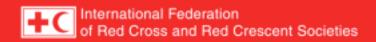
Revised Plan 2011



Democratic People's Republic of Korea

Executive summary

The International Federation of Red Cross and Red Crescent Societies (IFRC) is the largest humanitarian organization in the Democratic People's Republic of Korea (DPRK) for many years, thanks to its close collaboration with the DPRK Red Cross to assist to the most vulnerable in the country. In the coming years, the DPRK Red Cross, with support from IFRC, plans to strengthen its programmes based on existing needs and available funding, with a strong emphasis on long-term development.

Despite the DPRK government's focus on improving people's livelihoods through investments both in industry and agriculture, the humanitarian situation is fragile, while the political situation surrounding the Korean Peninsula remain tense. Key challenges include:

- ongoing economic difficulties(food, energy, drug supply, water, etc)
- disasters (flood damage in most areas)
- initial problems following monetary reform
- · worsening north-south relations



different participatory rural appraisal tools, such as the health risk map and the seasonal calendar, at the community-based health and first aid training workshop in Hyangsan, North Phyongan province in September 2010. Such trainings, supported by IFRC, contribute both to strengthening communities' preparedness and response capacity to health-related issues, as well as the longer-term organizational development of the National Society. Photo: Raija Andersen/ IFRC

The challenging humanitarian situation demands the full support from the DPRK Red Cross and IFRC. The DPRK Red Cross, with, support of the IFRC, will continue to support the most vulnerable groups, ensuring access to essential drugs and basic health care, to prevent malnutrition and a further deterioration in the overall health situation. The disaster management and health programmes aim to help prevent further loss of life during disasters and health emergencies, promote community resilience and understanding of the Red Cross Red Crescent Movement.

The DPRK Red Cross works in the framework of a three-year Cooperation Agreement Strategy (CAS) with nine partner national societies and IFRC. The CAS agreement for 2009-2012 was extended during the partnership meeting held in October 2009 in China.

A follow-up CAS meeting was held in October 2010 in Sweden, where there was a high degree of consensus around the view that the CAS process is essentially moving in the right direction. The meeting also saw agreement on ways forward towards improved reporting to back donors and on the needs voiced by the DPRK RCS for greater understanding of cultural context, consistency of counterparts and frequency of partner visits.

This revised 2011 plan is based on key priorities set by the DPRK Red Cross, and focuses on continuing its activities, incorporating the lessons learned from 2010 and before.

The 8.25 million target beneficiaries are community members in rural areas, with focus on the most vulnerable.

The total budget for 2011 is CHF 7.99 million (USD 8.13 million or EUR 5.82 million). Partners are welcome to provide financial support, support in services, and in-kind support.

Click here to go directly to the attached budget summary of the plan.

Country context

The DPRK Red Cross has over 60 years of operational history and is today a substantial actor in the humanitarian field in the DPRK. It received consistent support over the last decade from IFRC, 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 disaster management, as outlined in the national Red Cross Law of January 2007.

The DPRK experiences severe flooding and droughts and less frequently, typhoons and tropical storms. More regularly, small-scale disasters are caused by flooding, mudflows, and fires – especially between July and September. In 2006–2007, the country was hit by extremely heavy rains, causing widespread flooding and landslides, killing 454 people and leaving up to 170,000 homeless. The floods of August-September 2010 were not as severe, but affected approximately 20,000 families, damaging houses, roads, and bridges.

Dramatic levels of deforestation and inappropriate land use aggravate the impact of floods and mudflows, adversely affecting agricultural production and contributing to food shortages. As a result, farmers seek to increase the availability of arable land, even on the slopes of steep hills and mountains, cutting down trees without considering the risks involved. The harsh winters and lack of adequate fuel, food, water and sanitation and health services make the need for short- and long-term assistance particularly pressing.

According to a comprehensive population census carried out in the DPRK in coordination with UNFPA in October 2008, the country's population has increased with almost 3 million people, and now has a total population of 24 million. The population is aging, with 8.7 per cent of the population being over 65 years of age, compared to only 5.4 per cent in 1993.

The women population constitutes 51.3 per cent of the total population. In spite of ongoing efforts to improve maternal and child health care, the maternal mortality ratio has increased by about 30 percent: from 54 in 1993, to 77 maternal deaths per 100,000 live births in 2008. Also, the infant mortality rate increased from 14 in 1993 to 19 deaths per 1,000 live births in 2008. With the worsening mortality rates, overall life expectancy at birth was shortened by 3.4 years. Still, life expectancy among women is 7 years longer than that of men.

A majority of the population (over 60 percent) live in urban areas, reflecting the traditional industrial base of the country. Gastrointestinal diseases caused by unsafe drinking water and consumption of 'inedible' food supplements are common causes of illness during summer. The previously functioning water supply system in the countryside has deteriorated over the last 30 years and recurrent floods have caused further damage to safe water supply in the country.

| | 1993 | 2008 | |
|----------------------------|------------|------------------|--|
| Total Population | 21,213,378 | and otherwise to | |
| Male | 10,329,699 | 11,721,838 | |
| Female | 10,883,679 | 12,330,393 | |
| Sex Ratio | 94.9 | 95.1 | |
| Average Annual Growth Rate | 0.85% | | |
| Percent Urban | 60.9 | 60.6 | |
| Population 0-4 | 9.8 | 7.1 | |
| Population 0-15 | 28.5 | 24.9 | |
| Population 15-64 | 67.7 | 68.1 | |
| Population 65+ | 5.4 | 8.7 | |
| TFR | 2.1 | 2.0 | |
| IMR | 14.1 | 19.3 | |
| Life expectancy at birth | | | |
| Both Sexes | 72.7 | 69.3 | |
| Male | 68.4 | 65.6 | |
| Female | 76.0 | 72.7 | |
| MMR | 54.0 | 77.2 | |

DPRK 2008 Population Census National Report Central Bureau of Statistics Pyongyang

A national nutritional assessment conducted in mid-2008¹ gave new indications of the deteriorating nutritional status of children in over ten provinces, and general household food security vulnerability. The rates of illness significantly increase during winter months, when temperatures can drop as low as -30° Celsius. Health institutions are severely affected by a lack of heating. As a result,

-

¹ Source: UNICEF

voluntary bed occupancy rates frequently fall below 50 per cent of institutional capacity. Prevalence of severe acute respiratory infections, including pneumonia, is as high as 9.8 per cent among children aged less than 24 months, and are the main cause of morbidity and mortality. Tuberculosis represents a significant health concern for the overall population and is cited as a leading cause of death in the overall population, claiming up to 2,300 lives annually.

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 dependent on externally provided essential drugs to supplement traditional medicine to provide health care at community levels. Local production of essential drugs started in 2009; one pharmaceutical factory is now certified according to the international Good Manufacturing Practice (GMP) and was selected according to IFRC tender procedures to provide a small part of the procurement of the drugs (the so-called small kits). Overall, the country remains very dependent on international drug supplies. Internationally-assisted medical items supply 60-70 per cent of the total need within primary health institutions.

National society priorities and current work with partners

The DPRK Red Cross has an estimated one million members (including 100,000 volunteers and 300,000 Red Cross Youth) with a network of ten provincial branches and 200 city/county branches with volunteer bases.

The National Society has a strong commitment to the implementation of the Red Cross law across the country. It hosted its four-yearly congress in late 2008, where a revised constitution was 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 IFRC's Strategy 2010 and Strategy 2020, including health and social care, disaster management, inter-Korean humanitarian services, and promotion of humanitarian values.

The DPRK Red Cross has a longstanding partnership with IFRC and nine partner national societies, including the Australian, Canadian, Danish, Finnish, German, Netherlands, Norwegian, Spanish and Swedish Red Cross societies, formalized in a three-year CAS for 2009-2012. The partners have agreed to work based on mutual support and transparency. CAS partners provide DPRK Red Cross, through IFRC, technical support in areas of disaster management (Danish Red Cross), reforestation (Norwegian Red Cross), water and sanitation (Swedish Red Cross) and organizational development (Swedish Red Cross). Additionally, the DPRK Red Cross has a cooperation programme with the ICRC. The DPRK Red Cross also cooperates with the Republic of Korea (RoK) Red Cross, having recently accepted support from the National Society in its emergency response to the severe flooding in 2010, and is now recommencing Red Cross talks and family reunions. Also, more recently, the Red Cross Society of China visited and is providing support to the DPRK Red Cross, mainly in areas of organizational development, such as fundraising and equipment. Also, the British Red Cross has recently visited the DPRK Red Cross and is considering re-engagement with the CAS process.

The DPRK Red Cross provides IFRC and partners a unique privilege in access and means for providing

humanitarian assistance to the communities within the DPRK. The DPRK Red Cross hosts the IFRC office within their own building, which makes it the only international organization that has an office outside the diplomatic compounds. Furthermore, support through the IFRC is ever more important now as other organizations are reducing their in-country presence, or downsizing operations in the coming year.

Disaster management

In total, over 50 community-based disaster preparedness committees were trained and established over the past years to consolidate the National Society's role in the field of disaster mitigation and preparedness. Specific mitigation activities based on vulnerability and capacity assessments (VCAs) were carried out. Another 50 communities have been replicating the community-based disaster preparedness activities with limited material support from DPRK Red Cross. More than 20,000 volunteers have been trained in community-based disaster management and first aid. DPRK Red Cross has trained 25,000 volunteers on general disaster management, and organizes refresher



Almost 3,000 families lost their houses due to heavy rains and landslides caused by tropical storm Kompasu early September 2010, such as here in Wonsan city, Kangwon province, on the east coast of the country. People lived in makeshift shelters of plastic sheeting provided by DPRK Red Cross, distributed as part of its emergency kits. Photo: DPRK Red Cross

trainings for community people on a yearly basis. Relief items are strategically prepositioned in seven warehouses for up to 27,000 disaster-affected families.

The goal of DPRK Red Cross is to avoid casualties in a disaster, thanks to a preventive system in place. Besides numerous large-scale disasters affecting the country, many small-scale disasters like fires leave over a thousand families homeless on a yearly basis. DPRK Red Cross and IFRC provide family kits and other basic needs to these families. DPRK Red Cross has disaster preparedness stocks for up to 27,000 families, strategically located in seven warehouses throughout the country, for immediate deployment.

Health

DPRK Red Cross and IFRC, in close cooperation with the ministry of public health and international agencies like WHO, UNICEF and European Union Programme Support units, aim to strengthen community-based health activities addressing newly emerging and recurrent endemics, including A (H1N1), avian influenza, tuberculosis, malaria, acute respiratory infections, diarrhoea, etc. The Red Cross services are widely channelled through the volunteer networks conducting health promotion and public awareness campaigns.

IFRC has been supplying much needed primary health care drugs for many years, serving at least 8 million people with their primary health care drugs. IFRC has agreed to extend drug distributions beyond 2010, but has started downscaling the distribution of specialized (*Jon Mun*) kits to referral hospitals in 2010. IFRC and DPRK Red Cross are currently in discussion with the ministry of public health for a sustainable mechanism to phase out drug distributions after 2011.

While the ministry of public health provides regular health training for household doctors, the DPRK Red Cross is responsible for the trainings for health personnel at community level. In addition, DPRK Red Cross runs 2,500 first aid posts, which provide first level healthcare complementary to health institutions run by the ministry of public health at community level. This community-based first aid activity is supported by the Finnish Red Cross and government.

IFRC has supported DPRK Red Cross to complete over 350 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 part of a global campaign launched by IFRC in 2005, the 10-Year Global Water and Sanitation Initiative (GWSI), aimed to scale up existing water and sanitation capacities with 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.

Other

The DPRK Red Cross's newly elected board will continue to implement the international disaster response laws, rules and principles (IDRL) in close coordination with the government. DPRK Red Cross has been participating in all high-level meetings in the region in 2009 for continuous knowledge sharing and exchange of experiences.

Secretariat supported programmes in 2011

Disaster management

a) The purpose and components of the programme

The disaster management programme budget for 2011 is CHF 1.59 million.

Programme component 1: Disaster management planning

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

The disaster management strategy in 2009-2012 will be implemented by incorporating lessons learned from local Red Cross staff and volunteers in disaster preparedness activities.

To facilitate the planning process, IFRC and DPRK Red Cross developed disaster management planning guidelines in line with the DPRK Red Cross development strategy 2009-2012, its relevant policies, the IFRC's Strategy 2020, and the global disaster management strategy 2007-2012.

In line with this strategy, DPRK Red Cross headquarters, three provincial and 120 county branches have drafted disaster management plans. This long-term planning process is carried out in close consultation with

Red Cross staff and volunteers. At the branch level, the process is facilitated by branch staff with the participation of community people and volunteers, and in coordination with relevant local stakeholders.

Contingency planning coordination meetings are being conducted in six provinces, with representatives from relevant local stakeholders and social organizations. The plans include scenarios for floods, hurricanes and other natural disasters according to identified risks. The contingency planning process is conducted based on specific local hazards, vulnerability and existing capacities.

Programme component 2: Organizational preparedness

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

All headquarters and branch staff will have improved skills and knowledge to plan, implement, and evaluate community-based disaster preparedness programmes through workshops and exchange visits. The national headquarters staff will conduct training for up to 90 Red Cross branch staff and volunteers on:

- Updated emergency operational procedures;
- Emergency assessment and planning; and
- Programme management tools

The trained Red Cross staff and volunteers will conduct peer training sessions for 300 local Red Cross volunteers, thus improving the human resource capacity for effective disaster response at branch level.

Up to 1,000 pre-positioned sets of non-food relief items, including tarpaulins and kitchen sets, will be replenished to cover the needs of up to 135,000 people. The warehouse management system will be improved by implementing standard Federation procedures, with 50 warehouse staff trained in line with these procedures. Branch disaster relief funds will be established to meet the needs of disaster victims.

Programme component 3: Community preparedness

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

Community-based preparedness aims to increase the resilience of communities by transforming their vulnerabilities into capacities through raising risk awareness, tree planting, and road safety.

Community disaster risk reduction

Approximately 100,000 community people will be better prepared to cope with disasters by reducing their vulnerabilities in 20 communities. Training of around 300 Red Cross staff, volunteers and community people will increase their skills and knowledge for better identification of local vulnerability and capacity, and plan and implement community-based disaster risk reduction activities accordingly. Training of 900 Red Cross volunteers and community people will be conducted regularly in:

- Livelihood improvement
- Dyke building
- Stream management
- Volunteer management
- Establishment of early warning systems and contingency planning

Community disaster management committees will be established or strengthened by incorporating different groups of people and representatives from cooperative farms, local government and other organizations. The participatory rural appraisal will be the main tool for identifying local hazards, vulnerabilities and capacities, and to ensure community participation in target communities.

Tree planting

The community-based tree-planting project is expected to reach 20 communities vulnerable to floods and landslides, with training, provision of materials and tree planting awareness-building. A total of 70 Red Cross volunteers and technicians will have increased capacity to produce seedlings, plant out and care for the trees. Around 120 Red Cross volunteers will be locally recruited, trained and regularly managed to conduct tree planting activities and awareness campaigns. Up to 16,000 Red Cross youth and community volunteers will continue to participate in tree planting activities in spring and autumn, the national tree planting campaign seasons. Limited material support will be continued to eight nurseries in target counties to increase their capacity to provide more seedlings for the target communities.

Road safety in urban areas

With Red Cross road safety projects in place, it is hoped that incidence of traffic accidents will be decreased in three cities; Pyongyang city and Phyongson city in south Phyongan province and Hamhung city in south Hamgyong province.

The most at-risk traffic accident areas and the various underlying reasons will be identified in target cities through discussion with local stakeholders. Around 120 Red Cross volunteers will be trained in road safety dissemination and first aid skills to conduct road safety awareness activities and apply first aid in traffic accidents. There will be an increased use of road safety signs in the target areas. Around 7,000 community people, specifically disabled, schoolchildren, and elderly people will be safer from possible traffic accidents.

Programme component 4: Disaster response

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

Training for 25 team members is conducted each year to improve the capacity of the national disaster response team, provincial disaster response teams, and volunteers. An annual simulation exercise is conducted to test the DPRK Red Cross disaster response capacity. Six provincial disaster response teams have been established and will receive further training and equipment to ensure rapid and effective relief.

Programme component 5: Recovery

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

Vulnerability reduction in disaster-affected communities focuses on the development of the coping capacity of communities in disasters. A post-disaster recovery project for disaster victims has been initiated as well as an integrated community development project.

Small and medium disaster recovery project

The project seeks to support up to 1,400 people affected by small and medium disasters such as fires and landslides. Needs and damage assessments is being carried out in line with IFRC emergency assessment tools, and has been piloted in three small or medium disasters by the national disaster response team and provincial disaster response teams. With the outcome of the assessments, DPRK Red Cross is facilitating a participatory planning workshop with the people affected by the disaster and local stakeholders, with the aim of supporting the rehabilitation of the livelihoods of the affected population.

Integrated community development project

The integrated community development project was inherited from the organizational development department per 1 January 2010, as the linkage with community-based disaster risk reduction and livelihood improvement is evident. Up to 40 volunteer leaders will be trained in Red Cross volunteer management skills. Direct beneficiaries of this project are 300 people from the most vulnerable groups such as the elderly, disabled, and women with large number of children. Indirect beneficiaries are 6,000 community people living in two most vulnerable communities in terms of natural, economic and health and hygiene conditions. 70 community people will be invited to attend the community development forum facilitated jointly by seven Red Cross branch staff, volunteers and local organizations.

b) Potential risks and challenges

The main challenge for the Red Cross to continue motivating communities in participating in the different programmes is to balance communities' expectations with what the DPRK Red Cross programmes can actually provide. It is always a challenge to recognize the needs that are there, but also be able to identify clearly what the Red Cross intervention can provide to meet only part of those needs.

Health and care

a) The purpose and components of the programme

The health and care programme for 2011 is focused on protecting and improving the health of mothers, newborns and children. Due to their vulnerability in communities, they are more likely to succumb to waterborne diseases, acute respiratory infections, and are in more need for emergency health assistance.

The health of mothers, newborns and children is an increasing concern at global level as well. The United Nations gives priority to this issue in its Millennium Development Goals, to which the DPRK government is a signatory. In DPRK Red Cross and Federation-supported projects, mothers and children, particularly below the age of five, are the main beneficiaries at the community level.

The health and care programme budget for 2011 is CHF 6.06 million.

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

Over 2,000 health institutions are supported with essential medicines, instruments, and training for health professionals, and their infrastructure will be rehabilitated, improving the health of beneficiary populations, in particular mothers and children, by increasing their access to medical services at health institutions.

Programme component 2: Community-based healh 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

Community-based health and first aid activities aim to protect and improve the health of community people. Through the community participatory approach, the community capacity is increased through 2,500 properly run Red Cross first aid posts, first aid materials, trained Red Cross volunteers and youth members, and public awareness about prevention and control of waterborne diseases, acute respiratory infections and malaria, and tackling other community health priorities like injuries. This programme links directly with the water and sanitation through health and hygiene education.

In addition, to raise awareness of HIV prevention and promotion of HIV counselling and testing, 320 staff and volunteers will be trained and will conduct community HIV outreach activities in 52 rural communities. This effort is expected to increase the number of people seeking HIV counselling and testing. A total of ten volunteers will be trained in providing psychosocial support for approximately 50 orphans and vulnerable children.

Programme component 3: Public health in emergencies

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

DPRK Red Cross will elaborate an emergency health contingency plan; up to 15 staff and volunteers will be trained in emergency health and another 20 volunteers in epidemic control. The trained staff and volunteers will reach up to 50 per cent of the targeted rural population.

Programme component 4: Voluntary non-remunerated blood donation

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

Voluntary non-remunerated blood donation aims to increase the number of voluntary non-remunerated blood donors, relying on the Red Cross volunteers' network. Specific activities include training of volunteers and facilitating their promotional activities among local public such as raising awareness on the importance of voluntary blood donation in saving lives. Promotional leaflets have been printed and will be distributed, spotlighting *World Blood Donor Day* jointly with the ministry of public health and WHO.

b) Profile of target beneficiaries

The health and care programme for 2011 targets 8.25 million beneficiaries in 56 cities and counties of South Phyongan, North Phyongan, South Hamgyong and North Hwanghae provinces, and specifically mothers, newborns and children.

c) Potential risks and challenges

The IFRC country office will continue to work closely with the National Society and partner national societies to forecast potential risks. New infections like avian/pandemic influenza will continue to be a concern. A service continuation plan has already been drafted although further information sharing and consultation is required. General security regulations will be updated and discussed with all partners.

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

By the end of 2011, the total number of water and sanitation systems installed in the DPRK since the start of the water and sanitation programme in 1999 will have amounted to more than 350, reaching approximately 625,000 people. The 2010-2011 programme has an 18-month cycle, starting in January 2010 up to June 2011. The 2009 budget allowed several activities to be implemented for the 2010-2011 programme, such as the selection of the participating communities, the purchase of cement and steel bars, and the organization of a technical workshop. Subject to 18-month funding support, a new 18-month programme cycle is planned to start in July 2011 and run until December 2012, aiming to support between 15 and 18 communities.

The current programme includes household sanitation as well as upgraded sanitation in some community clinics and schools. It has previously been agreed in the water and sanitation programme to supply materials for ventilated improved pit (VIP) latrines to at least 10 per cent of the participating communities. In reality, approximately 15 per cent of households in participating communities are supplied with all necessary equipment to construct a VIP latrine, including materials to construct the sub-structure (underground) and the superstructure (above ground) components. The idea is to stimulate those households not participating in the project, to replicate the VIP latrines themselves.

In the upcoming programme cycles, the aim is to increase the number of households supplied with latrine materials to 20 per cent, and community schools with 30 per cent, while supplying all community clinics with new latrines.

Participatory hygiene and sanitation transformation workshops will continue throughout 2011 in the form of 'training of trainers', targeting kindergarten teachers, nurses, doctors, and hygiene promoters. The training focuses on hygiene awareness and hand washing. Other training topics to be included in the coming two years are awareness of saving water and education about the re-use of faecal matter as fertilizer.

Historically, there have been ongoing issues with power supply for the pumped water supply systems. This is mainly due to interruptions in power supply and low voltage, and has affected the ability of the pump stations to operate. It is desirable to have minimal reliance on municipal power supplies. This can be partly achieved by minimizing the pumped systems installed, and maximizing the number of gravity-fed water supply systems. However there are situations where it is impossible to rely solely on gravity for water supply. In these cases, it may be feasible to use alternative energy systems instead. A pilot project is planned for 2011 and will include the selection of a community, where a solar powered system will be installed. The aims of the pilot study will include:

- Capital costs and ongoing maintenance costs associated with the pilot project
- Reliability of the pilot project, including mechanical and electrical equipment
- Pumping efficiency of the pilot project, including either periods of low/high wind or periods of low/high solar radiation

Parallel with the implementation of new project communities, an impact assessment will be done on 40 projects completed in 2004-2005. Based on the results of the assessment, an upgrading programme will be implemented in an effort to assist the long-term sustainability and impact of the systems.

Up to 100 Red Cross volunteers will be trained on how to operate Red Cross emergency water and sanitation response equipment. Consumables required by the emergency response equipment such as chlorine and aluminium sulphate will be supplemented or replaced to ensure they remain viable.



DPRK Red Cross mobilized two EMWAT mobile water purification units to Sinuiju city, North Phyongan province, when the water supply system was damaged by severe floods in August 2010. As of 12 September, over three million litres of water was produced, supplying over 30,000 families with clean drinking water. Photo: DPRK Red Cross

b) Profile of target beneficiaries

Approximately 110,000 people in the target areas are vulnerable to waterborne diseases due to unsafe water and inadequate sanitation. The DPRK Red Cross water and sanitation programme aims to improve the water and sanitation conditions of these people, who reside in coastline, rural, and semi-rural areas of North and South Phyongan, South Hamgyong and South Hwanghae provinces.

Currently, most houses have access to individual traditional pit latrines, which comprise a single collection pit. Faecal matter is routinely used for fertilizer, but too often the faeces used are not yet decomposed enough, increasing the risk of disease transmission.

At villages, women and children commonly fetch water from wells and rivers located at considerable distances from their homes. Fetching water, boiling water and saving the grey water for re-use are daily tasks for village women. Providing 24-hour clean tap water service to the households would improve community health and also release women from these heavy household burdens.

An estimated 10,000 rural households are being targeted to receive community health information, to inform parents to continue providing fluids and food to at least 80 per cent of reported sick children with diarrhoea between 0 - 23 months old. Up to 70 per cent of volunteers trained in first aid will be able to properly apply first aid in at least 80 per cent of all emergency cases.

c) Potential risks and challenges

Delivery of materials is a key challenge in the provision of water supply systems. The agricultural season and cold winters mean that there are only two short seasons in the year when construction work including pipelaying and construction of wells, pump stations and storage tanks can be undertaken. Any delay in the arrival of materials reduces the construction time available to communities. This is particularly the case in the spring construction season when the materials for pipeline construction must be delivered in time for pipes to be put in the ground before rice transplantation commences.

Fluctuation in voltage and supply of electricity is another threat to water supply systems including pumps, motors, and control boxes. This in turn disrupts water supply service in the communities.

Using renewable energy supplies may solve some of these issues, and it would be desirable to conduct a pilot study for a renewable energy scheme.

Water quality assurances remains a critical area in 2011 and good collaboration with the government authorities is important.

Other challenges include the continuing aim for a 24-hour water supply, which is not yet the case. An important part of the water and sanitation programme includes input and involvement from international water and sanitation delegates, who could offer more assistance to the programme in ensuring the appropriate selection and design has been carried out if there were more access in the selection, assessment, and construction phases of the project.

Organizational development/ capacity building

a) The purpose and components of the programme

The organizational capacity of the DPRK Red Cross to address various humanitarian needs in the country has improved remarkably with international input in the past decade. Scores of successful relief operations, small or large, highlighted the Red Cross role and position as a leading humanitarian player. Inspired by its strengthened legal status with the adoption of the DPRK Law on the Red Cross Society in 2007, the National Society has further reinforced its strategic and policy directions, revised its statutes in a way that they can better contribute to the IFRC's Strategy 2020 and national priorities.

The organizational development budget for 2011 is CHF 329,987.

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

The 2011 organizational development programme support will focus on concluding the National Society's strategic commitment towards IFRC's Strategy 2010, while exploring new internal strategic directions according

to the Federation's Strategy 2020. Up to 1,000 different stakeholders including Red Cross beneficiaries are participating in deciding long-term organizational strategy and policies before having them approved in congress in 2012, which meets every four years. A total of 60 National Society leadership people will have improved their governing role for effective organizational management and scaled up service delivery through the leadership workshops and meetings. All these endeavours will generate more accountable trusteeship on DPRK Red Cross as an efficient long-term auxiliary organization and a reliable partner who strongly advocates for the vulnerable, guided by strategy and capable 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

Up to 5,000 volunteers will actively participate in community vulnerability and capacity building with appropriate skills and basic materials. Volunteering in emergency situations and in urban areas will be introduced and maintained while recognizing 3,000 volunteers who have shown prominent service records both during emergency and non-emergency situations. An additional 200 different volunteer leaders will have improved volunteer management skills and 5,000 volunteers will be directly engaged in addressing daily needs at community levels. Up to 200 Red Cross youth volunteers will provide peer education and training on Red Cross values and volunteering, and approximately 2,000 youth volunteers will actively contribute to help decrease vulnerability of communities. A volunteer-friendly environment will encourage volunteering in urban areas, enabling four city branches to function better. All these efforts will help branches and volunteer leaders to be more effective in volunteer management, and will create a culture of further valuing volunteers' contributions and lead to the improved well-being of communities.

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

A total of 60 provincial branch staff and up to 200 city/county branch volunteers will benefit from different trainings, training materials and knowledge sharing by the national headquarters. The headquarters staff in turn will improve their level of professionalism through international training and internal language training. The overall organizational capacity of the National Society will be strengthened by skilled managers in terms of effective management of human, financial and material resources with appropriate systems and structures, as well as in initiating and mentoring service-centred activities.

Programme component 4: Improving cooperation and collaboration with stakeholders

Outcome 1: DPRK RCS enjoys improved accountability and partnership with local partners

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

Cooperation with different stakeholders will be strengthened through continuous relationship improvement with media, dissemination campaign on major occasions and publication. The National Society will continue to inspire public support for those vulnerable groups, while aspiring to further raise its profile and that of the Movement across the country.

b) Potential risks and challenges

One key risk which may affect the organizational development programme is how the programme continues to operate if a disaster strikes. If implemented correctly, organizational development will assist a successful national response to a disaster. However, during a disaster, all organizational resources are mobilized in response, and programme activities are inevitably affected until relief actions settle down. Anticipating this unpredictable challenge, the programme work plan will be planned around the high-risk flood season, and the busy rice plantation season.

Leadership at headquarters, provincial and branch levels need to play a crucial role in supporting the aims of the organizational development programme. Training sessions and workshops are required to ensure that the leadership people understand the aims of the organizational development programme, and to encourage them to enthusiastically support our goals. Commitment from leadership is important to ensure that organizational development goals are realized, rather than merely being part of a theoretical plan.

Principles and values

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. 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. IFRC and ICRC continue to support the DPRK Red Cross in its programmes and will increase their support as plans are agreed upon between the National Society and donors.

Role of the secretariat

This section outlines how the Secretariat will support the National Society to implement the programmes described in the previous section.

a) Technical programme support

DPRK Red Cross has a solid reputation of efficient programme implementation, and its Red Cross programmes are supported by IFRC at various levels including the country office in the DPRK, the East Asia regional office in Beijing, the Asia Pacific zone office, and technical support regarding legal affairs, audit and medical logistics from the Secretariat in Geneva. To strengthen all the different programmes IFRC provides the National Society the possibility of receiving training and capacity building both in Beijing and Kuala Lumpur. Beijing will be the focal point for health training and Kuala Lumpur will be able to provide technical support in water and sanitation, organizational development, logistics and finance. For the next planning period, the country office hopes to strengthen and facilitate the relationship with water and sanitation and logistics expertise available in Kuala Lumpur to enhance the capacity of the National Society in these areas. The IFRC country office 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, and disaster management delegate. The IFRC office also comprises 14 professional national staff seconded by the National Society: finance officer, finance assistant, logistics officer, disaster management officer, health officer, health assistant, water and sanitation officer, reporting officer, fleet manager, office assistant and four drivers. In addition, 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, organizational development, community-based first aid, tracing and water and sanitation.

b) Partnership development and coordination

The CAS meetings have been held annually, and in some years, biannually, to provide the DPRK Red Cross and opportunity to discuss their priorities and challenges with partners. The most recent meeting was held in October 2010, hosted by the Swedish Red Cross, which provided the basis for agreeing on direction and plans for support in 2011 as it falls within the three year plan of 2009-2012. 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

IFRC supports the DPRK Red Cross regarding international representation in the DPRK as well as abroad. The IFRC 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, IFRC and the DPRK Red Cross coorganize events like 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.

IFRC and the National Society also regularly receive visiting international missions for programme discussions and briefings as well as hosting visiting delegations from partner national societies. Focus and support will continue in 2011 on national advocacy for the Red Cross Law and the revised statutes of the DPRK Red Cross. The country office will in the next period address the newly adopted humanitarian diplomacy policy of IFRC, to help the national society in coordinating closer with their government in areas of concern for DPRK Red Cross.

d) Other areas

The DPRK Red Cross has seconded some of their key staff for international relief work to IFRC. 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 IFRC 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 practice, cultural and traditional practises make the reality more complex. Women with children and elderly women are primary beneficiaries of Federation-supported programmes in the DPRK – such as health and care and water and sanitation. 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 IFRC office has a good gender balance in both international and national staff.

DPRK Red Cross maps out vulnerable groups in the community-based disaster preparedness programme planning process. Vulnerable people at the community level will 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 Federation-supported programmes in DPRK are verified in multiple and comprehensive ways, partly due to the complex political environment combined with relative lack of access to reliable information and data. 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 closely monitors income and expenditure, implementation and changes to the plan for regular reporting.

The finance unit of the DPRK country office ensures full compliance with IFRC's finance and procurement regulations, including international training for finance staff. IFRC 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 IFRC logistics department is recognized as a humanitarian procurement centre by DG 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 IFRC's supervision and monitoring. The National Society manages the logistics pipeline in-country with its own trucks and staff. IFRC systemizes quantitative data collected by a team of health monitors, who visit and follow up on the support to all 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 2011 to continue to express impact of the community-based disaster preparedness programmes, as well as measure impact on behavioural changes of training activities. The water and sanitation installations are reviewed after four to 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 levels.

How we work

All Federation assistance seeks to adhere to the <u>Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and is committed to the <u>Humanitarian Charter and Minimum Standards in Disaster Response (Sphere)</u> in delivering assistance to the most vulnerable.</u>

The IFRC's vision is to:

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.

The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

- 1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
- 2. Enable healthy and safe living.
- 3. Promote social inclusion and a culture of non-violence and peace.

Contact information

For further information specifically related to this report, please contact:

DPRK Red Cross Society:

Mr Ri Ho Rim, Secretary General; email: dprk-rc@co.chesin.com, phone: +85.02.381.4350, fax:+85.02.381.3490

IFRC DPRK country office:

 Mr Ole Johan Hauge, Acting head of country office; email: <u>olejohan.hauge@ifrc.org</u> phone: +85.02.3814350, fax: +85.02.3813490

IFRC regional office in China:

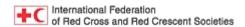
Mr Martin Faller, Head of regional office; email: <u>martin.faller@ifrc.org</u> phone: +86.10.65327162, fax: +86.10.65327166

IFRC Asia Pacific zone office in Malaysia:

- Mr.Jagan Chapagain, Head of operations, email: jagan.chapagain@ifrc.org
- Mr Alan Bradbury, Head of resource mobilization and planning, monitoring, evaluation and reporting (PMER), email: alan.bradbury@ifrc.org

Please send pledges of funding to zonerm.asiapacific@ifrc.org

<Budget summary and map below; click here to return to the title page>



MAAKP002 - Democratic People's Republic of Korea

Budget 2011

Budget 2011

All figures are in Swiss Francs (CHF)

| | Disaster Management | Health and Social Services | National Society Development | Principles and Values | Coordination | Total |
|----------------------------|------------------------|----------------------------------|------------------------------------|-----------------------|--------------|-----------|
| Supplies | 797,408 | 4,144,520 | 88,750 | | | 5,030,678 |
| Land, vehicles & equipment | | | | | | |
| Transport & Storage | 59,296 | 358,607 | 20,297 | | | 438,201 |
| Personnel | 388,082 | 937,297 | 54,358 | | | 1,379,737 |
| Workshops & Training | 177,840 | 143,482 | 94,275 | | | 415,597 |
| General Expenditure | 76,863 | 108,849 | 52,166 | | | 237,879 |
| Depreciation | | | | | | |
| Contributions & Transfers | | | | | | |
| Programme Support | 97,467 | 370,029 | 20,140 | | | 487,636 |
| Services | | | | | | |
| Contingency | | | | | | |
| Total Budget 2011 | 1,596,956 | 6,062,784 | 329,987 | | | 7,989,727 |

International Federation of Red Cross and Red Crescent Societies
Fédération internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

Democratic People's Republic of Korea

