Democratic People’s Republic of Korea

Executive summary

The political process, under the auspices of the six-party talks, is making slow progress and signs of some economic recovery are evident from the active reconstruction and upgrading of streets and buildings in the capital Pyongyang ahead of the 60th anniversary celebrations of the creation of the Democratic People’s Republic of Korea (DPRK) as a nation. At the same time, the humanitarian situation in the DPRK is increasingly fragile after reports of food gaps in the harvest records from 2007 and recurrent floods impacted negatively on food production. The World Food Programme is leading a major food aid programme from mid 2008 for at least 15 months, distributing 500,000 MT of food donated by USAID, in collaboration with Food and Agriculture Organization (FAO) and five American NGOs. The International Federation seeks to support the DPRK Red Cross in preventing the health deterioration of community-level populations during the period 2009-10. These anticipated health concerns, centred around an increase in malnutrition, can be addressed by the International Federation’s support to maintaining continued access to essential drugs and health care for vulnerable groups, particularly women and children. In addition, the International Federation disaster management programme will expand the DPRK Red Cross preparedness and response capacity at all levels during national disasters in the future.

The DPRK Red Cross works within a three year 2007-09 cooperation agreement strategy (CAS) agreement with ten national society partners and the International Federation. The CAS agreement is expected to be extended to 2012.

The focus of this 2009-10 plan is based on the key priorities of the DPRK Red Cross, and focuses on the expansion of disaster management and maintenance of the health and care programme, including community first aid at over 2,500 first aid stations across the entire country.

The target beneficiaries, over 8.25 million people, are community residents in the rural areas, with a particular focus on vulnerable groups.

Implementation of the disaster management and health programmes will prevent further loss of life during disaster situations and health emergencies. The programmes also promote community resilience and understanding of the Red Cross Red Crescent Movement.
Country context

The Democratic People's Republic of Korea Red Cross Society has over 60 years of operational history and is today an active social actor in the humanitarian field in the DPRK. It has received consistent support over the last decade from the International Federation, its Red Cross sister societies and their donor governments, as well as from the International Committee of Red Cross (ICRC). The national society has a particular mandate for national disaster management, as outlined in the national Red Cross Law of January 2007, and has proven its efficiency during floods in 2006 and 2007.

The DPRK as a nation is in a continued transition economically and socially while suffering setbacks after being hit by annual recurring national disasters thought to be partly linked to climate change phenomena. The country is engaged in a complex political process of denuclearisation under the auspices of the six-party talks. The food security situation in the country, unfortunately, has deteriorated further in 2008 with low agricultural output after a dry and cold winter, following serious floods in 2007, as well as in 2006.

At the same time, economic investments are slowly increasing. The streets of Pyongyang have been upgraded with fresh asphalt, renovations of buildings are ongoing, it is increasingly busy and more consumer goods are available in the shops. DPRK held its eleventh trade show in May 2008 hosting over 180 foreign businesses, making it the biggest trade show ever. Economic development will hopefully continue to gradually accelerate and lead to a longer-term improved economic outlook in line with the government's priority to improve the people's livelihood.

However, the need for humanitarian support through the Red Cross Red Crescent Movement and other international organizations is still present, particularly in the areas of food, health and disaster management. The World Food Organization (WHO), World Food Programme (WFP- as the United Nations’ resident coordinator office), United Nations Children's Fund (UNICEF), FAO, United Nations Population Fund (UNFPA) and a range of smaller international organizations have in-country presence. The World Health Organization (WHO), UNICEF and the International Federation are the largest organizations involved in health programmes. The humanitarian prospects in 2008 have been fragile, particularly with regards to food security. A shortage of fertilizer and lack of affordable food on the international market increased prices and taxes on imports of agricultural materials in 2008 added to an already difficult situation. A large-scale food relief operation carried out by the UN with US support commenced in mid-2008 following the outcome of a rapid needs assessment. The presence of resident US NGOs involved in food aid is expected to increase in 2008. The relations between the DPRK and the Republic of Korea (ROK) are being redefined following policy changes in the Republic of Korea with the new incoming conservative government.

It has always been and still is difficult for the international community to assess the extent of the humanitarian situation in the DPRK. While there is a wide range of reports about the DPRK, national security concerns contribute to restrictions in the availability of reliable country-based reports and information. Therefore, organizational presence in the country is one way to build trust and strategic direction for country programmes. The International Federation is the only international organization in the DPRK sharing offices in the host’s headquarters in the city centre of Pyongyang.

DPRK is very vulnerable to natural disasters, as was evident after the 2007 floods which killed 454 people, and left 170,000 people homeless and destitute. A major relief operation was undertaken by the Red Cross and the UN focusing on the provision of shelter, safe water and health. The Red Cross disaster management programme is aligned with climate change actions of mitigation and adaptation with a vision towards 2012; community-based disaster preparedness, disaster preparedness and response (including emergency water and sanitation), rehabilitation and recovery and reforestation. The
Red Cross builds strategic disaster preparedness stocks for 27,000 families in seven locations for immediate deployment in case of new disasters.

Health, including water and sanitation programmes, is a strategic Red Cross intervention to support vulnerable groups at the community level in the DPRK. Out of the estimated total population of 23.5 million, 6.8 million are under the age of 18 and approximately 2.1 million under the age of five. Sex disaggregated population data is not yet available in-country but a comprehensive population census will be carried out in the DPRK in October 2008, under the coordination of the UNFPA. A majority of the population (61 percent) live in urban areas, reflecting the traditional industrial base of the country. Gastrointestinal diseases caused by drinking unsafe water and consumption of ‘inedible’ food supplements are common causes of illnesses during summer. The previously functioning water supply system in the countryside has deteriorated over the last 30 years and recurrent flooding has caused further damage to the safe water supply in the country. The International Federation has supported the DPRK Red Cross to complete almost 280 water and sanitation installations in communities over the last ten years and their functionality is being reviewed after five years of operation. This initiative is now part of a global campaign launched by the International Federation in 2005, “The 10-Year Global Water and Sanitation Initiative (GWSI)” aimed to scale up existing water and sanitation capacities in the provision of sustainable water and sanitation as a Red Cross Red Crescent contribution to the Millennium Development goals. The global objective is to reduce by half those living without sustainable water and sanitation facilities by 2015.

Health improvements have been slowed down by the negative impact of floods, and child malnutrition remains a major concern. The national nutritional assessment to be conducted in mid-2008 will give new indications of the nutritional status of children in over ten provinces and general household food security vulnerability. The rates of illness increase significantly during the winter months, when temperatures can drop to as low as -30°C Celsius. Health institutions are severely affected by a lack of heating. As a result, voluntary bed occupancy rates frequently reportedly fall below 50 percent of institutional capacity. Prevalence of severe acute respiratory infections, including pneumonia, are as high as 9.8 percent among children less than 24 months, and are the main cause of morbidity and mortality. Tuberculosis represents a significant health concern of the overall population and is cited as a leading cause of death in the overall population claiming some 2,300 lives annually.1

An extensive basic health care structure is generally accessible to the population but insufficient supplies and inadequate distributions leave medical personnel in local health institutions, up till now, dependent on externally provided essential drugs to supplement traditional medicine to provide health care at the lowest level. Local production of essential drugs has started and one pharmaceutical factory has received international Good Manufacturing Practice (GMP) recognition and has been selected for a small part of the procurement that the International Federation is conducting. Hospitals in cities and larger towns receive limited quantities of drugs and instruments from government sources, and internationally assisted medical items supply 60-70 percent of the total need within primary health institutions. The Red Cross is in dialogue with the ministry of public health about a possible extension of drug distributions beyond 2009 due to a delay in the upgrading of national production. Whilst health training initiatives through the ministry of public health to update the knowledge of doctors throughout the country exist and are supported by international agencies led by the WHO, household doctors stationed in remote areas have very limited access to means in order to update their medical knowledge. The Red Cross training, which focuses on personnel at ri-level institutions supplied with drugs through the Red Cross channel, is instrumental in meeting this need. In addition, altogether 2,500 first aid posts run by the DPRK Red Cross provide first level additional support complementary to that given by health institutions run by the ministry of public health at the ri-level.

1 UNICEF DPRK (2006) Analysis of the situation of children and women in the DPRK
The DPRK Red Cross Society has an estimated one million members (including nearly 102,000 volunteers and 370,000 Red Cross Youth) with a network of ten provincial level branches (also referred to as chapters) and 200 city/county branches with volunteer bases.

The national society has a strong commitment to the implementation of the law on the DPRK Red Cross across the country at all levels. It will hold its four-yearly congress in late 2008 where a revised constitution will be adopted. Its vision is “a reliable humanitarian organization ready at any time and in any place to protect human life and dignity”.

The DPRK Red Cross’ core areas are aligned with the International Federation’s Global Agenda Goals: health care and social welfare services, disaster management, inter-Korean humanitarian services, and the promotion of humanitarian values.

The national society will continue to strengthen its organizational structure and national mandate and at the same time increase delivery of humanitarian services to vulnerable people. Altogether 50 community-based disaster preparedness committees have been trained and organized over the last years to consolidate the national society’s role in the field of disaster mitigation and preparedness. Specific mitigation activities based on vulnerability capacity assessments have been carried out. Another 50 communities are currently replicating the community-based disaster preparedness process with limited material support from the Red Cross.

15,000 volunteers have been trained in community-based disaster management and first aid and these numbers are going to be increased. Based on past experiences of disaster management activities, the national society has provided 25,000 volunteers with general disaster management trainings while 5,000 first aid volunteers receive refresher trainings each year. Red Cross relief items have been positioned in seven warehouses to support up to 27,000 homeless families in the event of major disasters.

The DPRK Red Cross works in close longstanding partnership with the International Federation and ten partner national societies (Australian Red Cross, British Red Cross, Canadian Red Cross, Danish Red Cross, Finnish Red Cross, German Red Cross, Netherlands Red Cross, Norwegian Red Cross, Spanish Red Cross and Swedish Red Cross), currently in a formal three-year cooperation agreement strategy (CAS) agreement signed in November 2006. The partners have agreed to work with mutual support and in a transparent manner. The partners currently provide the DPRK Red Cross, through the International Federation, senior technical support in the areas of disaster management (Danish Red Cross), reforestation (Norwegian Red Cross), water and sanitation (Swedish Red Cross) and organisational development (Swedish Red Cross). Additionally, the national society has a programme cooperation with the ICRC. The CAS agreement will be reviewed and is intended to be extended for another three years from 2010 to 2012.

The DPRK Red Cross actively participated in the Asia Pacific Regional Conference in Singapore 2006. The following activities have been taken for follow-up on the Singapore Conference Plan of Action.
Disaster management
Intensified global concerns and focus on the changing climate and its environmental impact has emerged as a priority issue to be addressed in the DPRK. The DPRK Red Cross is making all efforts to add to the nation's disaster response capacities and is actively taking part in the natural disaster response coordination mechanism and continuously focusing on local community needs.

Health
The DPRK Red Cross and the International Federation country office, in close cooperation with the ministry of public health and international agencies working in the DPRK like WHO, UNICEF and the health related European Union Programme Support units, endeavour to strengthen community-based health activities addressing newly emerging and recurrent endemics, including SARS, avian influenza, tuberculosis, malaria, acute respiratory infections, diarrhoea, etc. The Red Cross services are as widely channelled as possible through Red Cross volunteer networks conducting health promotion and public awareness campaigns to contribute to the increase of the capacities and roles of the communities.

Other
The DPRK Red Cross also participated in the International Federation's General Assembly and International Conference in 2007, the latter accompanied by representatives of the DPRK government. Of the various resolutions taken, the area of environment and disaster management has become an even more urgent priority for the national society. It formally made a pledge during the International Conference to further the work on international disaster response law (IDRL) in the country. After the conference, the national society discussed at its board meeting how to make progress on the IDRL initiative locally. The results of the conference concerning the IDRL have already been shared with the government and the work to establish an IDRL process in the DPRK will continue with the newly elected governing board, to be formally confirmed during the national assembly in late 2008.

Secretariat supported programmes in 2009-2010

Logical frameworks are available on FedNet or upon request.

Disaster Management

a) The purpose and components of the programme

**Programme purpose - Global Agenda Goal 1**
Reduce the number of deaths, injuries and impact from disasters.

The total disaster management programme budget for 2009 is CHF 1,259,304 and for 2010 is CHF 955,785.

<table>
<thead>
<tr>
<th>Programme component 1: Disaster management planning and organisational preparedness of the DPRK Red Cross Society</th>
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<tbody>
<tr>
<td><strong>Component outcome 1:</strong> Improved ability of the DPRK Red Cross to predict and plan for disasters to mitigate their impact on vulnerable communities, and respond to and effectively cope with their consequences.</td>
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<tr>
<td><strong>Component outcome 2:</strong> Improved capacity in skilled human resources, financial and material capacity for effective disaster management.</td>
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<th>Programme component 2: Community preparedness/disaster risk reduction</th>
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<tr>
<td><strong>Component outcome 1:</strong> Increased self-reliance of individuals and communities in the DPRK to reduce vulnerabilities to disasters and so improve livelihood.</td>
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2 FedNet is an intranet and available to Movement members only.
Effective disaster management and environmental protection is a national priority in the DPRK and the DPRK Red Cross, as an auxiliary to the government disaster management coordination body, is fulfilling its humanitarian mandate by maintaining and scaling up its disaster preparedness and response as one of its core activities. Over the last years, the community-based disaster preparedness programme has been successfully completed in 50 ri villages, and is being replicated in 50 additional ri villages with the main investment from the community itself. The programme will rely upon the participation of 20 full time staff and 500 part time staff (volunteers) at the headquarters, ten provincial branches, four city branches and extensive community networks. The programme will work through clear definition of roles and responsibilities in the field of disaster management, complementary to the government. The programme will assist up to 135,000 local community people in case of disasters with trained Red Cross volunteers and relief, including stocks pre-positioned at seven strategic locations across the country (27,000 family packages of emergency shelter, quilts and relief items to be pre-positioned by end of 2009). Some 4,000 community-based volunteers will receive advanced disaster management trainings and 2,800 basic disaster management trainings to carry out community disaster preparedness, risk reduction and response activities.

Red Cross volunteers will plant approximately 2.5 million tree seedlings during the period of the national tree-planting season of spring and autumn in three flood prone provinces while taking care of the newly-planted trees to increase the rate of survival.

The awareness of road safety and first aid skills will be increased through the training of 400 traffic controllers and 400 driver road safety workshops combined with first aid training. Some 80 school children will actively conduct road safety awareness performances four times in one province, targeting 1,000 school children. Two rescue teams based in Pyongyang city and one water safety team each in four coastal beach areas will be operational to promote water safety measures and save lives of people at risk of drowning during the flood and swimming seasons.

There are several cross-cutting Red Cross principles and values activities planned into the disaster management programme. During the community-based disaster preparedness process, dissemination of the Fundamental Principles is an integral part of the training of volunteers and community stakeholders. Furthermore the most vulnerable individuals and groups in each community are identified during the vulnerability capacity assessment process and will then get special attention during disaster response activities, as well as during other times. For example, the elderly and disabled may need help to gather firewood, obtain food and to get Red Cross volunteers support to meet their special needs.

The national society’s disaster management programme, with its broad scope including reforestation, is being reviewed during the latter part of 2008, as a follow-up of the Strategic Review carried out in 2005. The 2009-2010 plans will be adapted based on the recommendations from this review.

b) Profile of target beneficiaries
Many thousands of vulnerable people, especially women, children and the elderly at the community level, are hit by disasters like flash floods and mountain slides. In recent years, serious flooding occurred in both 2006 and 2007 when the Red Cross and the international community organized internationally supported relief operations.

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3 The lowest administrative/community unit in the DPRK is referred to as a “ri”. 
c) Potential risks and challenges
Continuous commitment, good coordination and cooperation between different stakeholders at national, regional and international levels will ensure the smooth implementation of the programme. However, the annual flooding season from July to September, with further risks of typhoons in October, may influence the implementation of the planned activities. There will be an increased emphasis on improved external visualised impact of the community-based disaster preparedness programme.

Health and Care

a) The purpose and components of the programme

<table>
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<tr>
<th>Programme purpose – Global Agenda Goal 2</th>
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<tr>
<td>Reduce the number of deaths, illnesses and impact from diseases and public health emergencies</td>
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The total health and care programme budget for 2009 is CHF 8,372,436 and for 2010 is CHF 8,381,488.

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<thead>
<tr>
<th>Programme component 1 : Improvement of medical services</th>
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<tr>
<td>Component outcome 1: Community people (8.25 million people) maintain their health and access to basic medical services through the minimum provision of essential drugs (24 basic items).</td>
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<tr>
<td>Component outcome 2: Community health professionals (household doctors) have increased their skills and knowledge on rational usage of essential medicines leading to more effective health service provision.</td>
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<tr>
<th>Programme component 2 : Community-based first aid</th>
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<tr>
<td>Component outcome 1: Communities are able to cope with and prevent deterioration of health and accidents through increased community-based health and first aid in 2,500 first aid posts around the country.</td>
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<th>Programme component 3 : Public health in emergencies</th>
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<tr>
<td>Component outcome 1: Increased capacity of DPRK Red Cross Society in public health in emergencies for effective life saving service delivery in times of disaster.</td>
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<th>Programme component 4 : Voluntary non-remunerated blood donation</th>
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<tr>
<td>Component outcome 1: Volunteers’ network of DPRK Red Cross Society developed and utilized for the promotion of voluntary non-remunerated blood donation.</td>
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<th>Programme component 5 : Health Promotion</th>
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<tr>
<td>Component outcome 1: People’s awareness, knowledge and skills on prevention and control of the most common diseases is increased through the interventions by DPRK Red Cross Society health promotion.</td>
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The largest part of the International Federation support to DPRK Red Cross programmes is in the health sector. The activities include provision of safe drinking water and sanitary systems at village level and reliable access to basic health care for the communities living in the country’s disaster prone and remote areas through provision of essential medical supplies. This component is critically important with the current food insecurity in the DPRK likely to cause increased levels of malnutrition.

The drug distribution component is a continuation of a longer health intervention supported by the Red Cross, consisting of the provision of basic medicines (24 items), medical equipment and relevant training on a quarterly basis for the primary and first level referral health facilities in 56 counties and cities of the DPRK, in North Phyongan, South Phyongan, South Hamgyong and North Hwanghae Provinces, with an estimated catchment population of 8.25 million people. It includes the 22 counties which are most disaster prone and vulnerable due to the previous disasters vis-à-vis severe flooding in 2006 and 2007 and the ensuing food crisis.
Community populations also benefit from other programme components such as community-based first aid, which supports 2,500 first aid stations across the ten provinces, as well as activities linked with emergency health, voluntary non-remunerated blood donation and health promotion.

The project is multi-donor funded with a substantial group of partners, such as the Australian Red Cross, Danish Red Cross, Norwegian Red Cross, Finnish Red Cross, Swedish Red Cross and their respective governments, and looks for financial contributions or in-kind donations according to the agreed specifications for 2009 – 2010, as part of the continuing support to protect the health of vulnerable communities living in disaster prone and distant areas of Red Cross supported provinces.

**New development:** DPRK Red Cross Society is now participating in the national coordination mechanism for obtaining grants from the “Global Fund to fight AIDS, tuberculosis and malaria”. The application for the country’s anti-malaria project is in the process of getting final approval. The DPRK Red Cross Society will play a key role in distributing mosquito bed-nets and in malaria prevention promotion campaigns, supported by the International Federation.

**b) Profile of target beneficiaries (health – components 1-5)**

The health and care programme for 2009-2010 targets support to 8.25 million vulnerable community people in 56 cities and counties of South Phyongan, North Phyongan, South Hamgyong and North Hwanghae provinces. The ri-level communities are still very dependent on the health services provided by the DPRK Red Cross. The direct beneficiaries are community residents comprising children, women and men, who are vulnerable to communicable diseases during very cold winters and hot and humid summers, but who have very limited access to basic sources of medicine. Until there are alternative national sources of essential drugs, the health status of the population would rapidly deteriorate without a continued reliable supply of essential drugs to primary and referral health institutions.

The activities planned within this programme integrate aspects of the Red Cross principles and values. During 2008-2010, with increased rates of malnutrition and related illnesses, the Red Cross is taking extraordinary measures to secure timely and reliable supplies of essential drugs, particularly to protect vulnerable groups. The real impact of Red Cross customised composition of the essential drugs to the DPRK context may have been subject to underestimation because of a lack of statistical data to support the significance of this basic intervention to support women and children at the lowest level health clinics. Areas of concern are that some women have inadequate nutrition despite receiving information about what to eat, and they lack the required medicines during pregnancy or delivery which can prevent complications. In this respect, the Red Cross basic medical kits contain micro-nutrient supplements - like iron and folic acid. To some extent, the antibiotics provided, i.e. cotrimoxazole and amoxiel, are used to treat urinary tract infections which are common during pregnancy. Although the Red Cross supply of drugs does not cover all needs, it covers an estimated 70 percent of the total need - as long as a reliable supply is maintained. Newborn care is also the responsibility of household doctors and midwives at all levels. The essential medicines and basic equipment provided helps to ensure that newborn care is adequate. Through support of the International Federation and cooperation agreement strategy partners, the DPRK Red Cross distributes supplies directly at county levels, which reduces the distribution time by allowing direct access to all storing and distribution and utilization levels, which then enables the Red Cross to monitor distribution and consumption regularly. The Red Cross
county branches are responsible for distribution and dedicated national society field monitors generate monthly monitoring reports which are validated by the International Federation’s health coordinator and the DPRK Red Cross health managers.

c) Potential risks and challenges
A number of factors may influence the smooth implementation of the health and care programme. Some may be controllable by the Red Cross and others not. The potential risks and challenges in the implementation of 2009-2010 health and care programme are:

- Outbreak of disease exceeding the available resources;
- Delay of confirmation of partner support causing an excessively long procurement process;
- Recurring disasters may shift human and material resources from the annual plan to disaster relief activities;
- Good cooperation and support, on which programme success depends, from the ministry of public health, including discussions on the long term phasing-in and phasing-out of international support to drug distribution in the DPRK.

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<tr>
<th>Programme component 6 : Water and sanitation</th>
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<tr>
<td><strong>Component outcome 1:</strong> Access to safe water and sanitation services improved in the target communities preventing outbreak of water born illnesses.</td>
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<tr>
<td><strong>Component outcome 2:</strong> Access to safe water and sanitation and other services improved in a disaster affected area minimising mortality and morbidity.</td>
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Water and sanitation systems for 15 new communities (reaching approximately 40,000 people) selected in June 2008 will be implemented and completed by December 2009. Selection of another 20 new communities (reaching approximately 50,000 people) will start in June 2009 to be implemented in the same programme cycle period (by the end of 2010). At that point, the total number of Red Cross installations in the DPRK will amount to 300 for an estimated 500,000 people. From 2010 onwards, the number of planned installations will remain at a 20 per 18 months implementation cycle. Other programme components such as organisational development and disaster management will be included in the training of the communities for development of institutional capacity and disaster preparedness to generate a maximum impact of Red Cross interventions.

In parallel with the implementation of new project communities, 36 projects which were completed in 2003 will be reviewed, and depending on the outcome, lessons learned from those which functioned well and those needing repairs or upgrading, etc, will be shared and used in decision making in the future. Some systems are expected to have been affected by flooding over the last two years, but overall, this insight will be conducive to better future programme planning and ensure long term sustainability and impact of the programme.

100 Red Cross volunteers will be trained and provided with technical knowledge and skills to operate the emergency water and sanitation response equipment introduced in the DPRK in 2008, in order to provide up to 10,000 people with clean safe water and sanitation in case of flooding or other disasters.

b) Profile of target beneficiaries (water and sanitation)
The programme aims at reaching 90,000 people vulnerable to unsafe water and inadequate sanitation residing in the rural and semi-rural areas of North and South Phyongan provinces and South Hamgyong province. The target beneficiaries, mainly rural farmers and factory or office workers in city and county townships, will have access to clean and safe water, sanitation facilities as well as basic hygiene promotion for the prevention of waterborne and vector-borne diseases. Some schools and health institutions in the targeted communities may be included in the programme as identified in the needs assessment. The selection and design will be carried out by using the vulnerability capacity assessment tool with the participation of all the stakeholders (the Red Cross, the community, local authorities, etc.). The programme cycle is 18 months, starting with assessments, design of installations and the procurement of material and equipment. The programme will be implemented by the communities themselves, with
technical support and monitoring by the Red Cross, and water safety confirmation by the anti-epidemic centres. In order to enhance the software component and to encourage community participation in the programme, the participatory hygiene and sanitation transformation methodology and tool has been introduced in 2008 in the programme.

This programme also addresses the Red Cross principles and values by targeting women and children, bringing them a healthier and easier life. At the village level, the role of fetching water as part of the household work is normally the responsibilities of women and children. Providing safe water to the household improves community health and prevents the spread of waterborne diseases and also saves time for women. The Red Cross gets feedback that “the new water supply is the women’s servant” and allows women to engage more in family life.

c) Potential risks and challenges (water and sanitation)
The programme is very dependent on timely financial contributions which allow for efficient and professional procurement processes. The construction of systems is limited to two short periods in the year due to climate and agricultural cycles and has to be matched with the arrival of high quality materials. Successful implementation is reliant on sufficient qualified national and international staff and their presence to support the communities. Water quality assurances is a priority area in 2009-2010 and availability of suitable trainers and good collaboration with the government authorities is critically important.

Organisational Development

a) The purpose and components of the programme

<table>
<thead>
<tr>
<th>Programme purpose – Global Agenda Goal 3</th>
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<tbody>
<tr>
<td>Increase local community, civil society and Red Cross/Red Crescent capacity to address the most urgent situations of vulnerability.</td>
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The total organizational development programme budget for 2009 is CHF 293,068 and 2010 is CHF 281,891.

<table>
<thead>
<tr>
<th>Programme component 1 DPRK Red Cross branch and headquarters capacity is increased for scaled up service delivery through strengthened leadership, systems and resources.</th>
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<tr>
<td>Component outcome 1: The DPRK Red Cross Society’s integrity has been further assured.</td>
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<td>Component outcome 2: The revised statutes and strategies have been implemented at all levels.</td>
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<tr>
<td>Component outcome 3: Branch leaders are trained and deliver services to vulnerable people.</td>
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<tr>
<td>Component outcome 4: Branches are better equipped with effective administration, training and programme management for better service delivery.</td>
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<tr>
<td>Component outcome 5: Volunteers numbers are increased and better managed.</td>
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<tr>
<th>Programme component 2 Further strengthening community-based services through integrated community development project in four communities.</th>
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<tr>
<td>Component outcome 1: Vulnerable people are more involved as Red Cross volunteers to address</td>
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Component outcome 2: Community people participate in a number of activities; health and care, disaster preparedness.

Component outcome 3: Number of Red Cross volunteers is increased as a result of the strengthened capacity of branches.

Programme component 3 Cooperation and collaboration with stakeholders are improved

Component outcome 1: DPRK Red Cross Society enjoys improved partnership relations with local partners.

Component outcome 2: Public awareness about Red Cross values and knowledge is increased.

The DPRK Red Cross Society is concentrating its efforts on further strengthening the capacity of the headquarters and provincial and county branches through improved leadership, systems and resources. Its four-yearly national assembly is scheduled to be held in late 2008 with some expected changes in the central committee (the governing board). Federation support to the organisational development process is enhanced by the Asia Pacific organisational development advisor and a technical consultant seconded by the Swedish Red Cross. The integrity of the DPRK Red Cross Society will further be assured through the revised constitution (to be approved by the International Federation/ICRC joint statutes review board) and the national society development plan, which will be adopted at the national congress in 2008. In order to ensure thorough implementation of the revised constitution and the national society development plan, orientation workshops will be conducted for 50 branch staff and executive governance leaders at the branch level. The branches will have improved capacity for training, administration and volunteer management through skills training of 150 volunteer leaders and the provision of training materials and equipment. At least 1,000 active Red Cross volunteers will be recognized and best practices of volunteer management will be shared with special focus on the Red Cross Youth. By the end of 2010, branches will have 10,000 new volunteers trained and actively engaged in programmes as the result of the improved volunteer management capacity of ten target branches.

The DPRK Red Cross Society will enjoy improved partnership with its partners for increased collaboration and cooperation for the benefit of vulnerable people, as an auxiliary to the government. Public awareness about Red Cross knowledge and values will be further promoted through improved media relations and Red Cross publications such as 2,000 Red Cross hand books and 1,000 Red Cross Red Crescent Movement introduction booklets. Public knowledge nationally of the Red Cross will be promoted through production of visibility materials.

b) Profile of target beneficiaries

The DPRK Red Cross Society seeks to engage in service delivery to vulnerable groups through piloting community development projects in four communities. Vulnerable people will be better positioned to participate in community-based activities through the provision of resilience mechanisms, which include the provision of rice mills and improved public hygiene services. 60 beneficiaries will become volunteers to be trained and participate in different volunteer activities, which include health and hygiene promotion, disaster management and other social welfare services, in tandem with the improved branch capacity to run community-based programmes.

Red Cross principles and values are addressed in this programme by inviting vulnerable individuals and groups to participate as Red Cross volunteers and to be given Red Cross training and skills training. They will participate in community activities according to their ability and also benefit from proceeds from project surplus and be able to further enhance Red Cross knowledge at the grass roots level. This aspect will be particularly studied during the pilot phase for successful replication.

c) Potential risks and challenges

Measuring and describing long term impact of organisational development interventions and training activities is a challenge, just the same as for national societies in other parts of the world. This area will be given increased attention during 2009-2010 within the unique context of the DPRK. Some of the national society activities planned in 2008 have been delayed as they are dependent on policy decisions to be taken during the upcoming national congress, and will be implemented in 2009.
integrated community development project will need a consolidated DPRK Red Cross integrated management structure for effective programme implementation and monitoring. This may take some time to harmonise.

**Principles and Values**

| Programme purpose – Global Agenda Goal 4 | Promote respect for diversity and human dignity, and reduce intolerance, discrimination and social exclusion. |

The principles and values programme is integrated as a cross-cutting Red Cross implementation theme and modality over the various technical programmes, and only a few examples are given under each programme summary above. The ideal of the Red Cross Red Crescent is inspired by compassion, altruism, humanity and an imperative to alleviate the suffering of all, on the basis of urgency, objective needs and vulnerability, irrespective of sex, age, ethnic origin or other subjective criteria. One difference, among the 186 national societies globally, is whether the local national society can, as an independent auxiliary to the government, deliver humanitarian services to people who, for instance, have violated the law. In some countries this is one of the Red Cross programmes, and in others it is not. In the DPRK, the DPRK Red Cross would be supported by the International Federation and the International Committee of the Red Cross to expand their services in such fields, if requested. The DPRK Red Cross works in close cooperation with the ministry of defence and other government authorities and, depending on the needs, its role will continue to evolve in the future.

**Role of the secretariat**

**a) Technical programme support**

While the DPRK Red Cross Society has a solid reputation of efficient programme implementation, the DPRK programmes are also supported by the International Federation secretariat at various levels: the country office in the DPRK with a CAS coordinator supporting from Geneva; the East Asia regional office in Beijing; the Asia Pacific zone office (organisational development, finance, planning, monitoring, evaluation and reporting (PMER) and logistics); and technical support regarding legal affairs, audit, medical logistics, ECHO grant coordination, and water and sanitation from the secretariat in Geneva.

The in-country office of the International Federation supporting the DPRK Red Cross consists of the following international delegate positions: head of country office, programme coordinator and finance delegate (which are permanent positions), health coordinator, water and sanitation delegate, emergency water and sanitation delegate, and disaster management and logistics delegate. The International Federation office also comprises 13 professional national staff seconded by the national society: finance officer, logistics officer, disaster management officer, health officer, health assistant, water and sanitation officer, reporting officer, fleet manager, office assistant and four drivers.

In addition, as mentioned above, within the CAS agreement, partner national societies provide long term peer support to programme planning, implementation and reviews in the areas of disaster management, reforestation, organisational development, community-based first aid, tracing and water and sanitation.

**b) Partnership development and coordination**

The DPRK Red Cross has a formal three year CAS agreement with the International Federation and ten of its partner national societies. The ICRC provides cooperation support to the DPRK Red Cross in addition to the operational activities in the DPRK. The current agreement was signed in November 2006 and lasts until the end of 2009. A review of the current CAS process will take place in late 2008 with an objective to extend the agreement until 2012. The DPRK Red Cross has close national partnerships with various government ministries such as the ministry of public health, ministry of land and environment protection, ministry of defence, ministry of public security as well as with other international organizations in the DPRK, particularly WHO and UNICEF.
c) Representation and Advocacy
The International Federation supports the DPRK Red Cross regarding international representation in the DPRK as well as abroad. The International Federation country office participates in all international UN initiated events such as World Water Day, Child Health Day, World Health Day and International Environment Day. In addition, the International Federation and the DPRK Red Cross co-organise events like the World Red Cross Red Crescent Day and World Blood Donor Day for the international community, and programme related briefings for DPRK ministries, international organizations and foreign missions. The International Federation also regularly receives visiting international missions for programme discussions and briefings as well as hosting visiting delegations from partner national societies. A particular focus during 2009-10 will be national advocacy for the Red Cross Law and the revised statutes (2008) of the DPRK Red Cross.

d) Other areas
The DPRK Red Cross has seconded some of their key staff for international relief work to the International Federation. This right and obligation is included in the national Red Cross Law and will continue in the years to follow. The DPRK Red Cross has also been very active in the governance of the International Federation and contributed substantially to the strategic development of the global organization.

Promoting gender equity and diversity
Gender equity in the DPRK is officially fully implemented and the government has ratified all relevant UN conventions. In practise, cultural and traditional practices make the reality more complex. Women with children and elderly women are primary beneficiaries of International Federation supported programmes in the DPRK – such as health and water and sanitation - although formal sex disaggregated data is outdated (the last from UNICEF in 2004). Formal national census data will be available in late 2008 according to UNFPA. Many of the most efficient cooperative leaders who implement Red Cross supported programmes are women.

The DPRK Red Cross has a solid team of women managers and staff, while a better gender balance is still to be achieved at senior management and governance levels. The International Federation country office has in 2008 a woman head of country office for the first time, while a better gender balance needs to be implemented among the other positions. 50 percent of the International Federation national professional staff are women.

The DPRK Red Cross maps out vulnerable groups in the community-based disaster preparedness programme planning process and vulnerable people at the community level are expected to receive training and become more involved as Red Cross volunteers in the pilot Integrated Community Development Programme.

Quality, accountability and learning
Quality and accountability of the International Federation supported programmes in the DPRK are verified in multiple and comprehensive ways, partly due to the complex political environment combined with relative lack of access to information and data. The International Federation supported programmes in the DPRK are probably the most externally reviewed international programmes in the International Federation as a whole. Learning from experience through the programme cycle has become an integrated quality assurance activity. Programme plans are mapped out using Gantt charts with detailed budgets. Each programme manager is closely monitoring income and expenditure, implementation and changes to the plan for updated regular reporting.

The finance unit of the DPRK country office ensures full compliance with the International Federation finance and procurement regulations, including international training of finance staff. The International
Federation conducts annual internal and external audits of the DPRK programmes including comprehensive management reviews.

All medical supplies, materials for the water and sanitation programme, as well as the components of the disaster preparedness stocks, are procured after an international tender process. The International Federation logistics department is recognized as a humanitarian procurement centre by ECHO. All supplies undergo independent quality inspection before shipment to the DPRK.

The accountability of the large drug distribution programme is assumed by the DPRK Red Cross, under the supervision and monitoring of the International Federation. The national society manages the logistics pipeline in-country with its own trucks and staff. The International Federation systemises quantitative data collected by a team of health monitors, who visit and follow up on the support to all International Federation supported health institutions over an 18 month period. Updated qualitative data is provided by the ministry of public health twice a year. Efforts will be made in 2009–10 to further express impact of the community-based disaster preparedness programmes, post-2007 floods as well as measure impact on behavioural changes of training activities.

The water and sanitation installations are reviewed after four-five years of functionality, to assess their status for long term sustainability. Lessons learnt are integrated into programme planning not only from still fully functional installations, but from those needing some upgrading, expansions, maintenance and repair. Participatory hygiene and sanitation transformation methodology for improved hygiene awareness training has been introduced for the national headquarters staff and is currently being replicated at community level.

Click here for a map of DPRK

### How we work

The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".

<table>
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<th>Global Agenda Goals:</th>
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<tr>
<td>• Reduce the numbers of deaths, injuries and impact from disasters.</td>
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<tr>
<td>• Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.</td>
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<tr>
<td>• Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.</td>
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<tr>
<td>• Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.</td>
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### Contact information

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