April 2018

"The king's heart is in the hand of the LORD. Like the rivers of water; He turns it wherever He wishes."

Proverbs 21:1 NKJV

CFK Team Returns to DPRK March 22 – April 3, 2018



Members of the CFK team stand for a photograph with the staff at Songnim #3 TB Rest Home.

A midst rapidly unfolding developments in the international context, on March 22, a CFK team of nine people from the US, Norway, China, and the UK returned to the DPRK to check on the arrival and distribution of shipments, and to continue our ongoing humanitarian work. It was especially good to be back in the country again - despite the many additional hurdles raised very recently by the intensified sanctions environment - to meet with our counterparts, health and other officials, and to visit many largely rural TB and hepatitis care centers. While we could not do the full scope of the work we had originally planned due to new sanctions requirements that we are still working through, we could find narrow legal space to continue basic work under US licenses already in place that allowed for our return.

Multiple shipments had arrived since our Oct/Nov visit, including fortified nutritional food, hygiene kits, blankets, canned meat, and hepatitis medicine. Several shipments had been held up for several weeks while we navigated additional UN sanctions measures announced at the end of 2017, so

we were relieved to see them safely in our warehouse. Thank you for your prayers! Sadly, we had to cancel the Hepatitis B clinics that were planned for this trip due to additional regulations now required as a result of new sanctions measures and that we have not yet been able to complete. These new hurdles prevented us from bringing in the diagnostic materials required to deliver care. But we visited both hepatitis treatment sites (Kaesong and Pyongyang), and also the new location where we hope to start clinics this year (Haeju), and talked with the directors and their staff. They are very happy with the program so far and are continuing treatment for patients already enrolled in the program. We also confirmed the arrival and distribution of a new shipment of hepatitis B medicine that arrived late last fall.



Members of the CFK team load tractor parts for distribution to a rural care center.

It is always a tremendous privilege to travel throughout the countryside and be warmly welcomed at the end of many long and rough dirt roads by staff who are happy to see us again. How encouraging it is to step into warm, fragrant, well-tended greenhouses filled with the vibrant green colors of onions, lettuce, spinach, crown daisy, squash, strawberries, and starts of tomatoes, cucumbers, radishes! To walk into storage rooms to find blankets, nutritious food and other goods provided through your generosity being well-used for

the patients under their care. And to hear stories of progress and challenge, while sharing food and fellowship together around simple tables of warm hospitality. We are so often deeply humbled by the generosity and care shown to us by many care centers. From roasted goat and rabbit, and many very specially prepared local side dishes, to a freshly gathered seafood feast of clams, scallops, mussels, and conch on the beach, many days felt like a special holiday feast had been prepared for us. The words from Psalm 23 often came to mind... "Thou preparest a table before me..."



A staff member at Kaesong #3 TB Rest Home proudly shows a thriving greenhouse to the CFK team.



Two CFK volunteers, James Banfill and Zhehao Wu enjoy a feast on the beach prepared for the team by the staff at Changyon #3 TB Rest Home.

Easter Sunday found us back in Pyongyang, with the early flowers of spring starting to bring color and hope for warmer days back to the city. We worshipped and shared the Lord's table with those at Chilgol Church. What a

privilege it was to celebrate our risen Lord with the local congregation, to bring love and greetings from churches around the world, and be encouraged by the pastor's message: the historical truth that Jesus rose from the dead absolutely changes everything.

URGENT SPECIAL APPEAL for TB Medicine to Prevent a Looming Catastrophe: Unexpected Closure of The Global Fund Grant in DPRK

In late February, the international community and the ▲DPRK was informed that The Global Fund to Fight AIDS, Tuberculosis and Malaria - the largest funding source for the DPRK TB Program, administered through UNICEF and WHO since 2011 - will end their support completely in DPRK as of June 30, 2018, citing concerns "...that the unique operating environment in the DPRK prevents us from being able to provide the Board with the required level of assurance and risk management around the deployment of resources and the effectiveness of the grants." By all accounts, this decision came as an unexpected and devastating surprise, with no clear triggering reasons, no opportunities for appeal or redress, and no transition or contingency planning in place. Considering that the DPRK is classified by the World Health Organization as a high burden country for both TB and Multi-Drug Resistant TB, the precipitous loss of support will be catastrophic to the program, and to all the patients suffering from TB and MDR-TB unless alternative funding can be found immediately. For the last 8 years, the Global Fund has supported first-line TB drugs for nearly the whole of the country, along with necessary smear microscopy diagnostic supplies, among other support. With registered case-loads rising year on year, and now exceeding 120,000 patients annually, a stable first-line drug supply is absolutely critical to TB control efforts, and to preserving the lives of TB patients. This decision has serious global health implications as well, since communicable diseases are not contained by artificial national borders.

In our closing meetings in early April with senior Ministry of Public Health officials, we were urged in the strongest possible terms to do our utmost to press for an immediate reversal of the Global Fund decision, and we are continuing active engagement with Global Fund and others to that end. Health officials also stressed that TB control is the highest health priority in the DPRK, and accordingly **we were asked to prioritize sending life-saving first-line TB medicine to the country again** if alternative funding for the program cannot be urgently worked out (the last year CFK had to send first-line TB drugs was 2009). The first-line TB medicine pipeline is now expected to run out by the end of 2018. With new orders taking up to 6 months from the

time of order until the time of delivery, this leaves very little time to raise funds, initiate a new shipment (by midsummer) and get it to DPRK in time to prevent a stock-out. Any drug shortage would cause immediate and adverse health impacts to tens of thousands of patients and to country-wide disease control efforts. Furthermore, the loss of Global Fund support will also impact resupply for the National TB Reference Lab, and other urgently needed program strengthening initiatives.

While we hope that one or more major international organizations will soon step up, the uncertainty of summit diplomacy may prevent action in time to keep the medicine pipeline open. Consequently, **CFK is launching a special appeal to be applied towards an emergency shipment of TB medicine. We urge you to respond to an urgent need for truly life-saving first-line TB drugs.** If, by the time we must place an order, this need has already been met by others, then we will redirect any funds raised for TB medicine to be applied towards water filter buckets for distribution to TB patients (see page 4 article). We are still getting final quotes for TB medicine costs, but expect that they will be in the range of \$35-\$50/patient for the full 8-month first-line drug treatment regimen.

In His Own Words: Let not your hearts be troubled. Andrew Dudgeon, Director, Project 67 (UK)

This was a time to take our hands off the steering wheel. It was one of those occasions where so much was beyond our control that we had no option but to entrust each



CFK volunteer, Andrew Dudgeon, stands for a photo above Shinwon #3 TB Rest Home.

day - often each hour - to Christ, who does all things well.

In truth, our two weeks in DPRK were an unsettling time. The big issues are well-documented: sanctions to navigate, licenses to obtain, basic logistics to arrange. The list of major hurdles goes on but the bottom-line was that not even a blood collection needle

could be imported into North Korea let alone critical lab equipment, vehicles or vegetable seeds without undergoing a much more arduous and uncertain licensing/exemption process.

The sanctions are beginning to bite hard. Time and again we met with doctors and patients and had to convey the same message - we would love to help more but our hands are tied, we legally cannot send many things right now, the future is beyond our control and we don't know what will happen next. We had no answers and that is an uncomfortable place to be. It wasn't what we wanted.

There were other factors, too. Sickness broke out among the team. Most had coughs and colds. One team member only made it as far as Beijing, fell sick and had to turn back. Another took so seriously ill that we had to abruptly cancel part of our schedule and a medical evacuation had to be considered (thankfully, in the end, it wasn't necessary). This wasn't how it was meant to look.

Through the March haze, there were some bright spots on this trip. We travelled far and wide and thanked the Lord for each patient enjoying significantly improved quality of life, for vegetables growing in some well-maintained greenhouses, and for medical staff who continue to defy belief with their commitment and creativity. How good to see past efforts bearing fruit! How good, too, to have such patient North Korean partners who graciously hosted us and steered us through our time in their country despite many unexpected complications.

It was Easter week and we spent morning devotions working our way from John 11 through to chapter 20, from Lazarus lying cold in his tomb, to the Lord's death, resurrection and promised departure - unsettling days indeed for those following Jesus. They too faced extraordinary circumstances that were weighty and far beyond what they could control.

At times on this trip, we felt like Mary and Martha and wondered why the Lord doesn't move quicker! They didn't have answers either. Other times, the troubled hearts of the disciples were not lost on us as we pondered Pyongyang's mounting problems. How encouraging to see Jesus moving at His pace, when He chooses, and reigning supreme both in death and in life. On Christ the solid rock we stand; all other ground is sinking sand.

Water Filter Buckets are Changing Lives, Families and Communities

Last Fall, we significantly expanded the delivery of water filter buckets further into the countryside after trying these out at care centers in recent years. This expansion was made possible through the generous support of longtime partners Evangelisk Orientmisjon (Norway), Rise Against Hunger, the Mennonite Central Committee and a number of private donors. When we distributed these filter buckets last fall, we asked care center directors to send them home with patients who came to the care center with ongoing gastro-intestinal (GI) issues. We asked the care center directors to provide us with a list of patients receiving the

filter buckets, the number in their household, and the number of incidences of GI problems before and after the buckets were distributed. We also asked them to have at least one recipient patient come to the rest home on the day of our visit so that we could meet the patient directly, learn more about their local circumstances, and discuss with them the impact of these water filter buckets on their lives and communities.



CFK director, Heidi Linton, meets with the recipient of a water filter bucket at Central #3 TB Hospital.

What we heard this time from many different regions, care center directors, and patients is that a water filter bucket makes a real and lasting difference in the lives of patients, their family, and their community! Conservatively speaking, on average users have experienced nearly a 5-fold reduction in GI incidence after the initiation of water filter bucket use, affecting not only the patient, but also at least 4 other family members. Here are just a couple of the stories we heard first hand:

Patient Story from South Hwanghae Province:



"I am 45 and I have a husband and two children (10 year- old daughter and a 5 year-old son). There are 4 in my household. I am a paddy field farmer. I have been here for TB treatment since January 2018. After I was here for a month, my sputum sample turned negative. I was given a water filter bucket

(upon discharge), which we use for drinking and for washing vegetables. Before I used to have GI problems, but after using the filter bucket, I don't have any GI problems. My kids also used to have loose bowels, but after using the water filter bucket, they don't have any more problems.

The reputation of this water filter bucket has spread, and the neighbors all come to my house now for clean water (smiling)! I clean the filter every 2-3 days (about every 10 full buckets)."

(The hospital selected this patient to receive a filter bucket because she lives in a remote area with an open water source.) The director said she has gained 6 kg since starting treatment and using the water filter bucket.

Patient Story from Unryul TB Rest Home:

"I am 58, a farmer, and my home is about 12km (30 Ri) down the coast from here, and it takes a bit to travel here. I used to have a lot of problems with digestion. It was such a pain, and made life difficult. I came here for treatment after I got sick (with TB) and the doctor



gave me this filter bucket when I went back home. When we first started using it, I wasn't sure it would be much use.

It's just a filter bucket, but then after using it for about a month and a half, I realized I had started feeling better. I went from having diarrhea 5-6 times a day, to only 1-2 times/day, to finally none.

Wow is it true? This is great! Even my wife started to share the news and our neighbors also wanted to share the filtered water. There are about 8 houses all together in our area.

We made a special table just for the filter bucket, so it can filter and drain water for a long period of time. We can let it run while we work or do other things. We have it inside our house and keep it warm so it doesn't freeze.

In my house there are 5 people in the family. I've gained about 3 kilos (nearly 7 pounds) since I've been using this filter bucket over the last 5 months. My wife's stomach

doesn't hurt anymore either, so now she's happier. I have also been healed of TB. No more coughing, no more fever, now a negative sputum test, and no more stomach pain. (cupping his face with his hands...) It's a little strange to have more fat on my face. I think I'm looking healthier than before!"

Plans to Expand Water Filter Bucket Program

In our closing meetings with Ministry of Health Lofficials, we discussed our findings and our desire to significantly expand the water filter bucket project, including further study of the impact on patients and communities. If our study hypothesis proves accurate, we hope to raise significant additional support to be able to put a water filter bucket into the home of each and every registered TB (21,900) and hepatitis (6,900) patient in our supported area (thereby reducing diarrheal incidence and malnutrition, with a hopeful reduction in the number of TB patients who relapse or develop Multi-Drug Resistant TB). Eventually, we hope every registered TB or hepatitis patient in the country will be able to have a water filter bucket in his/her home. This is indeed an ambitious goal, but we believe that they will bring lasting improvement to the health of many patients, their direct family members, and often, beyond into their local communities. If properly cared for (including regular cleaning – a procedure that takes less than a minute, and minimal care to prevent the filter from freezing in winter) each filter bucket can provide clean water for 10+ years. Each filter bucket currently costs \$60 each, but we are working to bring this cost down significantly.





Left: A patient at Pyongyang #3 TB Pediatric Hospital uses a water filter bucket. Right: Kitchen staff at Tosan #3 TB Rest Home regularly use a water filter bucket to make clean water for drinking and cooking.





South Hwanghae #2 Hepatitis Hospital has begun preparations for a new lab to be completed by our technical team as soon as new regulations allow us to resume this work.

Care Centers Striving for Improvement

In addition to these significant and overwhelming Lbig-picture issues, many of our care centers are trying to renovate and improve their facilities in order to provide better care for their patients, especially during the cold winter months. Accordingly, they need help with windows and doors, tile, insulation and ceiling materials, hospital beds and patient mats. Honestly, it is difficult to convey just how hard many of these directors are working under extremely difficult circumstances. Even a small investment goes such a long way there - most directors are very wise and careful stewards of what is invested at their facilities. And provincial and central Ministry of Health officials asked us again when we could commit to begin supporting more TB and hepatitis care centers in new places. In fact, they have already identified eleven, to be exact. They all need clean water, walking tractors, greenhouses, renovations, food, basic transportation...and much more! So we ask for your prayers and for your generous help as we continue to navigate all of this - seeking that God be magnified in and through our work and among the hearts and lives of the North Korean people. What an amazing opportunity this is to rebuild lives and bring hope and healing, patient by patient, community by community, in His name!

CFK Teams Hope to Return in Late May

We have applied to return to DPRK in late May/ early June to make repairs to a number of water systems, to continue HOPE (hepatitis B) treatment clinics, and to provide technical assistance at the National TB Reference Lab. Please be praying that all the necessary approvals will be received in time (a new Treasury license, a UN sanctions exemption, State Department approval for travel, DPRK travel approval, etc.) for this visit to go forward as planned. There are many hepatitis patients waiting to start treatment, and we have been urged to double our Hepatitis B patient load this year, and also to initiate a hepatitis C program if we can get all the necessary approvals, diagnostics and medicines in place. So the door is wide open for greatly expanded work and impact, and we are very eager to move forward as quickly as legal, financial and capacity constraints will allow.

Flurry of Diplomacy Brings Hope for Lasting Change

V7e are encouraged and guardedly hopeful by all the recent positive developments in the relations between DPRK and her neighbors, including the warming relations between North and South through the Olympics, the recent visit by the leader of DPRKorea to China, the South Korean K-pop concerts held in Pyongyang in early April (and televised in part on national TV inside DPRK!), the planned summit between the leaders of North and South, and the proposed late Spring US-DPRK summit. Who could have dreamed even just a few months ago that such rapid rapproachment could be possible? Yet, short of clinching an overarching "peace/denuclearization deal," the situation remains dangerously precarious. The stakes are incredibly high, and the lives of tens of millions on the Peninsula and in the region hang in the balance. We must be people of prayer and action, now more than ever before. We have seen over the past 23 years of work in DPRK that God uses mustard seeds of faith to accomplish great things for His glory. What a privilege it is to be even a small part of what He is doing.

Thank you for your prayers, encouragement, support and partnership that make all this possible – now and continuing forward! God is very much at work, and we are continuing to see His providence, provision and protection in countless ways, both in DPRK and in all the challenges we are facing on this side as well. We are so grateful for your generous

support for Christian work among the North Korean people over many years, and we pray that we will have the needed resources to respond carefully and quickly to the opportunities that will present in full measure once political and regulatory obstacles are removed.



The CFK team confirms the arrival of a shipment of medicine at the Pyongyang #2 Hepatitis Hospital.



Jennifer Deibert, from our partner organization, MCC, poses with a staff member at South Hwanghae #2 Hepatitis Hospital, confirming a delivery of food.



CHRISTIAN FRIENDS OF KOREA

PO Box 936 • 129 Center Avenue • Black Mountain, NC 28711 phone: (828) 669-2355 • fax: (828) 669-2357 email: cfk@cfk.org • website: www.cfk.org

Christian Friends of Korea is a tax-exempt, non-profit organization founded in 1995 to share the Gospel of Jesus Christ through humanitarian, educational, and religious programs. Contributions to CFK are tax-deductible to the extent allowed by law. CFK also accepts stock or in-kind donations. Please make all checks payable to "Christian Friends of Korea" or "CFK". If you are interested in supporting the work of CFK or requesting information or materials, please contact us via phone or email.