

# Mid-Year report



International Federation  
of Red Cross and Red Crescent Societies

## Democratic People's Republic of Korea

Plan and budget no. MAAKP002

30 June 2010

This report covers the period  
1 January to 30 June 2010



Construction of a riverbank reinforcement, to mitigate the impact of possible flooding in Chusang ri, Hamju county, South Hamgyong province Photo: Won Jong Chol, DPRK Red Cross/South Hamgyong branch

## In brief

**Programmes' outcome:** The programmes supported by the international Federation of the Red Cross and Red Crescent Societies (IFRC) in the Democratic People's Republic of Korea (DPRK) are all streamlined with the Strategic Aims of *Strategy 2020*. The disaster management, health and care, including water and sanitation, and organizational development programmes all comply with respectively Strategic Aims 1, 2 and 3:

**Strategic Aim 1: Save lives, protect livelihoods, and strengthen recovery from disasters**

- Effective preparedness capacities for appropriate and timely response to disasters and crises
- Reduced deaths, losses, damage and other detrimental consequences of disasters and crises

**Strategic Aim 2: Enable healthy and safe living**

- Better personal and community health, and more inclusive public health systems
- Reduced exposure and vulnerability to natural and man-made hazards
- Greater public adoption of environmentally sustainable living

**Strategic Aim 3: Promote social inclusion and a culture of non-violence and peace**

- Greater public support for the Fundamental Principles and reduced stigma and discrimination

**Programmes' summary:** The IFRC supports the DPRK Red Cross in four areas: health and care, water and sanitation, disaster management, and organizational development. The provision of essential drugs to 2,030 clinics nationwide remains the largest component of Federation support. Discussions were initiated in this reporting period with the ministry of public health (MoPH) to transfer this responsibility back to the government. The community-based health and first aid (CBHFA) programme is implemented incrementally, adapting the different modules to the Korean health system, to ensure maximum impact. The construction of an additional 19 water and sanitation systems will bring the total number of people supplied with clean drinking water over the past ten years to approximately 610,000.

The disaster management programme has integrated all community-based components such as contingency planning, disaster preparedness, mitigation, and tree planting under the umbrella of community disaster risk reduction (CDRR). At the same time, road safety is becoming increasingly important with the rapidly growing number of cars in the DPRK.

The application of vulnerability and capacity assessments (VCAs) as a community-based planning tool for all programmes is transferred to the organizational development programme, as a means to further strengthen branches as well as the management of volunteers.

**Financial situation:** The total budget for 2010 was revised up from CHF 10,060,583 (USD 9.46 million or EUR 7.53 million) to CHF 10,219,580 (USD 9.48 million or EUR 7.54 million), and is 57 per cent covered. Expenditure over income received from January to June 2010 is 50 per cent.

The budget revision is due to an increase in both health and care and disaster management budgets.

[Click here to go directly to the attached financial report.](#)

**No. of people reached:** Up to 8.25 million target beneficiaries are community residents in rural areas, with focus on the most vulnerable groups.

**Our partners:** The DPRK Red Cross works in the framework of a three-year cooperation agreement strategy (CAS) with nine partner national societies, including the Australian 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. The current CAS agreement up to 2012 was signed in October 2009.

The DPRK country plan and budget is supported by Australian Red Cross/Australian government, Danish Red Cross/Danish government, Finnish Red Cross/ Finnish government, German Red Cross/German government, Japanese Red Cross, Norwegian Red Cross/Norwegian government, Spanish Red Cross and Swedish Red Cross/Swedish government.

In addition, funds received from the European Commission's Humanitarian Aid Office (DG ECHO) and Europe Aid supports the disaster management programme in making 31 communities safer from natural disasters through the Danish Red Cross; the water and sanitation programme provides ten communities with proper water and sanitation systems through the Swedish Red Cross; and the health and care programme will be piloting community-based health and first aid in two counties, and rehabilitate two county hospitals and 42 *ri* clinics through the Finnish Red Cross.

All DPRK Red Cross programmes work at the community level: first aid posts depend greatly on the *ri* clinics, while corporative farms and *ri* offices (local government) are the main players in the community disaster management committees as well as the committees set up for the design, construction and maintenance of the water and sanitation schemes. At the county, provincial and national levels, the ministries of public health, city management, people's security, and land and environmental protection, contribute with technical advice and material support to the Red Cross programmes. Collaboration with UN agencies consists of the exchange of information as well as the agreement on the contents of the medical kits, the role division in disaster response situations, and training initiatives in the different areas. The Red Cross also benefits from the specialized expertise from non-governmental organizations active in DPRK including the European Union project support (EUPS) units.

IFRC, on behalf of the Democratic People's Republic of Korea Red Cross Society, would like to thank all partners and donors for their support

## Context

While winter was not extremely cold this year, it lasted longer than other years, hampering the digging work in the cold and frozen grounds for the community people. This caused the rice-planting season to be postponed up to mid-May, giving more time to the communities to finalize the preparation work for both the water and sanitation systems as well as the disaster mitigation works.

Social tensions were high in the beginning of the year due to the uncertainty caused by the devaluation of the Korean currency in December 2009. Many shops remained closed up to February, waiting for the government to fix the prices. While the government promised no rise in prices on basic products, a visit to the market

reflected a different reality. Still, there is no evidence of malnutrition, showing sufficient stocks of rice and other food products provided by the government to the population in monthly rations.

The devaluation of the Korean currency also had a significant impact on all procurements made in the first half of 2010. The delivery of many items was seriously delayed, including the food processing machines for the integrated development project, and the construction materials for the water sources, pump houses, and storage tanks for the water and sanitation systems.

The political situation was relatively quiet until March 2010, when a South Korean naval ship was destroyed by an unidentified explosive, killing 46 soldiers. An independent investigation indicated that the explosive was a North Korean torpedo. The rhetoric following the official publication of the investigation report was comparable to the situation in 2009, when the DPRK decided to test its nuclear weapons.

## Progress towards outcomes

The disaster management department has been focusing on the decentralization of its programme implementation to provincial and county Red Cross branches, as well as the communities. By means of the vulnerability and capacities assessment, facilitated by provincial and county Red Cross branches, the community people themselves identify the most pressing needs and the most effective ways to reduce the disaster risks in their community. Technical experts from appropriate government agencies, together with headquarter staff from both the IFRC and the DPRK Red Cross, validate the community's disaster risk reduction plan before its approval. Monitoring of the ongoing construction of mitigation interventions, as part of the community's plan, is also done by the provincial and county branches, who report to the headquarters on a regular basis.

Tree planting was integrated into the CDRR approach, as an additional mitigation intervention, with a longer-term impact. Community people are well aware of the risk of deforestation and inappropriate land use. Therefore, community-based tree planting should go hand in hand with sustainable food production and overall improvement of livelihoods. Since January 2010, the integrated community development project (ICDP) has been transferred from the organizational development department to disaster management. ICDP supports communities with overall livelihood-improving initiatives such as the provision of food processing machines, as well as the construction and/or rehabilitation of kindergartens and public bathrooms.

Preparedness for disaster response is further strengthened through contingency planning exercises and the rehabilitation of the seven Red Cross warehouses spread all over DPRK, where a total of 27,000 family kits have been pre-positioned for disaster response situations.

The equipment and training of the road and water safety teams is ongoing, further strengthening the prevention of traffic- and water-related accidents.

## Disaster management

### Outcomes

#### **Programme component 1: Disaster management planning**

**Outcome:** Improve ability to predict and plan for disasters, and to mitigate their impact on vulnerable communities

#### **Programme component 2: Organizational preparedness**

**Outcome:** Developing human, material and financial resources for effective disaster management

#### **Programme component 3: Community preparedness**

**Outcome:** Improved self-reliance of individuals and communities to reduce their vulnerabilities to public health emergencies and disasters

#### **Programme component 4: Disaster response**

**Outcome:** Improved disaster assistance to meet the needs of people affected by disasters

#### **Programme component 5: Recovery**

**Outcome:** Restore or improve livelihoods of disaster victims to pre-disaster conditions, and reduce future disasters

## Achievements

### Community disaster risk reduction (CDRR)

The selection of villages to participate in this year's CDRR project was made by means of the VCA, conducted in July 2009. Out of 45 villages, 31 were selected as the most disaster-prone, with the highest levels of vulnerability, combined with a pro-active attitude of the community leaders.

Late 2009, the 31 communities received training on how to conduct VCAs themselves, to discuss the most urgent needs within the community and feasible ways to address them. These VCAs were co-facilitated by the provincial and county Red Cross branch staff, to ensure all different social groups within the community were represented, such as the women's, farmer's and youth union, corporative farm, local government, clinic, school, nursery and kindergarten.



Focus group discussion with different community representatives in *Inda ri*, Yonggwang county, South Hamgyong province, as part of the VCA workshop. Photo: *Rajja Andersen, IFRC/DPRK*

Timeline	
Jul 2009	VCA to select most vulnerable communities
Sep-Oct 2009	Train provincial and county branches as well as community leaders on how to conduct VCA
Oct-Nov 2009	VCA to prepare disaster risk reduction plan
Jan-Feb 2010	Discuss the outcomes of the VCAs in advanced VCA workshops
Jan-Feb 2010	Technical validation visits of all proposed mitigation interventions
Mar 2010	Delivery of construction materials
Apr 2010	Construction of mitigation works

The outcome of the VCAs in all communities was at least one and sometimes multiple structural interventions to mitigate yearly returning floods and mudflows which negatively affect households and arable land. The VCAs also identified the role division of the different stakeholders in the implementation of the mitigation works. Normally, the communities contribute with the necessary manpower for the actual construction, while the local government often provides transport means and heavy machinery, and the ministries of land and environment protection and agriculture provide technical advice on the design of the structures. The Red Cross has been requested to provide fuel, cement, timber, and steel bars. The Red Cross contribution varies between CHF 1,000 and CHF 10,000 per community.

To discuss the viability of mitigation interventions identified by the community, three advanced VCA workshops were held in South Hamgyong, South, and North Phyongan provinces for 90 community people and Red Cross staff in January and February 2010. At the same time, experts hired by DPRK Red Cross technically validated all proposed mitigation projects in the 31 communities, varying from drainage systems, water

heads, flood-protected wells, floodgates, overflow dams, water reservoirs, culverts, embankments, and bridges. Other issues addressed in the communities are the establishment of early warning systems and the elaboration of community disaster contingency plans.

Due to several changes in the detailed calculations of the amount of cement and fuel needed for the 31 communities, delivery of the construction materials to the communities was slightly delayed. However, thanks to the postponement of the rice-planting season, preparation work for the mitigation structures has already seen significant progress. It is still feasible to finalize all the structures before the start of the rainy season in July-August.

In May 2010, three Vietnamese VCA experts visited the DPRK to share their extensive experience in VCAs. A workshop was conducted in Hamhung city, South Hamgyong province, attended by field 14 VCA facilitators from South Hamgyong, South Phyongan, and South Hwanghae provinces. A simulation exercise was done in one of the villages where previously a VCA had been conducted. The outcome of the Vietnamese-style VCA provided many new insights in vulnerabilities and capacities existing in the community, which had not been previously identified.

### **Tree planting**

While community-based tree planting used to be a separate project, it is now being implemented as part of CDRR, and in the same communities. To ensure people use the proper techniques in seedling production, selection and maintenance of nurseries, as well as nutrition and cultivation of the trees, three technical workshops were held in South Hamgyong, South and North Phyongan provinces, targeting 72 people from 30 communities. Experts from MoLEP facilitated the workshops. The techniques learned during the workshops were applied during the spring tree planting campaign held from 23 March to 2 April. A total of 32,228 youth volunteers and farmers planted 2,349,050 seedlings of acacia, larch, *pinus strobus*, pine nut, poplar, maple, willow, and fruit trees on 288 hectares of disaster-prone land. To further strengthen CBTP, irrigation pumps, working cloths and ranger tools were provided for 12 tree nurseries.

Due to the late start of the requisition process, the procurement of seeds has been delayed. The supplier was unable to guarantee the germination of the seeds when planted later than half April. The disaster management department is currently looking into an alternative to the seeds that initially had been ordered.

A tree-planting expert will review the CBTP project in the framework of the CDRR programme by the end of June.

### **Road safety**

Each year during the months of May and November, the DPRK government organizes a national public awareness campaign on road safety. The National Society actively participates in these campaigns, coordinating road safety promotion activities among schoolchildren and the wider audience. This year, the DPRK Red Cross supported the *road safety is no accident* campaign in ten communities and secondary schools in South Phyongan province, reaching approximately 17,500 people. For the campaign, 2,000 brochures on road safety, 300 flipcharts and books on first aid were distributed to the 20 road safety education rooms in Pyongyang as well as to Red Cross staff and volunteers for their road safety and accident prevention activities. An additional 500 sets of the ten road safety commitments cards prepared by the IFRC secretariat in Geneva are currently being printed locally for distribution.

### **Water safety**

Two rescue boats and other equipment such as diving gear and life jackets were distributed to the Red Cross water safety teams in Wonsan and Majon beaches, both located at the east coast of the country. Although some missing parts in the diving equipment still need to be delivered, the two water safety teams are now fully prepared for the coming summer season, when many people visit the beaches. Due to the sea's strong currents, many drowning casualties are reported every year.

The two teams, each consisting of 15 volunteers, received training on the operation of the boat and the engine from one of their colleagues of the Taedonggang river water safety team in Pyongyang, which was established in 1997. The Taedonggang river water safety team also received several new pieces of life-saving equipment, which were in need of replacement.



The initiation of the new rescue boat with the water safety team of Majon beach, in South Hamgyong province. Majon is one of the most popular beaches in DPRK with up to 15 casualties due to drowning every year. Photo: Kim Gwang Son, IFRC/DPRK

### **Integrated community development project**

The ICDP was inherited from the organizational development department, as the linkage with CDRR and livelihood improvement is evident. Due to problems with the currency devaluation in this reporting period, different sets of food processing machines were delivered to the five newly selected ICDP *ris* only in April. Monitoring is ongoing to ensure the machines are properly functioning.

The five ICDP *ris* were selected among the 31 CDRR communities as those with the highest levels of vulnerability and the most pro-active attitude from community leaders. For example, the first two pilot ICDP *ris*:

Sinsong *ri* in Kumya county, South Hamgyong province and Maejon *ri* in Phyongwon county, South Phyongan province have managed to significantly increase their capacities, through the possibility of generating additional income. The ICDP has been an incentive for those communities to initiate their own projects with their own means; a mushroom plantation, provision of meals to the elderly in winter, and the construction of a water reservoir, a dam and several irrigation canals and sluices to irrigate a large number of rice paddies.

### **Disaster response**

Flash floods affected 310 families in Sudong *ri*, Kowon county, South Hamgyong province late May 2010. The Red Cross is assessing the situation, and has already prepared for 150 family kits to be transferred to the affected area from the warehouse in Wonsan city. The government is providing emergency items to the remaining families. To ensure more efficient distribution of the 27,000 family kits pre-positioned in the seven Red Cross warehouses in response to disasters, a warehouse management training is being planned before the start of the flood season in August-September. Several other workshops are planned for the national and three provincial disaster response teams.

### **Constraints or challenges**

Late requisitions have caused serious delays in the procurement of construction materials for mitigation works as well as of the seeds. However, as a result of the long winter, the rice-planting season was postponed and therefore communities were still able to complete the necessary preparations, allowing the mitigation structures to be finalized before the flood season.

The main challenge for the Red Cross to continue motivating communities in participating in the different programmes is to provide realistic promises: expectations that are too high from the community people can only lead to disappointment. The impact of Red Cross interventions needs to live up to the hardship that the community people have to endure as their contribution to the programmes.

## **Health and care**

IFRC has reinitiated discussions with MoPH, WHO and UNICEF regarding the hand-over of the drug distribution programme to the government. Although the quarterly distribution of the medical kits for 2010 has been generously covered by the Swedish, Finnish and Norwegian Red Cross, it is becoming increasingly difficult to ensure future funding.

With the shift to community-based health and first aid, the focus of the health and care programme moves towards self-reliance at community level and prevention of diseases. The role of the first aid volunteers in the communities is key in providing knowledge about the prevention of diseases to the community people due to the chronic lack of medical equipment, tools, medicines and updated knowledge in the *ri* clinics.

Training of household doctors on the rational use of drugs continues. The Red Cross will be closely collaborating with MoPH in the WHO-supported household doctors' training package once finalized.

As part of the EuropeAid-funded project through the Finnish Red Cross, the reviewed translations of the CBHFA modules as well as the household doctors' training package will be piloted in Hyangsan county, North Phyongan province, and Riwon county, South Hamgyong province.

## **Outcomes**

**Programme component 1:** Improvement of medical services focusing on maternal, newborn and child health (MNCH)

**Outcome 1:** Community people, particularly mothers, newborns and children maintain their good health and access to basic medical services through the minimum provision of essential drugs

**Outcome 2:** Community health professionals (household doctors and midwives) increased their skills and knowledge on MNCH and rational drug usage of essential medicines

**Outcome 3:** Basic health and social services are strengthened for community people by restoring and rehabilitating the referral and primary health institutions

**Programme component 2:** Community-based health and first aid

**Outcome:** Communities and volunteers are prepared and able to respond to health and injury priorities in the communities by increasing their capacities

**Programme component 3: Public health in emergencies**

**Outcome:** Increased capacity of the DPRK Red Cross to meet health needs during disasters and health emergencies

**Programme component 4: Voluntary non-remunerated blood donation**

**Outcome:** Existing volunteers' network of DPRK Red Cross used for promotion of voluntary non-remunerated donation

**Achievements**

**Drug distribution**

With support from the Finnish, Norwegian and Swedish Red Cross, the quarterly distribution of medical kits has been covered for 2010. Each quarter, 2,386 *Il Cha* medical kits and 2,386 locally procured small kits are sent to 2,030 health facilities. Currently, the kits for the third quarter are awaiting distribution in the central medical warehouse in Pyongyang to the county warehouses.

To ensure sufficient amounts of clean drinking water are available in the clinics, 5,000 ceramic water filter candles were locally procured and will be distributed to the health institutions together with the kits in June 2010. With the same cargo, the Red Cross is helping UNICEF to distribute 30,000 boxes of micronutrient tablets and 5,000 boxes of ferrous sulphate.

Six field monitors visit on average 125 clinics per month, to check the efficiency of the distribution and use of the drugs. The monitoring form also looks at the availability of water and sanitation facilities in the clinics, and other pressing needs identified by the clinic staff. When necessary, the monitors provide hygiene promotion messages to the community people. The recommendations of the monitoring reports are seriously looked into and action is often taken in response.

During the cold winter months, the chronic lack of coal is causing serious heating problems in most of the health facilities, and patients are reluctant to visit the freezing cold clinics. At the same time, some of the liquid medicines were frozen during the transportation as well as storage in the county medical warehouses and clinics' pharmacies. Field monitors played an important role in sharing information on the MoPH procedures regarding the usage and disposal of frozen medicines, as well as on ways to prevent medicines from freezing. The rational use of drugs training curriculum has been updated to include these and other recommendations from the monitoring visits.



Household doctor checking on a small child in the Red Cross-supported Tabchon city hospital, South Hamgyong province. Red Cross health promotion material is hanging in the hospital for easy reference. *Photo: Ri Chol Bom, IFRC/DPRK*

First aid volunteers played an active role in providing first aid to winter-related health problems such as injuries and frostbite, in support of health staff from the *ri* clinics.

Thanks to the field monitors' report on the damage of several small kits due to poor quality cartons, the logistics department will specify the need for more solid packing in future procurements. In the second quarterly consignment of *Il Cha* medical kits, procured from Geneva, the injection fluids did not pass the MoPH standard quality test. All vials have been properly disposed of.

The monitors furthermore consistently report that the quantities of drugs provided are not sufficient. The majority of the clinics run out of medicines after less than two months. In addition, proper treatment of diseases at city/county hospitals is hampered by a lack of basic diagnostic equipment.

A needs assessment of two county hospitals and 42 *ri* clinics in Hyangsan county, North Phyongan province, and Riwon county, South Hamgyong province was done in February as part of the EuropeAid-funded project through the Finnish Red Cross. The Finnish Red Cross is currently in the process of procuring the necessary medical equipment and tools. Training for household doctors on the proper use of the equipment will follow the delivery of the items.

### **Community-based health and first aid (CBHFA)**

A CBHFA orientation and preplanning workshop was held in May in Pyongyang for 25 IFRC and DPRK Red Cross headquarters programme staff, as well as staff from the MoPH. The workshop was co-facilitated by the regional health coordinator from Beijing, who helped to create a common understanding of CBHFA. During the workshop, the translated volunteer manual was reviewed, and a CBHFA action plan was drafted. The remaining CBHFA training modules are currently being translated into Korean. A review of the translation will be done by the Red Cross and the MoPH. The CBHFA master training, training of trainers, and training of volunteers will start in August 2010.

### **Emergency health**

Training materials on communicable disease and pandemic influenza control have been revised. The updated materials were used during four two-day workshops conducted in April for 100 Red Cross volunteers in North and South Phyongan.

The contents of ten inter-agency emergency health kits (IEHK) were distributed to health facilities in ten cities/counties, to ensure their use before the expiry date of the drugs passes.

### **Voluntary non-remunerated blood donor recruitment**

Training materials on voluntary non-remunerated blood donor recruitment have been printed and are ready for distribution. The manuals have been reviewed by the MoPH.

### **Constraints or challenges**

Any change in organizational culture is always a challenge. For many years now, drug distribution has been the main component of the health and care programme in the DPRK. Although lack of government funds for medicines remains the main limitation, the DPRK Red Cross is now ready to seriously discuss the handover of its largest programme to the MoPH.

At the same time, the pace of shifting the focus of the health and care programme towards CBHFA is not as fast as previously hoped, causing delays in the translation of the training manuals and workshops. However, the IFRC is fully supporting the DPRK Red Cross in this transition process.

## **Water and sanitation**

The DPRK Red Cross, with support from IFRC, has been constructing water and sanitation schemes for over 500,000 people in the past ten years. In 2010-2011, an additional 18 communities (approximately 64,800 beneficiaries) are being targeted in North and South Phyongan, South Hamgyong and South Hwanghae provinces. The provision of improved water supply systems, sanitation facilities, and hygiene promotion aims to reduce the morbidity of water-borne and water-related diseases.

### **Outcome**

#### **Programme component 6: Water and sanitation**

**Outcome 1:** Access to safe water and sanitation services improved in the communities preventing outbreak of waterborne illnesses

**Outcome 2:** Access to safe water and sanitation and other services improved in disaster-affected areas minimizing mortality and morbidity

### **Achievements**

#### **Construction of water sources, pump houses, and storage tanks in 19 communities**

Based on the outcomes of VCAs conducted in 45 potential communities in July 2009, a pre-selection of 18 communities was made by the water and sanitation team. A joint field assessment followed for the final selection. Many suggestions as a result of the field visits, such as the use of rainwater and renewable energy, but also 24-hour water supply and ventilated improved pit (VIP) dual-pit latrines, were addressed in the design of the currently constructed systems.

For the construction of gravity fed systems, spring catchment tanks need to be built close to the water source. Community people themselves dug the water source, sourced out the gravel, sand, and marbles from riverbeds, and transported the materials to the location of the water source. Local authorities contributed with timber for concrete moulding and scaffolding.

The verification process of the quality and quantity of the delivered construction materials (cement and steel bars) was completed by end March. The additional materials necessary to construct the water and sanitation schemes (pipes and fittings) are procured with support from the IFRC regional logistics unit in Kuala Lumpur and are expected to arrive mid July.

With support from Spanish Red Cross, an additional community will be supported with a water and sanitation scheme. Wonchon *ri* in Taedong county, South Phyongan province was selected due to high rates of water-borne diseases. After a field assessment, a design study is being prepared.



The digging of a water source in Uhp *ri*, Hongwong county South Hamgyong province. Photo: Won Jong Chol, DPRK Red Cross/South Hamgyong branch

### **Training for community technicians**

In September 2009, three technical workshops for 90 technicians, Red Cross staff and volunteers from 18 communities were conducted in South Hamgyong, North and South Phyongan provinces. A total of 200 technical flipcharts, handouts, and booklets were distributed to all participants.

The technicians will be responsible for the design, construction, pipe connection, 24-hour water supply, and wastewater collection systems in their respective communities. After the water and sanitation systems are handed over to the communities, the technicians will also be responsible for the maintenance and repair of the systems.

### **Improvement of water quality**

One of the recommendations from the IFRC water quality review conducted in July 2009 was the importance to guarantee water quality in the target communities through water quality testing. To this end, three *wagtech polatest* water quality test kits were procured to support the anti-epidemic stations (AES). The kits arrived in early February 2010. Two kits were distributed to the AES in North and South Phyongan provinces and the third kit is stored in the Red Cross service centre for training as well as emergency purposes. Training on the operation of the kit was held for 13 AES water quality technicians, facilitated by an expert from EUPS unit 3, the non-governmental organization World Concern.

### **Hygiene promotion training for 193 volunteers**

A total of 18 hygiene promotion workshops were conducted for 193 volunteers including nurses, kindergarten teachers, and doctors. The volunteers are expected to promote hygiene knowledge and behaviour through the participatory hygiene and sanitation transformation (PHAST) methodology. A total of 200 flipcharts and lecture notes were distributed to all participants.

### **Emergency water and sanitation programme**

Supplementary emergency water and sanitation items, such as mosquito nets, chemicals, camping beds, and generators were delivered to the Red Cross service centre in Pyongyang. The items are part of the mobile emergency response units (ERU).

Preparations are underway for a workshop on the use of SETA units (mobile water treatment kits), in emergency response situations. The Spanish Red Cross donated the SETA units, and is also providing two experts to facilitate the workshop, to be held in July. Two colleagues from the Nepal Red Cross will also attend the workshop.

### **Constraints or challenges**

To ensure timely delivery of the construction materials in the communities before the start of the rice-planting season, the procurement process was initiated back in October 2009. Because of unforeseen circumstances, the supplier was unable to deliver the materials as planned. However, due to the extended cold winter season, rice planting was delayed until mid-May and therefore preparation work for the construction of the water supply systems could be finalized in time.

Although all water supply systems constructed by the Red Cross are designed to provide 24-hour water supply, some communities still open the valves only twice or three times per day. The continuous water supply is furthermore a requirement in the official hand-over agreement signed between the community and the Red Cross to transfer the responsibility for the maintenance and repair of the water schemes to the community.

## Organizational development/ capacity building

Integration of the different operational programmes is becoming increasingly important due to existing budget restrictions. The cost-effectiveness of combining activities including training events, procurements, materials, transport and monitoring between the different programmes can be substantial. The organizational development programme is currently looking into using the VCA as a means to strengthen integration between the programmes, by focusing on the community needs in a holistic way, and not from the point of view of the different programmes separately.

The number of volunteers increased from 101,900 at the beginning to 105,300 at the end of 2009. The image of the Red Cross has significantly improved over the years thanks to the increased number of activities with a direct impact on the quality of life of the community people.

### Outcomes

#### **Programme purpose: Global Agenda Goal 3**

Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability

**Programme component 1:** Strengthening national society foundation and leadership ability to effectively lead the organization and its service delivery

**Outcome 1:** The DPRK Red Cross integrity has been further assured

**Outcome 2:** National Society overall activities are directed by strong leadership

**Programme component 2:** Upgrading the level and the quality of volunteer service

**Outcome 1:** Volunteers have become more able to support community needs

**Outcome 2:** Volunteering in emergencies and volunteering in urban areas are maintained

**Outcome 3:** Youth volunteer base is strengthened

**Programme component 3:** Increasing capacity at headquarters and branches for scaled up service delivery

**Outcome 1:** Branches have improved managerial skills

**Outcome 2:** Headquarters staff have improved professional and communication levels

**Programme component 4:** Improving cooperation and collaboration with stakeholders

**Outcome 1:** DPRK Red Cross enjoys improved accountability and partnership with local partners

**Outcome 2:** Public awareness about Red Cross value and knowledge is increased

### Achievements

#### ***Strengthening national society foundation and leadership***

The consultation process for the new organizational strategy up to 2020 in preparation for the national congress in 2012 is in full swing. A special questionnaire is being developed to ensure the concerns and interests of all stakeholders as well as strategic and operational needs are being addressed. The strategy will be the main reference document for the DPRK Red Cross.

The DPRK Red Cross will be distributing 500 copies of the Korean version of the *International Federation Strategy 2020* to local authorities, Red Cross branches, volunteers, and beneficiaries.

#### ***Updating the level and the quality of volunteer service***

The revision of the training curriculum for volunteer leaders has been finalized and now includes topics on the *International Federation Strategy 2020*, effective volunteer management, and community development. Through community-based programmes like CDRR, community-based tree planting and CBHFA, volunteer management is becoming more programme-oriented and less generic. Due to the existing workload of the people in the community, volunteering is done mainly by the community leaders, who have a direct interest in actively participating in the implementation of the different programmes. All volunteers are registered with the county branches with their names, ages, positions and gender.

#### ***DPRK Red Cross branch and headquarters capacity increased***

To further develop a common understanding for the need of integration, IFRC conducted a two-day workshop on 10-11 February for 32 IFRC and DPRK Red Cross headquarter programme staff. Organizational

development staff are now always present either as facilitators or as participants in any training event organized by the different programmes.

To increase the mobility of the branch staff and volunteers, 100 bicycles for city/county branches and five motorbikes for provincial branches will be distributed soon. Digital cameras were purchased for provincial Red Cross branches in the five operational provinces. A special hand-over agreement with the provincial branches aims to increase the number of pictures taken and active sharing with the headquarter staff for monitoring and reporting purposes. A training on how to best take pictures is planned for July.

IFRC is supporting the Sinuiju city branch with finishing materials for the construction of their office building. Because of the increasing need for Red Cross activities in this border city with China, the DPRK Red Cross started constructing the office building including a training hall for volunteers in 2008 with its reserve funds. Due to increased prices for materials, construction remained incomplete for over a year.

### ***Improved cooperation and collaboration with stakeholders***

For all public awareness events, the Red Cross invites journalists from the main media outlets, to ensure broad coverage in newspapers and magazines as well as on television. On 28 April, the Red Cross induction workshop for 25 journalists was conducted in Pyongyang, to improve the knowledge of the Red Cross Red Crescent Movement among the major media.

### **Constraints or challenges**

The organizational development department was strengthened with several additional staff members and an experienced new director. In spite of the revival of its human resources, the department experienced a setback due to budget restrictions, causing several of the activities planned for 2010 to be rescheduled or even cancelled.

As the focus has previously been too much on hardware (i.e. the procurement of computers and other training equipment), the department is now reconsidering its core activities and has decided to focus more on functional goals, such as the integration of the different programmes and the use of the VCA as an integration tool.

## Working in partnership

Collaboration with key stakeholders at community, county, and province levels has been strengthened through hands-on programmes like disaster management, and water and sanitation. The ministries of people's security, agriculture, and land and environmental protection provide technical advice on the construction of mitigation works within the CDRR programme, as well as on tree planting. The Red Cross is supporting the governmental anti-epidemic stations, responsible for the monitoring of water quality, with portable water testing equipment and training. Other local partners at community level like corporative farms, *ri* committees, farmer's, youth and women's unions, play an important role in the community disaster management committees, and the community committees set up for the construction of the water and sanitation schemes.

IFRC and DPRK Red Cross health teams participated in a series of MoPH and WHO workshops for the MoPH strategic framework 2010-2015. The presence of key MoPH staff during the CBHFA pre-planning workshop was crucial in assuring government collaboration in the implementation of CBHFA at provincial, county and community levels. Also, MoPH has agreed to cooperate in reviewing the impact of the Red Cross-supported drug distribution programme.

Besides the training on the use of the water testing kit, preparations are currently ongoing for a joint project on community-based tree planting with EUPS unit 3 (World Concern). The Red Cross has been participating in two reforestation seminars organized by MoLEP and the Swiss Development Cooperation (SDC).

## Contributing to longer-term impact

The focus this year lies on measuring the impact of the different programme activities. For example, before continuing with the construction of mitigation structures, the effect of those structures built during previous years should be thoroughly assessed. Once it is clear that the expenditure of donor funds has the desired effect, accountability is ensured, thereby increasing the trust of donors and consequently their willingness to continue funding IFRC-supported DPRK Red Cross programmes.

At the same time, IFRC aims for less hardware support for all the different programmes. Also, IFRC is pushing for cost-effectiveness through improved collaboration between the programmes. Furthermore, the use of the

VCA as an integration tool by all programmes aims to strengthen the connection between the real needs in the community and the planned programme activities.

## Looking ahead

While the present tensions between the DPRK and South Korea have not yet been resolved, these and future war threats are not expected to have a major influence on the implementation of the programmes. In this context, IFRC hopes to continue to support the DPRK Red Cross through more long-term programming.

<b>How we work</b>	
<p><i>All Federation assistance seeks to adhere to the <a href="#">Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief</a> and is committed to the <a href="#">Humanitarian Charter and Minimum Standards in Disaster Response (Sphere)</a> in delivering assistance to the most vulnerable.</i></p>	
<p>The IFRC's vision is to:</p> <p>Inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.</p>	<p>The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:</p> <ol style="list-style-type: none"> <li>1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.</li> <li>2. Enable healthy and safe living.</li> <li>3. Promote social inclusion and a culture of non-violence and peace.</li> </ol>
<b>Contact information</b>	
<p>For further information specifically related to this report, please contact:</p> <p><b>DPRK Red Cross Society:</b></p> <ul style="list-style-type: none"> <li>• Mr Ri Ho Rim, Secretary General; email: <a href="mailto:dprk-rc@co.chesin.com">dprk-rc@co.chesin.com</a>, phone: +85.02.381.4350, fax: +85.02.381.3490</li> </ul> <p><b>IFRC DPRK country office:</b></p> <ul style="list-style-type: none"> <li>• Mr Finn Jarle Rode, Head of country office; email: <a href="mailto:finnjarle.rode@ifrc.org">finnjarle.rode@ifrc.org</a> phone: +85.02.3814350, fax: +85.02.3813490</li> </ul> <p><b>IFRC regional office in China:</b></p> <ul style="list-style-type: none"> <li>• Ms Nicolle LaFleur, acting head of regional office; email: <a href="mailto:nicolle.lafleur@ifrc.org">nicolle.lafleur@ifrc.org</a> phone: +86.10.65327162, fax: +86.10.65327166</li> </ul> <p><b>IFRC Asia Pacific zone office in Malaysia:</b></p> <ul style="list-style-type: none"> <li>• Mr.Jagan Chapagain, Head of operations, email: <a href="mailto:jagan.chapagain@ifrc.org">jagan.chapagain@ifrc.org</a></li> <li>• Mr Alan Bradbury, Head of resource mobilization and planning, monitoring, evaluation and reporting (PMER), email: <a href="mailto:alan.bradbury@ifrc.org">alan.bradbury@ifrc.org</a></li> </ul> <p>Please send pledges of funding to <a href="mailto:zonerm.asiapacific@ifrc.org">zonerm.asiapacific@ifrc.org</a></p>	

[< interim financial report below; click here to return to title page >](#)

# International Federation of Red Cross and Red Crescent Societies

MAAKP002 - Democratic People's Republic of Korea

Mid-year Report 2010

Selected Parameters	
Reporting Timeframe	2010/1-2010/6
Budget Timeframe	2010/1-2010/12
Appeal	MAAKP002
Budget	APPEAL

All figures are in Swiss Francs (CHF)

## I. Consolidated Response to Appeal

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
<b>A. Budget</b>	1,735,655	8,097,512	216,545	0	169,868	10,219,580
<b>B. Opening Balance</b>	173,310	2,861,626	86,877	0	50,192	3,172,005
<b>Income</b>						
<u>Cash contributions</u>						
<i>Australian Red Cross (from Australian Government)</i>	-3,109	-29,792				-32,901
<i>Finnish Red Cross</i>		36,887				36,887
<i>Finnish Red Cross (from European Commission - Europe Aid)</i>		141,874				141,874
<i>Finnish Red Cross (from Finnish Government)</i>		217,073				217,073
<i>Germany Red Cross</i>	13,360					13,360
<i>Japanese Red Cross</i>	209		0			209
<i>New Zealand Government</i>		99,872				99,872
<i>Norwegian Red Cross (from Norwegian Government)</i>	0					0
<i>Spanish Red Cross</i>		126,764				126,764
<i>Swedish Red Cross (from Swedish Government)</i>		1,579,694				1,579,694
<i>Unidentified donor</i>	-209	-937				-1,146
<b>C1. Cash contributions</b>	<b>10,251</b>	<b>2,171,436</b>	<b>0</b>			<b>2,181,687</b>
<u>Outstanding pledges (Revalued)</u>						
<i>Danish Red Cross (from European Commission - DG ECHO)</i>		-7,843				-7,843
<i>Finnish Red Cross</i>		14,489				14,489
<i>Finnish Red Cross (from European Commission - Europe Aid)</i>		43,467				43,467
<i>Finnish Red Cross (from Finnish Government)</i>		26,198				26,198
<i>Japanese Red Cross</i>	60,884	60,884				121,767
<i>Swedish Red Cross (from European Commission - Europe Aid)</i>		601,814				601,814
<i>Swedish Red Cross (from Swedish Government)</i>	168,776	-593,494	70,324			-354,394
<b>C2. Outstanding pledges (Revalued)</b>	<b>229,660</b>	<b>145,514</b>	<b>70,324</b>			<b>445,497</b>
<u>Inkind Personnel</u>						
<i>Finnish Red Cross</i>		37,200				37,200
<i>Norwegian Red Cross</i>					37,200	37,200
<b>C5. Inkind Personnel</b>		<b>37,200</b>			<b>37,200</b>	<b>74,400</b>
<b>C. Total Income = SUM(C1..C6)</b>	<b>239,911</b>	<b>2,354,149</b>	<b>70,324</b>	<b>0</b>	<b>37,200</b>	<b>2,701,584</b>
<b>D. Total Funding = B + C</b>	<b>413,221</b>	<b>5,215,776</b>	<b>157,200</b>	<b>0</b>	<b>87,392</b>	<b>5,873,589</b>
<b>Appeal Coverage</b>	<b>24%</b>	<b>64%</b>	<b>73%</b>	<b>#DIV/0</b>	<b>51%</b>	<b>57%</b>

## II. Balance of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
<b>B. Opening Balance</b>	173,310	2,861,626	86,877	0	50,192	3,172,005
<b>C. Income</b>	239,911	2,354,149	70,324	0	37,200	2,701,584
<b>E. Expenditure</b>	-726,816	-2,056,871	-78,300		-59,105	-2,921,093
<b>F. Closing Balance = (B + C + E)</b>	<b>-313,595</b>	<b>3,158,905</b>	<b>78,900</b>	<b>0</b>	<b>28,287</b>	<b>2,952,496</b>

International Federation of Red Cross and Red Crescent Societies

MAAKP002 - Democratic People's Republic of Korea

Mid-year Report 2010

Selected Parameters	
Reporting Timeframe	2010/1-2010/6
Budget Timeframe	2010/1-2010/12
Appeal	MAAKP002
Budget	APPEAL

All figures are in Swiss Francs (CHF)

### III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A		B					A - B	
<b>BUDGET (C)</b>		<b>1,735,655</b>	<b>8,097,512</b>	<b>216,545</b>	<b>0</b>	<b>169,868</b>	<b>10,219,580</b>	
<b>Supplies</b>								
Shelter - Relief	5,000							5,000
Construction Materials	412,966	250,325		9,707			260,032	152,934
Clothing & textiles	110,003	73,483	565				74,048	35,955
Seeds,Plants	93,921	18,920					18,920	75,000
Water & Sanitation	2,321,962		131,116				131,116	2,190,845
Medical & First Aid	3,482,394		1,175,403				1,175,403	2,306,990
Teaching Materials	178,763	24,985	3,835	-129			28,690	150,072
Utensils & Tools	53,398	3,063					3,063	50,335
Other Supplies & Services	379,799	12,658	6,563	25,979			45,200	334,599
<b>Total Supplies</b>	<b>7,038,205</b>	<b>383,435</b>	<b>1,317,482</b>	<b>35,556</b>			<b>1,736,474</b>	<b>5,301,731</b>
<b>Land, vehicles &amp; equipment</b>								
Land & Buildings	2,000							2,000
Vehicles	44,000							44,000
Computers & Telecom			1,569			3,138	4,707	-4,707
Others Machinery & Equipment		1,098	1,883	157		-3,138	-0	0
<b>Total Land, vehicles &amp; equipment</b>	<b>46,000</b>	<b>1,098</b>	<b>3,452</b>	<b>157</b>		<b>0</b>	<b>4,707</b>	<b>41,293</b>
<b>Transport &amp; Storage</b>								
Storage	31,184	18,061	8,364			1,174	27,599	3,585
Distribution & Monitoring	405,417	5,022	86,782	337		7,541	99,682	305,735
Transport & Vehicle Costs	108,061	23,497	41,865	10,059		-8,708	66,713	41,348
<b>Total Transport &amp; Storage</b>	<b>544,661</b>	<b>46,579</b>	<b>137,011</b>	<b>10,396</b>		<b>7</b>	<b>193,994</b>	<b>350,668</b>
<b>Personnel</b>								
International Staff	942,716	109,908	204,407	7,443		51,547	373,305	569,411
National Staff	163,165	20,051	37,086	5,654		2,793	65,584	97,581
National Society Staff	204,668	18,305	74,987	3,043			96,335	108,334
Consultants	20,643							20,643
<b>Total Personnel</b>	<b>1,331,193</b>	<b>148,264</b>	<b>316,479</b>	<b>16,140</b>		<b>54,341</b>	<b>535,224</b>	<b>795,969</b>
<b>Workshops &amp; Training</b>								
Workshops & Training	390,078	34,935	50,283	1,869		81	87,168	302,910
<b>Total Workshops &amp; Training</b>	<b>390,078</b>	<b>34,935</b>	<b>50,283</b>	<b>1,869</b>		<b>81</b>	<b>87,168</b>	<b>302,910</b>
<b>General Expenditure</b>								
Travel	38,860	7,752	5,866	2,205		758	16,581	22,279
Information & Public Relation	44,130	4,437	1,936	1,435		1,312	9,120	35,010
Office Costs	22,066	8,865	67			27,211	36,143	-14,077
Communications	0	41	27	27		40,563	40,660	-40,660
Financial Charges	0	16,504	19,072	1,611		1,507	38,695	-38,695
Other General Expenses	140,656	24,723	42,382	3,532		-70,572	66	140,590
<b>Total General Expenditure</b>	<b>245,712</b>	<b>62,324</b>	<b>69,351</b>	<b>8,811</b>		<b>779</b>	<b>141,264</b>	<b>104,448</b>
<b>Programme Support</b>								
Program Support	623,730	46,126	136,608	4,762		1,273	188,769	434,961
<b>Total Programme Support</b>	<b>623,730</b>	<b>46,126</b>	<b>136,608</b>	<b>4,762</b>		<b>1,273</b>	<b>188,769</b>	<b>434,961</b>
<b>Services</b>								
Services & Recoveries		3,217	23,414				26,631	-26,631
<b>Total Services</b>		<b>3,217</b>	<b>23,414</b>				<b>26,631</b>	<b>-26,631</b>
<b>Operational Provisions</b>								
Operational Provisions		838	2,790	610		2,624	6,863	-6,863
<b>Total Operational Provisions</b>		<b>838</b>	<b>2,790</b>	<b>610</b>		<b>2,624</b>	<b>6,863</b>	<b>-6,863</b>
<b>TOTAL EXPENDITURE (D)</b>	<b>10,219,580</b>	<b>726,816</b>	<b>2,056,871</b>	<b>78,300</b>		<b>59,105</b>	<b>2,921,093</b>	<b>7,298,487</b>
<b>VARIANCE (C - D)</b>		<b>1,008,838</b>	<b>6,040,642</b>	<b>138,245</b>		<b>110,762</b>	<b>7,298,487</b>	