**Country Review  December 2010**

**DEMOCRATIC PEOPLE’S REPUBLIC OF KOREA AT A GLANCE**

<table>
<thead>
<tr>
<th>Indicator</th>
<th>2007 Value</th>
<th>Source(s)</th>
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</thead>
<tbody>
<tr>
<td>Total population (thousands)</td>
<td>23,790</td>
<td>[1a]</td>
</tr>
<tr>
<td>Annual population growth rate</td>
<td>0.4%</td>
<td>[1a]</td>
</tr>
<tr>
<td>Population aged 15-29 (thousands)</td>
<td>12,929</td>
<td>[1a]</td>
</tr>
<tr>
<td>Percentage of population in urban areas</td>
<td>62%</td>
<td>[1a]</td>
</tr>
<tr>
<td>Crude birth rate (births per 1,000 population)</td>
<td>13.3%</td>
<td>[1a]</td>
</tr>
<tr>
<td>Under-5 mortality rate (per 1,000 live births)</td>
<td>55</td>
<td>[1b]</td>
</tr>
<tr>
<td>Human development Index (HDI) – Rank/Value</td>
<td>No data</td>
<td>n.d.</td>
</tr>
<tr>
<td>Life expectancy at birth (years)</td>
<td>66</td>
<td>[1b]</td>
</tr>
<tr>
<td>Adult literacy rate</td>
<td>No data</td>
<td>n.d.</td>
</tr>
<tr>
<td>Ratio of girls to boys in primary and secondary education (%)</td>
<td>n.d.</td>
<td></td>
</tr>
<tr>
<td>GDP per capita (PPP, $US)</td>
<td>n.d.</td>
<td></td>
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<tr>
<td>Per capita total health expenditure (Int. $)</td>
<td>n.d.</td>
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</tbody>
</table>

[1a] Data from the United Nations Development Programme (UNDP).
[1b] Data from the World Health Organization (WHO).
[n.d.] No data available.
HIV EPIDEMIOLOGY AND TRENDS

As of 2007, the Democratic People’s Republic of Korea (DPRK) had an estimated population of 24 million, of which 24% are young people aged 10-24 years. Very little data on HIV prevalence and incidence is available. The UNAIDS 2006 Report estimated that fewer than 100 pregnant women are living with HIV and AIDS in the country [2].

WHO ARE AT RISK OF HIV IN DEMOCRATIC PEOPLE’S REPUBLIC OF KOREA?

A 2004 Reproductive Health Survey showed that only 3.5% of husbands surveyed were aware of the most common ways to transmit HIV, i.e. through sexual intercourse, blood transfusion, mother-to-child, and sharing needles [3]. On the other hand, knowledge about prevention, was much higher (Figure 1). Moreover, there was a marked disparity between rural and urban areas and between men and women in terms of knowledge about HIV prevention. For instance, the percentage of men who know two ways to prevent the transmission of HIV in urban areas is 28% whereas this figure was 10% lower in rural areas. In the same urban area, women's knowledge is 12% lower than that of men.

It is important to note that conclusions about knowledge of HIV and AIDS vary significantly among surveys in DPRK. For example, according to the UNICEF 2004 Baseline Assessment in three counties, 86% of women were aware of HIV and AIDS and 88.9% of them knew about some preventive measures [4]. According to this survey, 83.2% of women were aware that the infection could be passed on from mother to child during pregnancy, whereas the abovementioned UNFPA survey found that only 7.7% of women were aware of this sort of transmission.

Figure 1: Knowledge about two ways to prevent HIV transmission among urban and rural men and women, 2004

Source: UNFPA, 2004 Reproductive Health Survey, as cited by UNICEF. Analysis of the situation of children and women in the Democratic People’s Republic of Korea, 2006
Vulnerability Factors

- There is little-to-no knowledge on sexual behavioural patterns and the prevalence of other sexually transmitted infections amongst young people in DPRK. However, risk factors for HIV and AIDS exist, such as injection drug practices.
- HIV and AIDS education is limited in the educational facilities such as medical universities and colleges. As result, there is little public awareness of HIV and AIDS among health professionals who have completed their formal education; they are lacking knowledge of whole range of issues involved in HIV & AIDS [3];
- Low quality of blood transfusion services;
- Increasing cross-border travel between DPRK and China – a country with a growing rate of HIV infection – could heighten the risk of potential exposure to HIV within the country.

NATIONAL RESPONSE

Governance

Recognizing the increasing number of HIV cases in neighboring countries, the Government of DPRK has taken measures to respond. DPRK has established a National HIV & AIDS Prevention Commission, HIV testing labs in every provincial “anti-epidemic station” as well as in main border cities and counties.

In 2003, the government developed a National Strategic Plan of HIV & AIDS Control and Prevention, 2003-2007. This strategy outlines a framework for HIV control measures. The DPRK maintains the following strategic principles in the prevention and control of HIV and AIDS:

- Promoting social education to establish a sound cultural and ethical norm in all aspects of life;
- Establishing an effective nationwide epidemiological HIV and AIDS surveillance system so as to implement the proper preventive and control activities;
- Informing the incidence, treatment and prevention of AIDS to various regions and countries so as to strengthen exchange and cooperation.

The World Health Organization has worked with the Government DPR of Korea to develop a country cooperation strategy with the aim of responding to the priority health problems in the country [5]. The priority areas identified for support are:

- Improvement of surveillance of HIV and other STIs;
- Advocacy for better access to and use of condoms at the community level;
- Improvement of knowledge and skills for prevention and management of STIs; and
- Strengthening of interagency and multi-sectoral coordination.

According to a document by the Ministry of Public Health [5], DPRK has the widespread infrastructure to provide health services to its population. A systematic step has been taken to improve the health and well-being of people, particularly women and children. The fundamental principles of the national health policies include universal and free medical care and services, including prevention and curative services.
HIV prevention programmes

HIV and AIDS surveillance falls under the responsibility of health workers addressing communicable diseases in selected health facilities with HIV testing. HIV testing services are being provided in all central and 12 provincial HIV testing centers. However, there is a lack of surveillance in peripheral regions due to the shortages of equipment and supplies for HIV testing. The well-organized extensive network of the healthcare system represents a strong basis for preventing a potential spread. However, the lack of an integrated HIV and AIDS prevention and control system, involving all the relevant government, non-governmental agencies and communities including Ministry of Public Health, remains an unmet challenge in effectively preventing and controlling the spread of HIV and AIDS.

Condom use is extremely low among young people, aged 15-19. Indeed, only 0.5% of young men and 0.3% of young women surveyed by UNICEF had ever used a condom (Figure 2) [3].

Figure 2: Percentage of young people (aged 15-19) who ever used a condom, 2004
References