Understanding the Challenges and Stakeholders in Providing Humanitarian Aid to North Korea

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The Democratic People’s Republic of Korea is in the midst of a protracted, entrenched humanitarian situation that is largely forgotten or overlooked by the rest of the world. 18 million people in the country are estimated to be in need of humanitarian assistance.

— Office for the Coordination of Humanitarian Affairs Regional Office Asia Pacific, March 2017

There is a growing humanitarian crisis with evidence of human rights violations mounting within the Democratic People’s Republic of Korea (DPRK). International politics related to decisions of the DPRK regime regarding their nuclear weapons program have led to highly restrictive international sanctions, deterioration of the humanitarian situation, and limitations on humanitarian aid for North Korean people. Immediate food and medical aid are most needed in the DPRK. Malnourishment, lack of access to safe drinking water, and inadequate sanitation and health services plague the North Korean population. Despite the obvious, current need for foreign assistance, world-wide humanitarian activities for DPRK remain critically underfunded.

There are multiple factors limiting coordinated foreign aid efforts to DPRK from international organizations, governmental agencies, and civic organizations, such as non-governmental organizations (NGOs). The geopolitical situation related to DPRK remains fragile and difficult for humanitarian aid donors to predict. This article will not address foreign aid by donor governments, but will describe the role of the United Nations (UN), South Korean aid groups, and other NGOs that are active in DPRK and the current challenges that these organizations face in delivering humanitarian aid to North Korea. The UN is the largest international contributor of humanitarian aid...
to DPRK. In 2018, the UN had less than a quarter of its budget for North Korean aid fulfilled, leaving an estimated 1.4 million North Koreans without food and 800,000 people without access to essential health services.\textsuperscript{13} Funding for the UN’s DPRK humanitarian programs in 2018 was the lowest it has ever been in the history of the UN.\textsuperscript{14} Many UN programs will be forced to close in 2019.\textsuperscript{15} Remaining UN programs will focus on supporting the most vulnerable populations in DPRK, including 1.6 million children under the age of 5 years old and 395,000 pregnant or breastfeeding women.\textsuperscript{16}

The tightening of international and UN sanctions on the DPRK beginning in 2016 and increasing in 2018 have had clear, tangible impacts.\textsuperscript{17,18} Additionally, the DPRK is highly vulnerable to recurrent natural disasters, which worsen the already dire humanitarian situation in DPRK.\textsuperscript{19,20} (See Figure 1.) The 2018 European Commission Inter-Agency Standing Committee Index for Risk Management ranked the DPRK’s...
disaster risk as 39 out of 191 countries. From 2004 to 2008, over 6.6 million North Koreans have experienced severe malnourishment, disease, or death resulting from natural disasters. DPRK had its lowest rate of food production in over a decade due to droughts and flooding, dropping 10 percent between 2017 and 2018, creating a significant food gap between supply and need. The dire need for UN sanctions exemptions for humanitarian aid to DPRK have been highlighted recently in the news as the humanitarian crisis in North Korea is expected to continue to worsen. This paper reports on the multiple factors affecting the current, growing humanitarian crisis in DPRK and describes organizations within the international community that are postured to collaborate to improve the DPRK humanitarian situation.

**Malnutrition**

DPRK’s humanitarian situation remains dire, with widespread chronic food insecurity and malnutrition afflicting most North Koreans. The DPRK population has over 25 million people. It is estimated that nearly 11 million North Koreans, or 43.4 percent of this population, are undernourished and in need of immediate food aid. According to the 2017 Multiple Indicator Cluster Survey, conducted by the Central Bureau of Statistics with support from the UN Children’s Fund, one in five North Korean children have stunted growth as a result of chronic malnutrition due to lack of vitamins, minerals, proteins, and fats in their diet. Additionally, approximately 140,000 children under five years old suffer from wasting with a high risk of mortality due to inadequate feeding, poor access to healthcare, drinking water, and sanitation service. North Korean adults are two to three inches shorter than age-matched South Koreans, as a result of persistent issues of food insecurity in DPRK. The UN Food and Agriculture Organization estimates that there will be a one-million-ton shortfall in domestic food production this year in DPRK. This represents a 9 percent decrease in food production compared to last year.

Food shortages in DPRK are multifactorial. DPRK is vulnerable to natural disasters. North Korean people remain extremely under-resourced to cope with the extreme environmental climate shifts that cause the severe droughts and massive flooding. Natural disasters have historically and will continually affect agricultural production in DPRK and the livelihoods of North Koreans. Widespread malnutrition in DPRK is also due to shortages of arable land, lack of access to modern agricultural equipment and fertilizers. Negative impacts on agriculture and food production, even if for only one season, have widespread and lasting impacts.

DPRK has been experiencing droughts, floods, and famine since the 1990s...
due to the time it takes to purchase and transport food.” In October 2018, the World Food Programme reported a $15.2 million requirement over the next 5 months to avoid closing programs that feed 650,000 women and children every month. This funding requirement was not met. The World Food Programme enters 2019 with the inability to aid the majority of the most vulnerable North Korean populations. The World Food Programme has a long-standing relationship with DPRK, stretching back 23 years, yet the World Food Programme chief stated in 2018 that “much progress has been made, but much work lies ahead.”

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Other Major Health Concerns: Lack of Adequate Healthcare and Basic Services

The UN reports that nearly 10.9 million North Koreans are in need humanitarian assistance to provide clean drinking water, basic healthcare, and sanitary services. North Koreans living in rural provinces farther from the capital Pyongyang are most afflicted by malnutrition and lack of health and basic services. It is estimated that in 2019, 4 million North Koreans will not have access to basic sanitation, 9 million will lack access to health services, and 10 million North Koreans will lack access to safe drinking water. In rural provinces, up to 56 percent of the population do not have access to safe drinking water, which is much higher than 39 percent living in urban areas. Both malnutrition and lack of access to necessary water and waste management services increase the rates of infection and spread of disease. DPRK already suffers from a broken health system that lacks the essential equipment and medicines to address the most common diseases afflicting North Koreans, such as diarrheal illness in children and tuberculosis.

Overview of the Fractured National Healthcare System in DPRK

After the end of the Korean War in 1953, DPRK was highly reliant on Soviet Union funding for implementation of socialist programs to include the development of the North Korean public distribution system and national healthcare program. The public distribution system provided food rations to all North Korean people and established free healthcare for all North Koreans. Chapter 3, Article 56 of the North Korean Constitution promises free public health care for all with a focus on preventative medical treatments to protect the lives of the people and improve the health conditions of workers. In the 1960s, the free healthcare system in DPRK was flourishing—it provided acute care, disease prevention, free medications, free hospitalizations, and free diagnostic testing to all North Korean people. The DPRK health system consisted of four tiers of hospitals—primary hospitals, country or “people’s hospitals,” province or “university hospitals,” and central hospitals and special hospitals that were dedicated to treating specific conditions (e.g. tuberculosis). There were doctors in every North Korean village. The section doctor system also known as the “household doctors” system, has one doctor responsible for the primary care of approximately 130 households, which serves as the foundation of the national primary healthcare system.

The collapse of the Soviet Union, however, initiated a downward spiral for DPRK healthcare. Lack of financial support from the Soviet Union compounded by the famine in DPRK in the 1990s led to complete collapse that the country still has not recovered from. North Korea’s current health system is fragile and is strapped for essential medical resources. While the basic infrastructure of clinics and
hospitals still exist, the healthcare workers are unable to effectively care for North Koreans due to lack of financial resources for medications, vaccines, power, heat, and modern lab and radiological equipment, communication and transportation.\textsuperscript{57} There continues to be limited supply of clean water, proper sewage disposal, and food shortages at treatment centers.\textsuperscript{58} Despite this, North Korean doctors strive to fulfill the DPRK’s ambitious plan to improve the average life expectancy of the population and improve health indices for North Koreans. Shortages of vehicles limits the mobility of the doctors, and dilapidated roads complicated by frequent natural disasters such as typhoons and flooding restrict the transport of essential vaccines, hospital supplies, and healthcare workers to rural areas.\textsuperscript{59} Communicable and non-communicable diseases remain the major health concerns in DPRK.\textsuperscript{60} Many DPRK health facilities struggle to maintain consistent water and electricity, putting patients at increased risk of infection and death.\textsuperscript{61} Diarrheal illness and pneumonia, two easily treated communicable diseases in developed countries, remain the two main causes of death for North Korean children under the age of five years.\textsuperscript{62} The World Health Organization estimates that over 90 percent of under-five deaths in DPRK could be prevented through adequate nutrition, essential medicines, and oral rehydration solutions.\textsuperscript{63} There have been significant improvements in DPRK rates of child and infant mortality in recent years, which is a clear indication that medical humanitarian aid efforts, such as World Health Organization vaccination programs focused on this vulnerable population, are making an impact.\textsuperscript{64} Medical humanitarian aid efforts, however, remain highly donor-dependent. Many young North Korean children are continuing to die from common and preventable illnesses. The most recent infant and children mortality rates in DPRK reported 12 and 15 deaths per 1,000 live births, respectively.\textsuperscript{65} Tuberculosis has long been one of North Korea’s most serious health problems.\textsuperscript{66} The rate of infection is 641 per 100,000 people, which represents one of the highest tuberculosis burdens in the world, especially given the lack of HIV/AIDS infections in DPRK.\textsuperscript{67} Tuberculosis is the world’s most deadly infectious disease, killing nearly half of all those it infects.\textsuperscript{68} Approximately 110,000 cases of tuberculosis are detected annually in DPRK. Underreporting of tuberculosis is also a known problem.\textsuperscript{69} Of the reported new tuberculosis infections, an estimated 5,200 cases are new multi-drug resistant cases.\textsuperscript{70} Multi-drug resistant tuberculosis means that the tuberculosis disease cannot be cured by the drugs usually used to treat tuberculosis in developed countries. The death toll for North Koreans from tuberculosis is very high. There are an estimated 16,000 North Korean tuberculosis-related deaths each year.\textsuperscript{71} Malnutrition and lack of consistent access to medication are key contributing factors to mortality rates from tuberculosis for North Koreans. Tuberculosis treatment requires months (and sometimes years) of sustained, regular access to medications. DPRK faces significant challenges in sustaining the pipelines for medical supplies without regular funding, which increases the risk of further transmission and increase rates of tuberculosis infections becoming resistant (e.g. turning into multi-drug resistant tuberculosis infections). DPRK continues to lack the resources required for effective diagnosis, treatment and follow-up of tuberculosis and multi-drug resistant tuberculosis, thus the country is highly reliant...
on efforts from international organizations and NGOs, such as Eugene Bell Foundation, to provide resources to address this growing epidemic.

**Stakeholder Analysis: Overview of Partners Providing Humanitarian Assistance in DPRK**

This article highlights the work of international agencies and non-governmental organizations that are currently providing humanitarian assistance in North Korea. It is recognized that due to the wavering geopolitical situation that this has fluctuated greatly over the past few years, many organizations, such as the Global Fund to Fight AIDS, Tuberculosis, and Malaria, have left DPRK, while others have intentions to provide aid but are denied due to the barriers of the international sanctions. This section will begin by highlighting the work of the UN system, in particular, by describing the long-standing and highly-valued efforts of UN agencies, funds, and programmes to combat disease and hunger. In DPRK, UN agencies have been the most consistent humanitarian donor structure over the past 25 years. No other donor structure has more experience, on-the-ground presence, and impact capability than the UN.

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**The United Nations**

The UN system is a conglomerate of international organizations made up of the United Nations and its affiliated programmes, funds, and specialized agencies, all with their own membership, leadership, and budgets. Many of these specialized agencies, such as the Children’s Fund, the Food and Agriculture Organization, the World Health Organization, and others are prominently working within the DPRK to improve the ongoing humanitarian crisis. The overall goal of the UN system in DPRK for 2017 until 2021 is “to support and reinforce national efforts to ensure people’s health and well-being, especially the most vulnerable.” To achieve this, the DPRK Humanitarian Country Team has agreed on the following strategic priorities: improving food security and nutrition, development of basic social services, strengthening resilience to recurrent disasters and sustainability, and improving data and development management.

The United Nations, founded in 1945, is currently made up of 193 Member States that, through the power vested in the UN Charter, take action against issues confronting humanity around the globe such as peace and security, climate change, sustainable development, human rights, disarmament, terrorism, humanitarian and health emergencies, gender equality, governance, food production, and more. The UN hosts six funds and programs—United Nations Environment Programme, United Nations Population Fund, UN-Habitat, United Nations Children’s Fund, and World Food Programme. The UN Children’s Fund works for children’s rights in over 190 countries, including DPRK, to correct issues that risk children’s lives, to defend children’s rights, and to help children fulfill their full potential from early childhood through adolescence. The World Food Programme is the world’s largest humanitarian agency. The World Food Programme aims to eradicate hunger and malnutrition worldwide with ongoing efforts beset by underfunding and shortfalls for the DPRK.

The UN also has fifteen specialized agencies, such as the Food and Agricultural Organization and World Health Organization. The UN specialized agencies are autonomous organizations that work with the UN through negotiated agreements to meet global needs.

The UN Food and Agriculture Organization
leads international efforts to fight hunger by negotiating food aid agreements between developing and developed countries and providing a source of technical knowledge and information to aid development. The World Health Organization is the UN directing and coordinating authority on all issues pertaining to international health. The World Health Organization coordinates international responses to humanitarian health emergencies, provides leadership on global health matters, shapes the health research agenda, sets health norms and standards, articulates evidence-based policy options, and provides technical support to countries to monitor and assess health trends.

The DPRK became a member state of the World Health Organization in 1973. After the World Health Organization established a country office in DPRK in 2001, there have been two five-year cycles of Country Cooperation Strategy between the World Health Organization and North Korean authorities, such as the Ministry of Public Health, that continue to work towards implementation of national people-oriented health policies to address the country’s health needs and priorities.

The UN Charter states that one of its major purposes is “to achieve international cooperation in solving international problems of an economic, social, cultural or humanitarian character.” This boils down to delivering humanitarian aid worldwide. The Office for the Coordination of Humanitarian Affairs of the UN Secretariat is responsible for coordinating humanitarian relief responses to emergencies. The Office for the Coordination of Humanitarian Affairs manages the UN Central Emergency Response Fund, which provides one of the most effective and rapid financial support for humanitarian relief to people affected by natural disasters and armed conflict. At the end of 2018, the World Health Organization received $3.478 million for tuberculosis treatment, the World Food Programme received USD $2.74 million and the Food and Agriculture Organization received USD $500,00 from the UN Central Emergency Response Fund for North Korea. Key UN entities utilized by the Office for the Coordination of Humanitarian Affairs to deliver humanitarian aid are the UN Developmental Programme, the UN Refugee Agency, the UN Children’s Fund, and the World Food Programme. UN Developmental Programme is responsible for operational activities for natural disaster mitigation, prevention, and preparedness.

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Six UN agencies currently operate from bases in Pyongyang, the capital city of North Korea. (See Figure 2.) These UN agencies plan humanitarian aid programs through or supported by the DPRK National Coordinating Committee. At the national scale, UN activities are planned in consultation with line ministries. For county-level programs, the local authorities and People’s Committees, that consist of representatives from the communities, are reportedly involved in all stages of the projects including planning, implementation, and monitoring. Through involvement of the People’s Committees, the UN identifies key issues and assigns resources to rapidly respond to the most critical needs. Transportation, distribution, and storage of goods provided though UN agencies are then typically carried out through the relevant government ministries to allow DPRK government to display their contribution to the projects. There are some regions of DPRK that UN international staff have no access to, and thus rely completely on DPRK authorities to deliver the humanitarian aid to these regions. Other regions become inaccessible due to poor road conditions during
Figure 2. Humanitarian Aid Organizations Operating in DPRK in 2019
winter months or floods. Lastly, the North Korean government has historically limited interactions and collaboration between the UN and other international partners (such as international non-governmental organizations). This leads to some collaboration challenges between the different ongoing humanitarian aid efforts.

**International Non-Governmental Organizations**

At the start of 2019, there were five international non-governmental organizations (INGOs) based out of Pyongyang: the International Federation of the Red Cross and Red Crescent Societies, the International Committee of the Red Cross, Swiss Agency for Development and Cooperation, European Union Programme Support (EUPS) units such as Food Security Office, and FAHRP/FIDA International. A French Cooperation Office (hosting French INGO Premiere Urgence Internationale) and an Italian Cooperation Office also have humanitarian operations based in North Korea. This year has been marked with UN 1718 Sanctions Committee re-examination of application of UN sanction exemptions. There has been an influx of UN sanction approvals, mainly in support of projects working through one of the five major INGOs already established in Pyongyang. For example, World Vision International and Swiss Humanitarian Aid (a sub-organization of the Swiss Agency for Development and Cooperation already working in DPRK) were granted exemptions to provide water, sanitation, and hygiene aid to Sobaeksan village in Samjiyon County and solar powered water-pump supply systems to North and South Hwanghae Provinces, DPRK in February 2019. Additional INGOs working through EUPS units (such as Irish Concern Worldwide with EUPS 3, German Deutsche Welthungerhilfe with EUPS 4, and Humanity & Inclusion with EUPS 7) were also granted UN sanction exemptions in February to provide water, sanitation, and hygiene, solar-powered water pumps, and equipment for storage and productions of seeds. In March, additional approvals for humanitarian projects in DPRK were granted by the UN sanctions committee to French INGO Triangle Generation Humanitaire, Canadian First Steps Health Society, and Medecins Sans Frontieres (also known as Doctors Without Borders) allowing these INGOs to bring aid and equipment into the country to help treat chronic health and nutrition problems in the country. As of March 15, 2019 the 1718 UN Sanctions Committee has approved 21 total sanctions exemptions, each granted for 6-month duration. The majority (14 out of 21) were granted to INGOs to provide humanitarian aid in DPRK.

Notably, the DPRK has historically not allowed collaboration between UN system projects and INGOs. However, in 2018, the DPRK government approved a partnership between EUPS 7 Humanity and Inclusion, the Korean Federation for the Protection of the Disabled, and the UN Children’s Fund. The focus of this humanitarian aid project is for early screening and detection of disability in children during early childhood development. This collaboration marks the first UN, international NGO and national NGO collaboration in DPRK. The remaining INGOs operating in North Korea work through the Korean European Cooperation Coordination Agency to coordinate and manage aid projects. The exception is that the International Federation of the Red Cross and Red Crescent Societies works directly through the DPRK Red Cross. The UN-led Humanitarian Country Team holds formal weekly meetings that bring together all humanitarian
aid organizations operating out of Pyongyang. Inputs from the Sector Working Groups are brought to the Humanitarian Country Team meetings.\textsuperscript{108} Informal inter-agency meetings are also held weekly in Pyongyang. DPRK diplomats, potential aid donors, and occasionally representatives from visiting non-residential aid organizations are present for an informal exchange of information related to DPRK humanitarian relief efforts.\textsuperscript{109} These informal meetings are often the extent of communication and coordination of humanitarian activities between the UN, INGOs, and non-resident national NGOs and other agencies.\textsuperscript{110}

Political concerns that the DPRK regime funnels aid assets towards its nuclear weapons program and military have caused many non-residential non-governmental organizations to discontinue operations in DPRK.

Non-Residential Non-Governmental Organizations

Non-residential NGOs are non-profit, charitable humanitarian aid organizations that do not have offices based in North Korea but have continued long-standing humanitarian activities inside DPRK. It is estimated that in the past 23 years, there have been at least 215 non-residential non-governmental organizations that have operated inside the DPRK providing humanitarian relief, development, health services, informal diplomacy, technology, communication, and education assistance since the fall of the public distribution system and famine in the mid-1990s.\textsuperscript{111} Currently, most non-residential non-governmental organization assistance in DPRK targets food insecurity, health needs, and sanitation issues.

Political concerns that the DPRK regime funnels aid assets towards its nuclear weapons program and military have caused many non-residential non-governmental organizations to discontinue operations in DPRK. One example is the discontinuation of the Geneva-based Global Fund to Fight AIDS, Tuberculosis, and Malaria. The Global Fund to Fight AIDS, Tuberculosis, and Malaria dispersed more than $100 million in grants from 2010 to 2018 in DPRK, supporting the treatment of nearly 190,000 North Korean tuberculosis patients in 2017 alone.\textsuperscript{112} In June 2018, the Global Fund to Fight AIDS, Tuberculosis, and Malaria announced it was ending all funding and operations in DPRK because it could “no longer accept North Korea’s unique operating conditions.”\textsuperscript{113}

For the few remaining non-residential non-governmental organizations, they continue to experience significant difficulty with maintaining their efforts in DPRK due to the recent tightening of international sanctions.\textsuperscript{114} Eugene Bell Foundation, based in the U.S. and South Korea, Christian Friends of Korea and Mennonite Central Committee, both based in the U.S., are examples of religious-based non-residential non-governmental organizations that have continued to successfully provide humanitarian aid, including treatment of multi-drug resistance tuberculosis, in DPRK for over 20 years.\textsuperscript{115,116,117,118}

South Korean-based NGOs are another group of influential actors in providing humanitarian aid to DPRK. The South Korean constitution claims sovereignty over the entire Korean Peninsula and its citizens, and thus the Republic of Korea has a Ministry of Unification that tightly oversees the work of all South Korean based NGOs operating in DPRK as part of the Ministry of Unification’s responsibility to actively track and monitor the internal capability of South Korea to provide humanitarian assistance and disaster response assistance anywhere on the entire Korean peninsula.\textsuperscript{119} The Korea NGO Council for Cooperation with North
Korea is a South Korean organization that includes more than 50 NGOs based out of Seoul.\textsuperscript{120} The Korea NGO Council for Cooperation with North Korea was founded in 1999 to assist the Ministry of Unification with overseeing South Korean humanitarian aid to North Korea, even when aid efforts have been limited by the geopolitical situation.\textsuperscript{121}

Republic of Korea government support for South Korean NGOs working in North Korea waxes and wanes with the political party. In 2010, when DPRK sunk the South Korean naval vessel, the Cheonan, leading to the death of 46 Republic of Korea sailors, the Republic of Korea government withdrew support for DPRK humanitarian aid.\textsuperscript{122} In 2017, however, through the influence of Moon Jae-in administration in South Korea, NGO activity and capacity in DPRK grew to over 100 Ministry of Unification-registered South Korean NGOs providing humanitarian aid in DPRK.\textsuperscript{123} Recently, South Korean NGOs have played a vital role in providing humanitarian assistance to DPRK. The Republic of Korea Ministry of Unification reported that South Korean NGOs provided 4.7 billion Korean Won in humanitarian aid to DPRK in 2018.\textsuperscript{124}

**Conclusion**

Given the significant impacts of geopolitical complexities on the growing humanitarian crisis in the DPRK caused by prolonged food insecurity, lack of basic services, and disease, North Korea watchers should make every effort to understand the situation on the ground. At the same time, they must seek to understand the resources available from the international humanitarian aid community that are poised to deal with potential humanitarian crises. \textit{IAJ}

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