

A move from humanitarian assistance to addressing underlying causes of malnutrition in DPR Korea

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Country Context

- Population: 23 million (2003)
- Fertility rate: 2 (1999)
- Under 5 Pop: 2 million
- Life expectancy: 66.8 years (1999)
- Urban population: 62%
- Total No. of province: 12

Country context cont'

Governance: DPR Korea an independent socialistic and revolutionary State guided by the *Juche idea* (*notion of people taking charge of their own destinies*)

Economy: Economy development based on central planning

- External factors (Cold war conflict with US and its allies, collapse of Soviet Union, market economy in China)
- Natural calamities of mid 1990s (famine and floods)

Implications of external and internal factors

- Damage and degradation of physical infrastructure (schools, hospitals, water/sanitation facilities)
- Lost opportunities to update on technology
- Erosion in quality and effectiveness of basic social services sectors
- Reduced industrial and agricultural outputs

Food Security

WFP/FAO Crop and Food Assessment
mission reports:

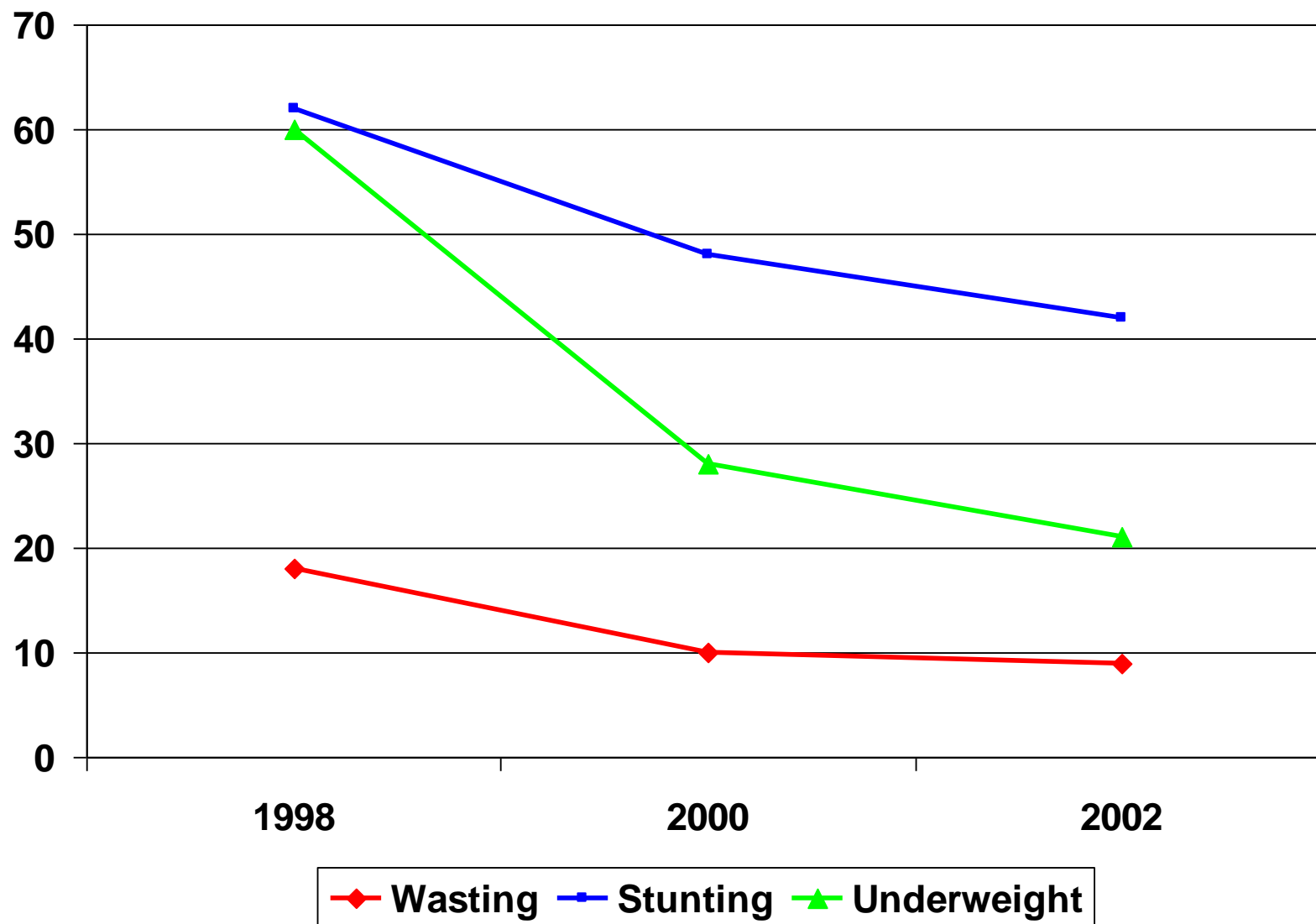
- 1.04 million tones deficit in 1998/1999
- 2.2 million tones deficit in 2000/2001
- 1.08 million tones deficit in 2002/2003

In 1997, DPR Korea received food assistance

Mortality rates

Year	IMR	U5MR
1990	14	27
1995	19	28
1997	21	43
1998	24	50
1999	23	48

Results of nutrition surveys



In-country collaboration between UNICEF and WFP in Emergency Nutrition

- UNICEF
 - Provide high energy milk (F100) for treatment of severe malnutrition
 - Technical support (development of Protocol/guidelines and training)
 - Provision of supplies (essential drugs/vitamins, and pre-mix for blended foods , i.e., RMB, CMB, WSB, Noodles)

UNICEF/WFP Collaboration

- WFP
 - Food commodities (rice/milk/wheat/corn)
 - Equipment for factory
 - Operation cost (partial)

Challenges

- Chronic emergency - CAP 2004
- Proportion of severely malnourished children remain same 3% of 2 million (70,000)
- Limited capacity of government to address nutrition/health problems
- Lack of access to information – evidence-based interventions
- Limited interaction with government counterparts

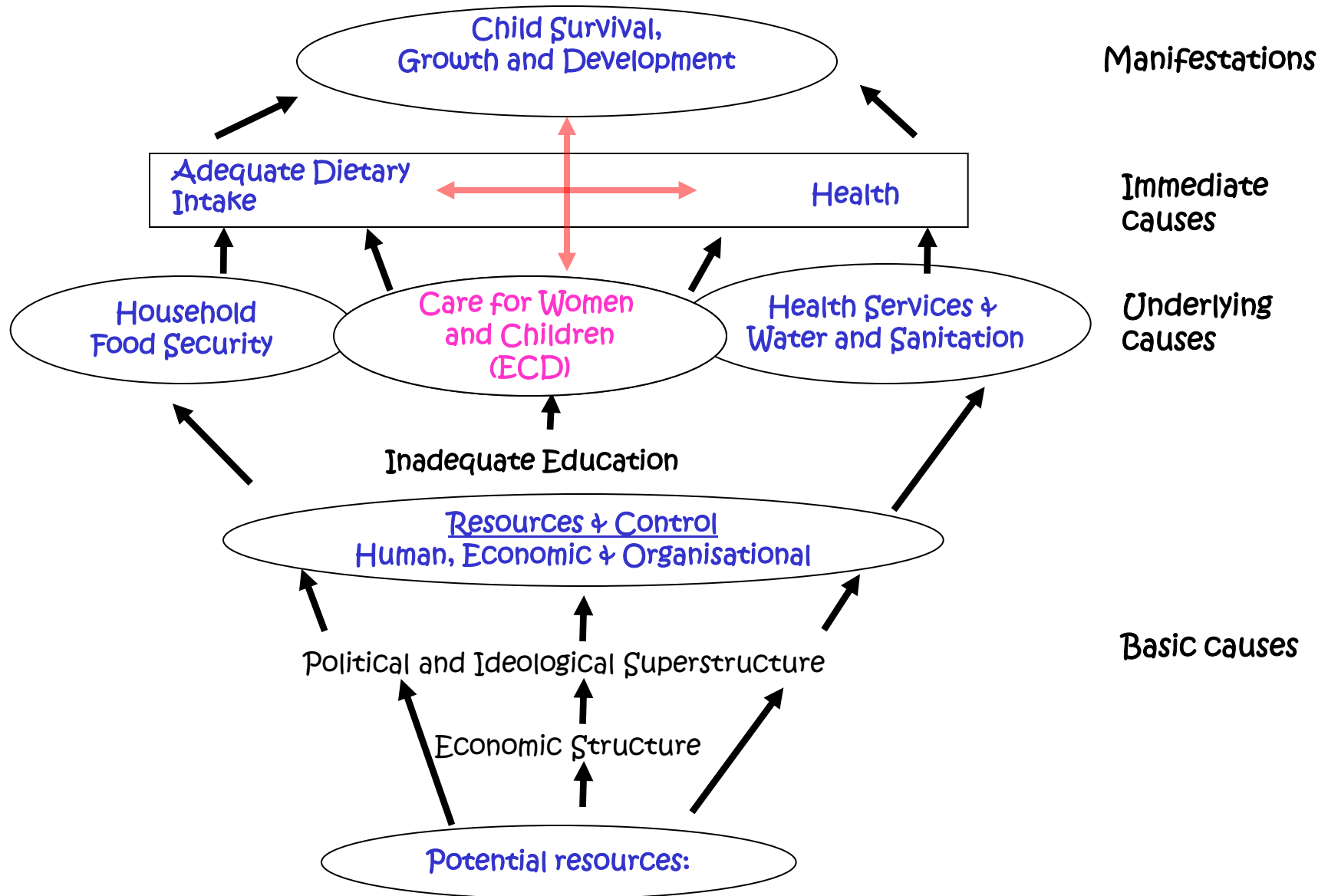
Why a need to shift in programme priority?

- High maternal nutrition (32%)
- High proportion of low birth rate
- Increasing trend in mortality
- High rate of stunting and wasting
- Poor caring practices

Caring practices cont'

- Institutional care during early childhood is the norm in DPR Korea (3 mo – 4 yrs)
- Law on nursing/upbringing adopted in 1976
- Ratio of care taker to child 1:10
- Lack of systematic contact/coordination with families
- Capacity of caregivers for early detection and appropriate is limited.

UNICEF Conceptual Framework



Conclusion

- Addressing underlying causes of malnutrition
 - ECD the core component of care practices
 - Focus on water/sanitation/hygiene
- Life cycle approach
- County focus
- Community involvement -Triple A approach

Thank you