April 2016

"The LORD is my shepherd; I shall not want. He makes me lie down in green pastures. He leads me beside still waters. He restores my soul. He leads me in paths of righteousness for his name's sake." Psalm 23:1-3

"I can't tell you how much we appreciate the new water system here. Last year, we had a terrible drought and really suffered from lack of water. We didn't know how we were going to manage. Then, late last summer, your team came and put in a new water system. We really didn't know what to expect, but it is so wonderful! Now, all the patients have plenty of water for drinking and washing, and we also have plenty for cultivation of our greenhouses. The system worked perfectly all winter and saves our staff so much time every day. Before, 3 to 4 staff members would spend half a day collecting water to cultivate the greenhouses, while 2 other staff members would spend a couple hours collecting water needed for food preparation and patient care. Now everyone has clean and cold water right where they need it, and no one has to do this job anymore!"

-Director of Peachon #3 (TB) Rest Home

#### 10 Member CFK Team Visits the DPRK

Despite all the tensions in the international environment, a CFK team (totaling 10 members) visited the DPRK from March 15th to April 2nd. The purpose of our visit included preparation work for renovation projects (planned later this Spring), confirming visits to 27 care centers requiring more than 2500km of travel on rough roads, and blood collection/testing and examinations (including interviews, physical exams, and diagnostics with ultrasound) of nearly 300 patients in Pyongyang and Kaesong in preparation for the initiation of the hepatitis B treatment project planned for later this year.

### Spring Comes to the DPRK

During the visit, the monochromatic browns of the winter landscape gradually brightened with the bloom of yellow forsythia, greening patches of emerging winter barley and wheat sprouts, and delicate lavender azaleas. We traveled roads that were crowded with people walking, riding bicycles loaded with various bundles including trussed pigs,



Sharing the road with North Korean commuters

or pushing carts piled high with everything from large empty water barrels to kimchee jars to tree seedlings. Many were coming or going long distances to large scale mobilization projects of various kinds, including tree planting on a massive scale, spreading manure on corn and rice fields, turning over the dirt in the fields for spring planting, digging large irrigation canals, seeding nursery beds of corn and rice for transplanting, rebuilding walls, or painting/whitewashing buildings. Signs for the 70-Day Campaign were everywhere, counting down the days until the Party Congress (planned for early May), asking people if they had done their part. Red flags of the revolution fluttered everywhere – in fields, on worksites, and along roadways, snapping briskly in the spring breezes, encouraging people to give their revolutionary best



CFK confirming team with Paechon #3 (TB) Rest Home staff

efforts to meet the goals of their workplace and communities. Security was tight, and we waited at many checkpoints while travel documents were carefully checked or confirmed by phone.

During the first part of the trip, our morning devotions focused on the Psalms – including prayers, petitions and laments that seemed so appropriate to our context. Later, during the hepatitis part of the visit, we studied the Gospel accounts of Jesus healing the sick and how faith, thankfulness, and giving glory to God were themes that ran through many of these accounts. Our team celebrated Easter Sunday with the Chilgol Church congregation, including sharing our Lord's Supper together. Following the service, we were met by the church pastor and also by the head of the Korea Christian Federation who thanked us for our work in the country and who asked us to convey sincere greetings from Christians in DPRK to the churches around the world.

In our travels this time, we were able to visit many places where we have installed new water systems in recent years, and it was so encouraging to hear how much of a difference clean water is making for so many places. Not only do these systems directly impact patient health, but they bring tremendous time savings for the staff trying to care for patients. Since hospital departments now have clean water right where they need it, patients also have plenty of water for drinking, washing, and laundry. Care centers can also manage their greenhouses much easier with abundant water.

With these lasting improvements now in place and active case finding efforts underway, many places have nearly doubled their patient loads over the previous year. Many places also commented on how useful the new solar lighting systems are and how much it helps the staff care for patients during night duty — most are using them very effectively. Greenhouses continue to produce significant tonnage of food every year, really improving the diet of patients being cared for at these facilities. Last year, our Norwegian friends gave out rutabaga

seeds; one place grew 3 tons of Vitamin C-rich rutabaga! They said that patients were enjoying them with their morning and evening meals once they became used to the new taste. We also saw other greens, mushrooms, and vegetables growing from CFK supplied seed at many other places.



Despite the chilly late winter temperatures, greenhouses were thriving with crops and new starts.

### Active Case-Finding Efforts Increasing TB Patient Numbers

A t least in the areas where we visited, we saw and heard evidence of a stepped up national TB program with much greater emphasis being put on active case-finding. There are now more urgent and motivated efforts underway to go to schools, factories, and other places to screen the population for TB and for household doctors to find patients with TB symptoms through household visits and interviews. Consequently, more TB patients are being identified earlier in their disease process, increasing their chances for successful treatment and preventing further transmission. This means that the numbers of patients being cared for at many places in 2015 more than doubled over the previous year. Rest homes are on the front lines of providing care to patients who are still contagious to others. Patients spend 1-3 months at these facilities receiving rest, nutritional support, and anti-TB



MoPH colleague explains items in the nurse's kit to Sohung #3 (TB) Rest Home staff

medicines. Many facility directors are now in the process of building additions to their facilities to house and treat more patients or renovating their facilities to provide better care. They are deeply grateful for the significant support that's given to them by CFK as they care for very sick people every day. Most of all, they thank us for our visits, and ask us to thank you, our donors and supporters, for remembering them and helping them.

At least 16 care centers have specific plans for renovations or additions, and they have asked for our partnership to complete these projects as soon as possible. In nearly all cases, the local community provides many of the raw materials and all of the labor needed for the project, but they ask for our support for things like windows and doors, ceiling materials, and tile. We hope you will join us in helping many facilities significantly improve their care centers this year. These projects directly translate into providing better care for patients, and they also open a tremendous opportunity for us to work in direct partnership with the North **Korean people.** It is such a joy and privilege to visit places and see the transformation that is occurring with each passing year of work and partnership together. Some changes are small, but others are quite dramatic, and it is so gratifying to see the pride of place and the hope that comes from helping thousands of patients every year.

## Preparations for Hepatitis B Treatment Program Continue

Public Health in November 2015 to initiate a hepatitis B treatment project, we continued developing this program during the March visit.

During the first part of the visit, Dr. Marcia Kilsby, director of the Medical Laboratory Initiative for Global Care Partners, worked with local staff to collect and analyze blood samples from patients at the pilot test sites of Kaesong

and Pyongyang. Nearly 1,400 individual patient test results were added by Terry Smith, Program Coordinator of CFK, into a new database being designed and expanded for this purpose. Finally, despite an unexpected and arduous three-day travel delay for 3 incoming team members from Australia, a joint CFK/Hepatitis B Free team including Drs. Alice Lee, Thao Lam, and Sissel Topple held hepatitis clinics in both Kaesong and Pyongyang evaluating nearly 300 patients for possible inclusion into the hepatitis treatment program – which we hope to initiate later this year. Patient evaluation included history-taking, photos, bloods, height/weight/vitals, ultrasound, and physical examinations done jointly by external and local medical staff working together.

As we took down patient histories, we heard difficult stories from patients – many in their teens, 20s, 30s, and 40s. Many patients were clearly very sick with constant stomach pain, fatigue, bleeding, and other debilitating symptoms caused by hepatitis, and a significant number had lost loved ones to this terrible disease. But we believe many can be helped and given hope with the initiation of *(continued on page 5)* 



NTRL and Pyongyang #2 (Hepatitis) Prevention Hospital lab staff run lab tests



CFK/Hepatitis B Free team process new patients in Kaesong

#### NTRL Investment Jumpstarts Hepatitis B Treatment

by Dr. Marcia Kilsby, PhD, MLS(ASCP)<sup>CM</sup>SBB, CLS(NCA)

Professor Emeritus, Andrews University

Medical Initiative Director, Global Care Partners

Since fall 2008, it has been my privilege to help sestablish the clinical diagnostics section at the National Tuberculosis Reference Laboratory (NTRL), Pyongyang, Democratic People's Republic of Korea, and to teach basic and advanced clinical diagnostics, quality assurance, and the essentials of laboratory management to the laboratory staff. When CFK started the journey of renovating and equipping the NTRL, who but God could have known that the years of investment in the infrastructure of the laboratory, building diagnostic testing capacity, and the training of the laboratory staff would enable another CFK outreach to begin – that of saving lives from yet another disease devastating the country, hepatitis B.

Not only has it been a long-held goal to bring excellence in clinical laboratory diagnostics to tuberculosis (TB) and multi-drug resistant tuberculosis (MDR-TB) patients in the DPRK, but we also wanted to establish a core of clinical laboratory experts able to disseminate their enhanced knowledge and expertise throughout the country. That is now happening in a way that could not have been previously envisioned.

Dr. Kim is the laboratory physician in charge of the Clinical Diagnostics Section of the NTRL. Hearing her state that she could handle by herself the initial training of the two laboratory physicians from the Pyongyang #2 (Hepatitis) Preventative Hospital on how to use their new chemistry analyzer was absolutely heartwarming – a tuberculosis laboratory physician training two hepatitis laboratory physicians. The new chemistry analyzer, identical to the one in use at the NTRL, was hand carried in anticipation of the completion of the hepatitis hospital laboratory renovation planned for May and was needed on the March trip to handle the clinical chemistry testing volume for the hepatitis B treatment initiative.

Without the use of the NTRL laboratory equipment and the willing participation of the laboratory staff, the hepatitis B treatment initiative could not happen. As TB patients must have their liver enzymes, renal function, and hematology status assessed, so must hepatitis B patients. Without clinical diagnostic information on a hepatitis patient, the treating physicians cannot start the patient on the antiviral medicine needed to save the patient's life.



Dr. Marcia Kilsby visits hepatitis lab doctors in Sariwon

During the November 2015 and March 2016 visits, we performed over 4,300 clinical chemistries, hematology, and immunology essays for hepatitis patients at the NTRL. The NTRL clinical diagnostics staff had to continue to perform their regular testing workload for TB patients but also took on the task of helping to do all of the testing required for the hepatitis patients. Because the equipment at the NTRL is the only instrumentation available in the DPRK to perform the specific testing necessary, the laboratory staff stayed long hours each day and put in extra time on the weekends - cheerfully and graciously – to take care of the needs of all of the patients, both tuberculosis and hepatitis. The professionalism shown and the can-do attitude when hundreds of tubes of blood arrived from the Kaesong and Pyongyang Hepatitis Hospitals was a testament to their dedication and commitment.

To each CFK donor who has so generously supported the development of the NTRL, your money has been well invested. Physicians now receive quality diagnostic information so that better patient assessment is happening. As CFK embarks on the renovation of the laboratories at the Kaesong and Pyongyang Hepatitis Hospitals, even more patients will be helped with timely, quality diagnostic testing as the clinical laboratory improvement initiative moves forward. My dream is that someday every healthcare facility will have a clinical laboratory capable of providing quality diagnostics for each and every patient.



Roald Foreland shares seeds at Changyon #3 (TB) Rest Home

#### Sowing Seeds in North Korea

by Roald Føreland
Director of Evangelisk Orientmisjon, Norway
(Formerly China Inlandmission, Norway)

Ten grams of seeds can become 3,000 kilograms of cabbage if it is planted and grown the correct way – this is the unimaginable amount of healthy vegetables a small bag of seeds can produce. On this last trip, we brought 20 kilograms of cabbage seeds. It was touching to see how well it was received by our friends in the DPRK. In the past two years, we have been distributing cabbage, rutabaga, and other nutritious vegetable seeds to the hospitals and their patients.

The idea is that the patients can bring it home and grow them in years to come. The small bags, printed with CFK's logo, come with instructions in Korean on how to plant and grow the vegetables. The seeds are produced in Norway, and the usual price for 10 grams of high quality seeds are two U.S. dollars. We were able to purchase them for 20 cents per 10 grams. We even received some for free, and we have bought 500 kilograms so far.

It is a real blessing to work together with CFK. Since 2012, we have been partners in setting up greenhouses and helping with the water systems in a small way. Several of our board members and volunteers have joined CFK on trips, and we are all amazed by the good work they are doing. I also was able to attend CFK's 20<sup>th</sup> anniversary in Black Mountain on October 18, 2015, and I hope that we will be partners for the next 20 years – at least!



TB/Hepatitis physicians attend Dr. Alice Lee's hepatitis training session

(continued from page 3) drug therapy. Local staff worked side by side with our team during the clinic and received more in-depth training during a standing-room only session that was attended by about 30 physicians and nurses from both the TB and hepatitis hospitals. Important program planning work also took place during discussions with the Ministry of Public Health. We are grateful for the strong enthusiasm and partnership that continues to grow not only at the pilot sites in Pyongyang and Kaesong but also between the TB and hepatitis care systems and at the Ministry level. Thank you for your prayers and support that are making this ground-breaking initiative possible.

To support the new hepatitis treatment program in 2016, we will be renovating and equipping clinical blood diagnostic laboratories at the hospitals where this treatment is being piloted in both Kaesong and Pyongyang. We held full and very productive discussions this time with the directors of both facilities and received unprecedented levels of cooperation at both sites. There is a genuine desire to make these programs the best they can be – both now and with room for growth in the future. We plan to return with work teams in both May and early fall to reconstruct these labs, install the equipment, and continue training activities. We hope that both labs can be completed before the end of this year.

We also visited the new site being prepared for installation of a roofing tile-making machine that was requested by MoPH last year. We have placed an order for this machine, and if all goes well with its production and delivery, we hope to install



Rob Robinson and Dr. Marcia Kilsby discuss lab renovations planned at Kaesong #2 (Hepatitis) Prevention Hospital

it in Pyongyang at the end of our May visit. The March trip identified many locations that are in need of new roofs, so we are looking forward to MoPH providing tile made by this machine to CFK supported facilities that need it. With tile donated by MoPH and insulation and finish ceiling materials to be supplied by CFK, we hope to be able to help more facilities renovate at a lower cost but with equally good results as the metal insulated sandwich panels we had been sending from China.

The Ministry of Public Health also requested that we consider expanding our work into 5 new locations. We visited one new place this time and expect to continue our discussions on this issue with the Ministry in May. Despite all the challenges in the external context, our work continues to grow. Thank you for your partnership with us so far, and we pray that you will continue to pray for and support this work, as we continue to bring lasting change to the people of the DPRK in Jesus' name.

# Legal Provision Made for Humanitarian Activities to Continue Despite New Sanctions

During the first quarter of 2016, the US government and the United Nations Security Counsel imposed new sanctions on North Korea in response to their nuclear test on January 6th, and the launch of a satellite on February 7th using ballistic missile technology. While the new sanctions laws were being drafted, it was unclear whether humanitarian activities would be allowed to continue. We asked you to register your concerns about the legislation being considered, and many of you responded and contacted your representatives.

Thankfully, our voice and those of other NGO's active in DPRK were heard, and necessary changes were made to the legislation to allow humanitarian work to continue. Furthermore, General License No. 5 issued on March 15th by the Department of the Treasury, Office of Foreign Assets Control, specifically authorizes humanitarian activities of Nongovernmental Organizations that might otherwise be

prohibited under the new sanctions. We are grateful that despite the new UN and US sanctions, the full scope of our ongoing humanitarian activities can continue. Thank you for your ongoing prayers and support.



Hepatitis B team at Pyongyang #2 (Hepatitis) Prevention Hospital



Small TB patient receives a handmade toy



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