer from chronic malnutrition because their diets lack essential vitamins, minerals, proteins and fats. One-third of children aged 6-23 months do not receive the minimum acceptable diet, the combination of both the minimum diversity of foods and minimum number of feeds. This contributes to one in five children suffering from stunting (chronic malnutrition). Chronic food security, as well as poor water and sanitation along with inadequate hygiene practices are main contributors to chronic undernutrition in the country and expose them to health risks. Three per cent of under-five children (approximately 140,000) are expected to be affected by stunting of whom around 30,000 face an increased risk of death. In addition, high rates of iron deficiency anaemia at 29 per cent were recorded in children and at 31 per cent in women 15-49 years old in the

2012 National Nutrition Survey. Complementing nutrition-specific and nutrition sensitive interventions are necessary to break the inter-generational cycle of under-nutrition and address the underlying factors.

In 2020, the Nutrition Sector will aim at providing a comprehensive package of nutrition services to 2 million of the most vulnerable groups, namely children and women. Locally produced supplementary fortified food will be distributed through public institutions such as nurseries, kindergartens, orphanages and hospitals. Moreover, nutrition activities will target TB in-patients through hospitals and TB out-patients. Further scaling-up of nutrition-specific and nutrition-sensitive interventions, such as promotion of optimum infant and young children feeding practices, dietary and micronutrient supplements for young children, pregnant and lactating women and adolescent girls for prevention, detection and treatment of severe and moderate acute malnutrition will continue.

Water, Sanitation, and Hygiene



PEOPLE IN NEED

8.4 m

PEOPLE TARGETED

307 k

REQUIREMENTS (US\$)

\$7m

PARTNERS

7

SECTOR OBJECTIVE 1

Improve equitable access to at least basic and safely managed drinking water and sanitation services (Supports Sector Objective 2)

SECTOR OBJECTIVE 2

Raise awareness on public health risks related to water, sanitation and hygiene and promote adequate and equitable hygiene practices at households, education institutions and health facilities paying special attention to the needs of women and girls and those in vulnerable situations (Supports Sector Objective 2)

SECTOR OBJECTIVE 3

Strengthen health emergency preparedness and response capacity (Supports Sector Objective 1)

Around 33 per cent of the population, or an estimated 8.4 million people, do not have access to safely managed water source, rising to 50 per cent in rural areas. One in five people do not have access to even basic sanitation facilities. The biggest health concern is the unsafe disposal of human waste. Nine out of ten people in rural areas, and three out of ten in urban areas, live in environments carrying potentially deadly health risks due to unsafe disposal of human waste and the use of unimproved sanitation facilities. Further Analysis of 2017 DPRK MICS revealed that the stunting prevalence among those children living in households with access to unimproved water source is 60 per cent higher than of children living in households using an improved drinking water source. Under-five children using unimproved sanitation have diarrhea 36 per cent more often than those using improved sanitation.

WASH Sector partners will focus on improving access to at least basic and safely managed drinking water, sanitation and hygiene services. This includes the provision of safe drinking water through adequate water supply, such as gravity-fed water and solar-pumping systems for households, schools, kindergartens, nurseries and health facilities. Furthermore, interventions will focus on strengthening water source protection measures, water quality monitoring and surveillance and increasing household water connections, to ensure more people have access to safely managed drinking water services. The innovative approaches to sanitation will be applied to safely treat excreta. Hygiene promotion will focus on safe household handling and storage of water, hand washing with soap, hygienic use of toilets, and safe handling of food. Partners will pay special attention to the needs of people with disabilities, promotion of menstrual hygiene management and training of household doctors and school teachers on hygiene promotion.

Health



PEOPLE IN NEED

8.7 m

PEOPLE TARGETED

5.5 m

REQUIREMENTS (US\$)

\$21m

PARTNERS

7

SECTOR OBJECTIVE 1

Contribute to sustained and equitable universal health coverage with emphasis on essential health services (Supports Sector Objective 1)

SECTOR OBJECTIVE 2

Support enhanced quality health services to diagnose and treat communicable and non-communicable diseases, maternal and childhood diseases and services (Supports Sector Objective 1)

Delivery of quality health services in DPRK remains a challenge despite the extensive health infrastructure and health personnel. The underlying factors of need in the health sector are inadequate availability of essential medicines, laboratory consumables and diagnostics; medical, therapeutic and diagnostic equipment and supplies for critical and emergency health interventions including assistive devices for persons with disabilities; inconsistent supply of water and electricity; as well as limited professional competencies of the health care providers. This is particularly acute in remote and rural areas.

In 2020, Sector partners will work to support critical life-saving interventions including surgical and anesthesia care and strengthen the quality

of health services. A minimum integrated health service package for sexual and reproductive health, child health, disability and the elderly care and communicable and non-communicable diseases will be delivered. Interventions will include the provision of essential medicines, diagnostic equipment, consumables and supplies to provide services to the most vulnerable, namely, children, women, persons with disabilities and TB/MDR-TB patients. Treatment protocols and guidelines will be developed and disseminated to further strengthen the capacity of health care providers to ensure equitable access to quality health services, support to health care in remote, rural areas.

Achievements & Gaps

Achievements

PEOPLE TARGETED

3.8m

PEOPLE REACHED

2.5m (66%)

FUNDS RECEIVED (US\$)

\$32M (27%)

The number of beneficiaries reflects those activities with the widest reach and the number of targeted people receiving any level of assistance. However, in many cases the full package of required assistance per person was not provided due to insufficient funding. The total number of people reached is calculated to account for duplications in beneficiaries, particularly for under-five children and

pregnant and breastfeeding women who are targeted under all sectors. For 2018, indirect beneficiaries as well as direct beneficiaries were included in the Food Security Sector and were therefore reflected in the numbers. This has been amended for 2019, which largely accounts for the drop in targeted beneficiaries from 6 million in 2018 to 3.8 million in 2019.

CASES OF DIARRHOEA TREATED

 **420 k**

PEOPLE PROVIDED WITH NUTRITIOUS FOOD

 **750 k**

ACUTELY MALNOURISHED CHILDREN UNDER FIVE PROVIDED WITH TREATMENT

 **41 k**

PEOPLE PROVIDED WITH ACCESS TO SAFE DRINKING WATER

 **138 k**

Gaps



FOOD SECURITY & AGRIC.

695 k (49%)

people were not reached with food assistance or food production support.



NUTRITION

543 k (24%)

women and children did not receive nutritional support.



WASH

121k (38%)

people were not reached with water, sanitation and hygiene services.