



CHRISTIAN FRIENDS OF KOREA

조선의 그리스도인 벗들

DECEMBER 2018 NEWSLETTER

Bringing Hope and Healing to the People of North Korea in the name of Christ

“Though the fig tree does not bud and there are no grapes on the vines, though the olive crop fails and the fields produce no food, though there are no sheep in the pen and no cattle in the stalls, yet I will rejoice in the LORD, I will be joyful in God my Savior.” Habakkuk 3:17-18

MEANINGFUL IMPACT ON ORDINARY LIVES DESPITE CHALLENGES

2018 has been a year of extremes - historic summits, symbolic announcements and high hopes, paired also with extraordinary challenges caused by significantly heightened sanctions on the Democratic People's Republic of Korea (DPRK). In spite of these difficulties, we are grateful this year for the opportunity to meaningfully engage with and provide lifesaving help to thousands of ordinary people who live in the DPRK. Yet, we are also saddened by what could have been accomplished this year – but was not as result of the unintended impact of sanctions on humanitarian activities. As we close out the year, here is a more intimate look at two aspects of our work – illustrating the sadness and impotence we feel when sanctions intruded on one (among many) projects we had hoped to complete this year in order to help those suffering from tuberculosis (TB) or hepatitis, but also the positive life-giving impact of delivering simple water filter buckets to TB and hepatitis patients, their families, and communities. We dedicate this special issue to all of you who pray, who encourage, who support, who volunteer, and who partner with us in many unique and valuable ways – and to all those in the DPRK whose lives are being touched by your love and care. We are grateful to God for each and every one of you. Please be praying during these next months as we seek to continue impacting lives in the DPRK. Pray also that there will be positive diplomatic developments that will shift the current context further towards peace, and that restrictions on delivering humanitarian aid in the DPRK would be lifted.



Shinwon TB Rest Home with its fruit trees and buildings prior to renovations in 2014.

IMPACT OF SANCTIONS ON THE RENOVATION OF A TB REST HOME

For the last ten years or so, we have been providing ongoing help to the Shinwon TB Rest Home. When we first started working there, the director reported caring for 140 resident patients every year; now, with steadily-rising TB rates, they need to care for 360 resident patients/year. We started small – providing food and some basic medicines, hand-made quilts, hygiene kits, then later sent greenhouses and a small tractor. In 2011, having proved their exceptional abilities to cultivate greenhouses, we supplied them with a larger and more permanent quarter-round greenhouse – which they consistently use to grow fresh vegetables for their patients. This director is an innovator and experimenter, and is even successfully cultivating a few mandarin orange trees inside the greenhouse that fills it with the heady fragrance of orange blossoms in the early spring when outside all is cold and lifeless.



An orange tree blooms inside a greenhouse at Shinwon.

In June of 2015, when we learned that care center staff were spending hours every day collecting water from an unprotected source, we arranged for a deepwater well to be drilled there, and in 2017 we worked with local staff to install a solar/gravity water system. This has truly transformed the care that they can give to patients, and has increased the amount of food they can grow locally due to plentiful water for irrigation.

This director is one of those “ten talent” directors – meaning that like the parable (found in Matthew 25: 14-30) of the 5, 2 and 1 talents given to three different servants, he is among the most industrious of care center directors who multiplies the impact of support

The view from a bare window opening of the new patient ward: Patients gather around a cooking pot in the courtyard of the old patient ward.



The road to Shinwon TB Rest Home, built by hand.

through his diligence and hard work for the real benefit of his patients, staff and community. He built the road to his rest home by hand, and during the really hard years, he was one of very few directors who took the time to plant a wide variety of fruit trees, effort which is now paying off with annual harvests of apricots, cherries, pears, persimmons, grapes and various other medicinal plants. After seeing many things flourish under his hard work and partnership, we were keen

to try to help him when he proposed completely rebuilding the patient wards. He said that he could manage basic construction materials – such as sand and gravel, and he and his staff could do the majority of the work of constructing the buildings – mixing the concrete by hand and pouring it, row by row, from the ground up.

But he said they could not get the hard currency needed to buy windows and doors, insulation and ceiling materials, tile and linoleum, plumbing pipe and fittings, electrical wire and hospital beds so that the building could be finished well and furnished on the inside. We began to seek funding for the project, and meanwhile he and his staff demolished part of an existing patient ward to make room for the new building. We made several visits while they were in the process of construction.

Earlier this year, the building reached the stage where they were ready to receive the finish materials, but concurrent to his progress, ever more restrictive sanctions had been levied against DPRK in response to the country's expanding nuclear and ballistic missile tests of 2017. Now, in order to send these materials (from a trusted supplier in China), we would have to not only secure a wider OFAC license from the US Treasury Department (pending since July), but we would also need a UN Sanctions exemption from the 1718 Committee since many of these items include metal. Furthermore, we would need to be sure that the goods would clear China customs and both US and Chinese banks would allow for funds to be transferred to pay for these materials. And finally, we would need US government approval for our teams to travel to North Korea to be sure that the materials provided were delivered and used by this care center to complete their project.

Despite diligent work since September of 2017 to try to get through all these new hurdles, we are not there yet. Meanwhile, during our visit to this care center in September 2018, the director again asked for help so that he could try to finish the building prior to the onset of winter. "If we can only finish the in-patient ward, then I can rest." During the construction he has

not been able to house many patients who need treatment for TB because the building is not yet livable for patients. Right now, with only a few rooms remaining from the old wing, he can only care for about 15-20 patients at one time – meanwhile he needs to be caring for more than 60.



Patients at the TB Rest Home cooking a Rise Against Hunger meal.

We met with some of the patients undergoing treatment there at the time of our September visit. They were preparing nutritious food high in protein and vitamins from Rise Against Hunger on wood-fired stoves in their courtyard outside. It is hard to think of them as fall gives way to winter, and they struggle to recover from TB in shelter that is inadequate, despite everyone's best efforts to support their recovery, especially in winter. We pray that we can successfully navigate all the new restrictions so that this long-time partnership effort can continue, this building can be finished, and more patients waiting for treatment can come here for medicine, rest, better nutrition, and healing. We also pray that step by step, the scourge of TB can be eliminated from the DPRK, one person, one community at a time.

WATER FILTER BUCKETS BRING HEALTH AND HOPE TO TB & HEPATITIS PATIENTS, FAMILIES AND COMMUNITIES

Earlier this year, we received feedback from many patients and staff members that we interviewed regarding water filter buckets that were sent in 2017 (prior to the most recent and restrictive sanctions), and that were distributed to TB and hepatitis patients in late 2017/early 2018.

These kits include a 5-gallon bucket with a lid and a filter assembly. The filter removes bacteria: cholera, botulism, typhoid, amoebic dysentery, e. coli, coliform bacteria, streptococcus, salmonella; and protozoan: giardia, cryptosporidium, cyclospora. The filter features a 0.1 micron absolute hollow fiber membrane based on medical technology developed from kidney dialysis. It exceeds all US EPA recommendations for drinking water. With regular cleaning, this kit will provide years of clean, safe drinking water. This was the first time we were able to push these filters out to individual households, and what we found is that the need for clean water is much more significant than what we initially thought. Here are some of their stories:

SHINWON #3 TB REST HOME

Director's Story: "I am using the water filter bucket in my own home. I give the buckets to patients that have stomach problems. When they first arrive we interview them to understand their health condition, and one of the things we determine is whether they have a possible water problem at home. Of course while they stay here at this rest home, none of them have problems because our water is clean." (Please see the earlier story on Shinwon where CFK drilled a well and installed a solar/gravity water distribution system).

"After filtering four buckets (20 gallons) I have to clean the filter (which is easy to do). Now no one in my family has GI problems. We gave nine other filters to patients who complained about GI problems at home. At least 50% of our patients could use these filter buckets."



PYONGYANG CITY TB PREVENTION HOSPITAL

Director's Comments: "We received ten water filter buckets. Five were given to patients who have severe to moderate GI issues, and we are using five filter buckets here at our hospital. 10-15% of our patients would benefit from using a water filter bucket."

Patient Story: "My family name is Yun, I am 28 years old, a housewife, and am married with one daughter. Three people are in my household. I came here on January 22nd. I had diarrhea at least 2-3 times/day and sometimes up to 5-6 times/day. My husband also had frequent diarrhea, but our little girl is OK. I have lymphatic TB and have had surgery twice – once on January 31 and another surgery a month later. Now I am improving, and have gained 4kg since I have been here and using filtered water. I have had no episodes of diarrhea since I started drinking filtered water."

KAESONG PROVINCIAL #2 HEPATITIS HOSPITAL

Director's Story: "We gave out 35 water filter buckets. We gave them to in-patients and out-patients who live in 1-story houses. We train them on the use and cleaning of them. Most of them tell us that their diarrhea/GI problems were significantly reduced after using the water filter bucket. They use it for drinking, washing fruits and vegetables, etc. We try to explain it well."

Patient Story: We interviewed the same patient that we met last October at our HOPE clinic. Ms. Kim is 59, she is a housewife and lives 4km from the hospital. There are six family members in her household. She came to the HOPE clinic in October fearful that she had Hepatitis B. She tested negative for hepatitis B and C, but said she often suffered from GI problems at home. So our local colleagues gave her training on the use and maintenance of the water filter bucket, and we sent it home with her.

After using the water filter bucket for several months, she said her diarrhea episodes have been reduced from six or more times a day down to two or less times/day, and her grandchildren no longer suffer from diarrhea at all. Before, she weighed 45kg, and now she weighs 49kg. She said she has greatly benefitted from using the water filter bucket. We reminded her to regularly clean the filter and use the clean water also for washing vegetables and fruit, as well as for drinking.



PYONGYANG #2 HEPATITIS HOSPITAL

Patient Story: "My family name is Ri. I am 36 and married. I was pregnant and had cirrhosis. I was diagnosed at the maternity hospital, and referred here because I had ascites (fluid in my abdomen). I stayed here for three months of treatment. The lab tests showed that I had poor liver function. Sadly, I lost my baby (at eight months). I had intestinal problems (frequent diarrhea) and was very weak. I began to get better in the hospital and gained 2kg. I was given the water filter bucket when I was discharged in January, and my diarrhea has completely gone away now. I have gained weight (12kg), and my color has improved. My husband cleans the filter regularly – it usually filters 70 liters before it needs to be cleaned. There are four family members in our household. We use the filter bucket for drinking, washing vegetables, etc."

CHANGRYONG #3 TB REST HOME

Director's Comments: "We provided the water filter buckets to those areas that don't have central water systems. We check to see if patients from that region are having GI issues, and if they have these symptoms we give them a filter bucket."

Patient Story: "My family name is Om. I am 27 and a farmer. I live 6km from this rest home. There are five people in our household. I came here last year in October and was discharged on March 20th once I became negative on my sputum test. We use an open well at home that is dug into a limestone formation underground. Before coming here, I had at least three episodes of diarrhea a week. Now I only have maybe one episode in a week. My father also was sick before, but he doesn't have any GI issues now. I've gained 3kg since October."

KAESONG TB REST HOME

Director's Story: "Generally when patients are discharged, then we give them water filter buckets to take home with them. They go home but are continuing to receive their medicine here as outpatients. When they come back for check-ups and consultation, I also ask about the water buckets. We teach them all how to clean and use them. They just feel good in their hearts and trust that it will help keep their water clean. It always feels good knowing that you have clean water to drink at home whenever you need it. The families also really enjoy using it. It is perfect for a household. Many that had indigestion and problems are now in a much better state. Our patients use them in combination with the TB medicine so they don't know whether it's the medicine or the clean water, but they have all been improving their situation and they are very thankful. It is hard to say exactly, but my feeling is that this helps prevent the patients from relapsing."

Clean water is desperately necessary. Maybe 1/3 of our patients really need this. A normal house is four people, sometimes five or six. Especially for those out in the countryside, this is really useful. Some of our doctors here need these, too. I also use one at home. I have two kids, 26 and 20 years old, and we live in a 1-story house, with a yard. We use a hand dug well for water. In the winter, we have found that there is no problem, but during the rainy season in the summer time the water must not be clean. In the summer we started using the filter bucket and found that we no longer suffered from indigestion."

Note: We hoped to send many more water filter buckets in 2018, but even though they don't contain metal, they are classified under customs harmonization codes that are prohibited from being exported to DPRK without a specific UN Sanctions exemption. They also require OFAC licensing, both of which we are still in the process of navigating. We hope we can legally resume sending these early in 2019.



TB SITUATION AFTER THE CLOSURE OF GLOBAL FUND

Earlier this year, the Global Fund announced its decision to end its 8-year support for the TB and malaria programs in the DPRK. Since Global Fund has provided support for virtually all the first-line TB medicine (for approximately 120,000 patients/year), basic lab supplies, training and vitally necessary capacity-building projects, this has been a huge blow to TB control and treatment efforts in the DPRK. Thankfully as they closed out the grant, they applied some cost-savings for reinvestment into the drug supply. So now the current supply for critical drugs and diagnostics is expected to last into 2020. Hopefully this will give enough time to line up ongoing support thereafter. Until full funding is restored however, TB control efforts will be significantly impacted. We will continue to watch the situation closely, and provide updates.

OUTLOOK FOR 2019 WORK

As of the date of this writing, the outlook for the full scope of our work in 2019 remains uncertain. Earlier this Fall, we learned that all 10 Americans planning to travel to DPRK in November would not be approved by the State Department – the first time our team has been denied special validation passports since travel restrictions were initiated in September 2017. We were not alone in this – it appears to be a new complication affecting nearly all US NGOs resulting from the external context. Three of our Australian team members, not directly affected by the US travel restriction, planned to go to DPRK anyway in order to complete a more limited scope of work. Regrettably, due to logistics and other last minute complications, in the end, it was not possible for them to go either.

While we are grateful that the dangers of threats and counter threats, military exercises and ballistic/nuclear missile testing stopped in 2018, it appears that very limited progress has actually been made in negotiations following the June summit. Accordingly, all the sanctions remain in place, and it appears that at least for the foreseeable future, these severe restrictions will continue to adversely impact humanitarian activities.

We are continuing strenuous efforts to legally overcome all the additional layers of sanctions that apply to our work. These include BIS (Commerce) licenses, OFAC (Treasury) licenses, State Department travel restrictions, China customs and banking issues, US banking issues, UN 1718 Committee Sanctions, and supplier reassurances. Through much work and the help of pro-bono legal counsel, we have made some progress through this labyrinth of new regulations, but we still have more work to do before the full breadth of our work can be restored. We ask for your faithful prayers and continued support as we push forward in the meantime with basic humanitarian shipments of food, hepatitis and TB medicine, blankets and other very basic goods which we are currently licensed to send. Now more than ever, we ask for your daily prayers for wisdom and breakthrough for diplomacy efforts, and for our team in the midst of an extremely complex legal context. And please continue to remember the long-suffering and vulnerable people of the DPRK who bear most acutely the impact of all this pressure. Thank you for your faithful prayers and support.



CHRISTIAN FRIENDS OF KOREA
조선의 그리스도인 벗들

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

Like us on Facebook ( ChristianFriendsOfKorea)

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.