



# CHRISTIAN FRIENDS OF KOREA

## 조선의 그리스도인 벗들

December 2015

*"In all things I have shown you that by working hard in this way we must help the weak and remember the words of the Lord Jesus, how he himself said, 'It is more blessed to give than to receive.'" Acts 20:35*

### CFK Visits the DPRK, November 5-24

Several CFK teams, including members from Norway, Australia, China, and the US (14 people total), visited DPRK from November 5-24. Despite a number of significant challenges, it was a highly productive visit – including 2700 km of travel, visits with 27 care centers, the signing of two new agreements with the Ministry of Public Health, screening of 384 patients for possible hepatitis B therapy (including running 1300+ lab tests) continuing training at the National Tuberculosis Reference Lab, and repairing of water systems and critical equipment along with other work. We began on November 5<sup>th</sup> at our warehouse in Pyongyang installing batteries into solar lighting systems previously shipped from the US for distribution to care centers, and also delivering and installing new flooring at the National TB Reference Lab.

CFK is blessed to have many highly skilled people involved in our work, who bring their specialized training and experience to bear in varied fields. The dedication and willingness of our trip participants enable us to have different teams working in the country at the same time, each doing their own specialized work but within the context and framework of one overall visit. In this way, we are able to do much more on one trip than we could if we solely focused on one task at a time.

### New Hepatitis B Treatment Program Screening Work Starts

On November 7<sup>th</sup>, three hepatitis team members, including a gastroenterologist/hepatologist and an experienced nurse from *Hepatitis B Free*, and a clinical lab expert from *Global Care Partners*, surveyed the need for a hepatitis B



*Dr. Alice Lee preparing a blood draw for a patient at Pyongyang #2 (Hepatitis) Prevention Hospital*

treatment program. This is a brand new program in the early stages of development, and prior to coming, we had asked to see 50-100 patients in the pilot project hospital sites of Kaesong and Pyongyang. We were greatly surprised by the enthusiastic response and clear desire for this program, and within four and a half days, our joint team worked side by side with local hospital staff to examine 132 patients in Kaesong and 252 patients in Pyongyang. Examinations included patient histories, a physical exam, photograph, height/weight measurement, ultrasound scan, and blood tests. Gratefully, staff that we have worked with since 2008 at the National TB Reference Lab (NTRL) readily agreed to run the chemistry and hematology tests on all the samples from these patients, using equipment supplied to them by CFK.

Over 1,300 individual tests (a huge workload) were completed in just a few days despite occasional power outages and other challenges. We were grateful to have reliable results to inform treatment decisions for hepatitis patients, for the remarkable flexibility shown by staff working across disease systems, and



to see real fruit from many years of training and support to the chemistry and hematology departments at the NTRL. (For more information on the new hepatitis B initiative, please see Dr. Alice Lee's article on page 5.)

Many patients had advanced disease and will need treatment that will impact their lives. There was an overwhelmingly large number of young adults, and some children, as young as 10 years. They will greatly benefit from antiviral treatment, restoring many to long-term health. Our trip made very clear the significant need for this project, and the real hunger on the part of health officials, hospital staff, and patients alike to see this program move forward as quickly as possible. The project will require renovation of the hospital labs in both places, provision of other equipment such as ultrasounds, fibroscans, training, education, and antiviral therapy, as well as long-term, regular examination and review of patients receiving antiviral treatment by both internal and external physicians. For the first time in the DPRK, we are grateful for this very special opening to bring real hope in Jesus' name for suffering hepatitis B patients.



*Testing Blood Samples at the NTRL*



*Opening staff meeting at Kaesong #2 (Hepatitis) Hospital launching the new hepatitis B project*

## Other Work Completed

While we were in Kaesong engaged in the hepatitis screening project, other team members were able to make repairs to the water system at the Kaesong Provincial Pediatric Hospital, a hospital that cares for tens of thousands of children every year. They also confirmed various shipments, and delivered a new portable ultrasound instrument to the hospital (something they said they had only dreamed of having). The staff was so excited to receive the instrument that they informed the mayor, who came to see it the following morning, and said that they expected it would help at least 15-20 patients a day, henceforth.



*Sohung #3 (TB) Rest Home*

## Confirming Activities and Travel

On November 14<sup>th</sup>, two team members departed and nine others arrived to continue our usual late fall confirming visits to the TB hospitals and rest homes, scattered throughout the countryside. The travel was difficult and long on rough roads, filled with bicycles, handcarts, ox carts, tractors, occasional big trucks and pedestrian traffic, but it is always good to visit with the directors, staff, and patients of the facilities we are helping. We saw fresh food growing in greenhouses, clean water pumping from newly drilled wells, inspected newly installed roofs, windows, and doors that are greatly improving living conditions for patients, heard directly from patients how they are being cared for in these places, and brought greetings and love from you, our donors, partners, and supporters who help make all this possible. In turn, it was our privilege to receive on your behalf many expressions of sincere gratitude – from stories shared, to patients cared for, to meals carefully prepared and shared with our visiting team.

We were asked to visit a rest home in Sohung this time – a new place to us – to consider whether or not we could start giving support. When we went to visit the rest home, I was struck



by the contrast between this rest home and places where we have worked for some time. The visible differences that come through the provision of a small tractor, a greenhouse or two, clean water, blankets, canned meat, and other basic goods is really significant. We heard more reports this time from many directors about the food they are able to produce in the greenhouses. Most greenhouses are producing at least 2-3 tons of fresh produce each year, growing at least 3 crops of vegetables annually including crown daisy, lettuce, cabbage, spinach, tomatoes, cucumbers, onions, and beets.

We saw many thriving greenhouses, including crops grown from seeds that we have provided. The canned meat donated by *Christian Aid Ministries (CAM)*, *Mennonite Central Committee (MCC)*, and special fortified food provided by *Stop Hunger Now* continues to really impact patient lives. Protein and nutritional support, sent through *CFK*, fills on average 20-50% of the need, and directors inform us that very sick patients especially benefit as it is more easily digestible. Directors report that patients gain on average at least 5-6 kg of weight during treatment with some gaining much more; this contributes greatly to their overall health and recovery.



Unryul #3 (TB) Rest Home

## Water Wells and Handpumps Greatly Impact Patient Care

Directors report that new water wells and water pumps drilled and installed this year have virtually eliminated diarrhea and stomach upset and have saved tremendous amounts of staff time that had been previously spent traveling long distances to collect water. One facility said, *“The new well has made a big difference. In the past, with four people and our tractor and trailer, water collection took 2-3 hours. They had to make an 800m round trip for water. Too, now I know the quality is good and consistent all the time. In the past, when heavy rains fell, the water turned cloudy and the quality was affected.”*

In 2015, 11 water wells were drilled at our various facilities and hand pumps installed. With your help, we hope to drill at least 10 more wells in 2016.

The new water systems that we installed in late August at the North Hwanghae #3 (TB) Prevention Hospital and Paechon County #3 (TB) Rest Home are both working beautifully. Both directors expressed their gratitude for the new systems that store and distribute clean water to many locations in their compound. One place reported, *“Before the water system and well was installed, four members of our staff spent half of every day collecting water by bucket for the greenhouse from a source ½km walk from this rest home. Two other staff members spent considerable time collecting water for use in cooking and drinking – now no one has to go and get water because it is right where they need it! Furthermore, one of our patients was at this rest home when the water system was installed. Before the system was installed, he used to collect water from 500 meters away. After, he stayed at the rest home for two more months. He didn’t have to go too far for water any longer. He said the water here is much better than the mine area where he came from – he fully recovered.”*

At each place this time we delivered new solar lighting systems. Each system includes a charge controller with battery charging box, voltage indicator light, 2 ports for wired lighting, 4 USB recharging ports, 8 rechargeable lanterns, a wired desk lamp and overhead light, 12V warm LED bulbs, and a solar panel. This has been a long-awaited and often-requested support, since many places get very limited grid power and others don’t get any at all. It was such a joy for us to see the delight on many faces as the warm light illuminated our meetings when visits lasted past sundown, which was around 5:30 p.m. One director summed it up well, *“the brightness gives me happiness!”*



A rechargeable lantern brings light and joy to Songrim #3 (TB) Rest Home





*Director of Shinwon #3 (TB) Hospital driving his CFK-supplied motorcycle on a rainy day to meet with us*

Rainfall, turning dirt roads into impassible mud, prevented us from visiting three places, but staff from each facility braved the elements to visit with us by the side of the road. In one case, the director went out of his way to meet us at a local inn. The motorcycles and cargo tricycles sent by CFK last year have really benefitted many directors, making meetings such as this possible even when conditions are especially difficult. It's humbling to see the trouble and effort directors go through to meet with us, making our joy of meeting with them that much sweeter.

Our visit was during Kimjang time – this is when Chinese cabbage is harvested, trucked, washed, salted, brined, packed with red pepper, garlic, and other flavorings and put away for the winter supply of kimchee. Driving through the countryside, rice was in the final stages of being threshed and loaded onto trucks and trains to be sent to other areas for distribution. Fields were being tilled for the winter, and corn stalks were being gathered. The morning of our departure, temperatures turned biting, warning of the coming winter.

During our visits, we continue to observe various changes in the DPRK. Pyongyang is a bright and shining city compared with the rest of the country with many newly painted or retiled buildings coloring the cityscape. People dress smartly, and the many taxis, now readily available in the city, have increased traffic considerably. New buildings and many other sites, including the new airport and the Science and Technology Center located conspicuously on an islet in the Daedong River, are brightly lit. Meanwhile, many balconies in the city sport solar panels, attesting to the importance of individual self-reliance for lighting after dark. Solar panels can be seen on many south-facing balconies in the countryside, as well, but they are fewer in number. At night, those apartments lit after dark usually have the outline of a privately-owned solar

panel in the window. In contrast with Pyongyang, however, the countryside remains much more subdued.

## TB Rates on the Rise

While we see much progress, especially at the individual institutions where we work, tuberculosis (TB) rates are continuing to rise countrywide. The World Health Organization 2015 report indicates TB incidence in the DPRK is now more than 442: 100,000 and rising. We heard in our travels that active case finding is underway, meaning that household doctors are more actively working to find new cases, and hopefully, treat them. But many of the same underlying factors of poverty and malnutrition are still present, including lack of clean water and sanitation, close living quarters, weakened immune systems, and systemic health sector weaknesses which are all contributing to the still-rising epidemic of TB. Our practical support is still greatly needed, and it is saving many lives every year.

## 2016 Plans

With your help, as we look ahead to 2016, we hope to continue our existing base of support to TB and hepatitis care centers by sending shipments of canned meat and other needed nutritional support, sending more greenhouses, well drilling and pump installation for places still in need of clean water, installation of more solar/gravity water distribution systems, and other projects, including renovations and lighting. In addition, we hope to start patients on antiviral hepatitis B therapy in late spring, after seeing short-list patients again in March and May and continuing development work on the project. Meanwhile, we will also be working on renovating and equipping the laboratories at the #2 (Hepatitis) Prevention Hospitals in Kaesong and Pyongyang in order to support the furthering of the hepatitis B treatment program.



*TB Patients at Kumchon #3 (TB) Rest Home*



*Dr. Alice Lee and local doctors interview a patient*

## **In Her Own Words: New Hepatitis Initiative**

by Dr. Alice Lee, *Associate Professor  
Gastroenterologist/Hepatologist*

*University of Sydney, Macquarie University  
Co-founder, Hepatitis B Free, [www.hepatitisbfree.org.au](http://www.hepatitisbfree.org.au)*

**A**nticipation and hope, this is how I would best describe my emotions, as I prepared for the November trip. It felt like forever that I had been working on this, but in retrospect, it had been such a rapid journey that I am amazed at the speed of progress. I guess it is a true reflection of the sense of urgency by our partners in the DPRK as well as my own. Having decided that it was possible to introduce antiviral therapy into North Korea, as far as I am concerned, it cannot happen fast enough.

Hepatitis B causes over 700,000 deaths worldwide per year. One person dies every minute from hepatitis B. Death is caused by liver failure and liver cancer. There is a great deal of suffering associated with it. This tends to be a very rapid process. A person can live for decades with hepatitis B but then succumb to its complications within months. The stealth nature of this disease until it is far too advanced, makes it even more dangerous. There are many strategies available to address this, including prevention, increasing awareness, monitoring, and for those with progressive disease, specific antiviral therapy. This improves survival and reduces suffering.

Like malaria, tuberculosis, and HIV, the greatest burden of hepatitis B is on those who live in the poorest places. Despite the safety and effectiveness of the medicines for hepatitis B, it has been out of reach for most who live in the resource poor settings. Costs of medicines have been prohibitive, diagnostics, and monitoring unavailable with complex treatment pathways. This is changing.

Having worked our way around all of these issues, we arrived in North Korea in November having secured a donors commitment to provide lifesaving antiviral medicine for the initial phase of the program. This was nothing short of a miracle. There was going to be a lot of work to do.

Our team cared for nearly 400 North Koreans with hepatitis. I met each person, spoke with them, examined them, and then assessed their ultrasound findings as well as interpreted the lab results. I was humbled by this, this chance gifted to me to make a difference. Those we saw were young, some very, very young. Many had advanced disease and despite the limited time I had with them, the suffering was palpable. Amongst all of this was hope, they had heard that this was possible, they had come with trust that we would do our best. This trust in us, in the promise of hope, and what relief it could bring makes me catch my breath each time.

I worked side by side with the local physicians who knew those in their charge so well. They were their advocates, they were the guardians of their patients whom they clearly loved. Like any partnership, there was an initial phase of awkwardness, but within a few hours, we were engrossed in detailed discussions about patients, making hard decisions, and laughing at the same stupid jokes. We had this extraordinary time where we were all the same.

I am now safe at home, back at work in Sydney, and wondering if it ever really happened. Except for the constant stream of emails, working on the multiple facets of this program, it could easily have been a dream. But late at night, laboring over the photos, the results and making heart-breaking decisions on who will have this medicine first, I know it is real. The suffering is raw, the needs endless but even more than that, there is joy in the hope in having the chance to affect the lives of those who need it. They will be waiting for us.

Finally, earlier this year, we were approached by the Ministry of Public Health (MoPH) and asked to support the procurement and set-up of a roofing tile-making machine in the DPRK. Up until now, we have been sending insulated steel sandwich-roofing sheets from China for specific projects. But the MoPH reports that there are many health care facilities in our supported area and well beyond that still need roofing, so they would prefer to expand their local capacity to make roofing tiles for the facilities.

They have a reliable supply of the main ingredients needed for production of the roofing tiles: sand, concrete, fly ash, and water. We recently made a visit to the factory in China that makes the roofing tile-making machinery, and we also visited the site in the DPRK where MoPH hopes to house this equipment. We think this can be a workable solution and anticipate moving forward in a stepwise fashion to supply the equipment and training needed, concurrent with progress MoPH makes on site, utilities and building preparation. In exchange, MoPH has agreed to supply roofing tile needed at various CFK supported facilities. (The estimated cost for the tile machine, installation and training is \$50,000.)



As we close out this 20th year of work in the DPRK, we marvel at how God is using this small organization as a vessel to impact the lives of thousands of people each year in His name and for His sake. In our morning devotions together during our trip, we spent time in the book of Romans and also in the Gospel of Mark and were reminded that we serve a God who humbled himself, poured himself into human flesh, and dwelt among us, dying in our place for our sins and rising again – while we were yet sinners. God calls us to follow in his footsteps by loving and serving even our enemies. Thank you for walking this journey together with CFK, supporting, encouraging, and praying for us in so many ways. We need your continued prayers and support now more than ever before, in the face of wider and deeper openings for impact. May God use the good gifts he gives, whether time, talent, or treasure to glorify his name in the DPRK and draw many to himself.

### CFK Celebrates 20 Year Anniversary

On October 18th, a Sunday afternoon, more than 150 people from western North Carolina and from as far as Atlanta, Raleigh, Washington D.C., Connecticut, and Norway joined us for a time of thanksgiving for God's work through CFK in North Korea. It was a packed weekend that began with our fall board meeting on Friday and Saturday followed by the open house and program on Sunday afternoon. Local Korean churches and volunteers put on a wonderful spread of traditional Korean food, and the Red Radish provided delicious local southern food. Korean children's and adult's choirs provided music, Wellspring set up an auger drill rig and photos of drilling in DPRK, and we shared a video, highlighting various aspects of CFK's work. The open house was a special time to reconnect with old and new friends and to give thanks to God for all He has done in and through the work of CFK. A big thanks to our staff, many volunteers, partners, and supporters for helping us get our grounds ready



*Guests waiting for the start of our celebration*

for the event and for all the behind-the-scenes-work that went into making this such a special time. Thank you to all who came and shared in this time of celebration and thanksgiving!

### Thanks to Donors

Our staff extends our sincere apologies to those who were mistakenly omitted from our recent donor list sent out in October: Richland Wood Products, LLC, Rob Robinson Builder, Rocking Inc., Roseann Evangelical Presbyterian Church, Rowcon Services, San Jose Young Nak Church, St. Matthews By The Sea, St. Peter Lutheran Church, Sung San Church, The Pittsburgh Foundation, The Red Radish, Trinity Presbyterian Church, Trinity Wellsprings Church, University Bible Fellowship, Vitantonio Foundation Inc., Walnut Presbyterian Church, West Hills Presbyterian Church, WNC Association of Health Underwriters, Zero TB World and in memory of Marion Keith (*The Pittsburgh Foundation*) and Mary B. Seel (Rev. and Mrs. Cody Watson, Jr.). Each and every gift is important to our work. We apologize for the oversight and thank you for your continued support.



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If you are interested in supporting the work of CFK or requesting information or materials, please contact us.