

Social Development Issues: Education, Health, and Social Protection

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Introduction

Not only is this the fifth anniversary of the June 15th Joint North-South Korean Declaration, it is also the fifth anniversary of the Millennium Declaration, adopted by all United Nations member states, including the DPRK, in the year 2000. In the progress report on the implementation of the Millennium Declaration, UN Secretary-General Kofi Annan on 21 March 2005 proposed a strategy giving equal weight to the three great purposes of the UN: development, security, and human rights. The document identifies these as “freedom from want, freedom from fear, and freedom to live in dignity.”¹

In many respects this is an expansion of what we have come to call “human security,” and it applies particularly well to the great need for social development faced by the people of the DPRK. Unfortunately, human security is too often trumped by traditional insecurities, and those currently abound on the Korean peninsula. State security has once again taken the upper hand, at great cost to individual security, whose protection ought to be the responsibility of every state. In the DPRK, this is particularly true of education, health, and social protection.

Education

The DPRK education system was modeled largely on that of the Soviet Union. In the post-war period, two-thirds of school-age children did not attend primary school, and most adults were illiterate. By 1959 a universal education system was introduced that continues to this day, with state-financed instruction, educational facilities, textbooks, uniforms, and room and board.²

In his 1977 “Theses on Socialist Education,” Kim Il Sung wrote that “political and ideological education is the most important part of socialist education.” According to this thesis, curricula must consist of (1) political indoctrination programs to inculcate the students with Juche Ideology and to arm them with communist virtues, (2) general subjects to help the students attain scientific knowledge, and (3) physical exercise programs to strengthen labour productivity and national defence capability.³

Education in the DPRK is a “total experience” encompassing not only formal school education but also extracurricular “social education” and work-study adult education throughout life. More

¹ <http://www.un.org/largerfreedom/contents.htm>

² Information for background of education and health sections of this paper gleaned from “Federal Research Division of the Library of Congress under the Country Studies/Area Handbook Program sponsored by the US Department of Army,” <http://lcweb2.loc.gov/frd/cs/kptoc.html#kp0061>; and Helen-Louise Hunter, *Kim Il-song’s North Korea* (Westport, CT: Praeger Publishers, 1999).

³ “North Korea’s Educational Policy,” by Choi Eun-soo, (Soongsil University, 1996); http://www.fortunecity.com/meltingpot/champion/65/dprk_edu.htm

than 8% of instruction is devoted to the “Great Kim Il Sung,” “Communist Morality,” and “Communist Party Policy.” Nurseries and kindergartens have “special education” rooms dedicated to the study of the lives of Kim Il Sung and Kim Jong Il.

Outside the formal classrooms, children engage in “social education,” which includes not only extracurricular activities but also family life and the broadest range of human relationships within society. There is great sensitivity to the influence of the social environment on the growing child and its role in the development of character.

In the early 1990s, the compulsory primary and secondary education system was divided into one year of kindergarten, four years of primary school, and six years of senior middle school. All children up to the age of 17 are enrolled in school. Because their mothers are involved in the work force, many children attend nursery schools from six months of age, plus two years of kindergarten.

After graduating from people’s school, students enter either a regular secondary school or a special secondary school that concentrates on music, art, or foreign languages. Institutions of higher education include over 130 colleges and universities, including the elite Kim Il Sung University, whose colleges and faculties include economics, history, philosophy, law, foreign languages and literature, geography, physics, mathematics, chemistry, atomic energy, biology, and computer science. There are about 3,000 faculty members for teaching and research.

Because of the emphasis on the continued education of all members of society, adult or work-study education is actively supported. Practically everyone in the country participates in some educational activity, usually in the form of “small study groups,” which includes weekly political training. The adult literacy rate is estimated at 99%.

Problems in Delivery of Education

Despite much effort and dedication, particularly on the part of teaching staff, to maintain the standard of education, subject expertise and learning methods have not evolved in step with international developments.

Overemphasis on political education and enforcement of conformity has led to substandard academic achievements. DPRK’s isolation and the extensive restrictions placed on means of communication (for example, the Internet) have limited access to the benefits of modern research and international academic networks.

Economic difficulties have led to shortages of textbooks and basic school supplies, which are now charged to parents rather than the local authority. Educational infrastructure, such as school buildings and water and sanitation, is rapidly degrading. Inadequate heating in schools during the long subzero winters produce illness and absenteeism.⁴

Because of the excessively political nature of instruction in elementary education, the international community will likely avoid major investment in this sector.

⁴ <http://www.unicef.org/dprk/education.html>

Health

The DPRK claims to have dramatically improved the health and longevity of its population since the creation of a state-funded and state-managed public health system. The average life expectancy for both sexes in the 1936–40 period was just over 38 years. By 1986, the DPRK boasted a life expectancy of 74 years at birth. But a report by the UNFPA-supported DPRK Population Research Institute shows the 2002 life expectancy dropped to 67 years.⁵ According to the 2005 CIA World Factbook released online at the beginning of June, life expectancy is on the rise again, at 70.79 in 2003, 71.08 years in 2004, and 71.37 currently.⁶

Between 1955 and 1986, the number of hospitals grew from 285 to 2,401; clinics increased from 1,020 to 5,644 at the provincial, county, ri, and dong levels, as well as dispensaries attached to factories and mines.

The DPRK's "section-doctor system" assigns a single physician to a geographical area covering several hundred households. There is a higher ratio of doctors per population than in China or Vietnam (568 per 100,000, compared to 162/100,000 in China and 48/100,000 in Vietnam). In hospitals there are an inverse number of doctors over nursing staff, compared to other countries. This is because section doctors are also attached to hospitals, with responsibility for the education and care of patients both inside and outside the hospital.⁷

The State guarantees universal and free health care in the Constitution (Article 72) and in the Public Health Law of 1980. The latter decrees a health system that is equally prophylactic and curative.⁸ Disease prevention is accomplished through "hygiene propaganda work," educating the people on sanitation and healthy lifestyles. Children and adults are expected to participate in physical exercises during work breaks or school recesses.

Between 1970 and 1976, health care policy shifted from growth-oriented to the balance-oriented. Unlike most developing countries, urban-rural disparities in access to health care are minimal.

Traditional Koryo medicine has experienced a revival in the wake of the economic crisis. Every hospital and clinic cultivates its own herb gardens, supplying an estimated 60-80% of the total drugs utilised. Although efficient for chronic ailments, they cannot replace Western antibiotics, analgesics, and anaesthetics for acute cases.

⁵ *Korea Times*, "North Korea's Population Reaches 22.9 Million," 3 June 2005. The number of DPR Koreans totalled 22.9 million as of May 17, up 214,624 from a year ago. Life expectancy was 71.37 years; 68.65 for men and 74.22 for women last year.

⁶ *Korea Times*, "Life Expectancy in North Korea Falls," 2 May 2005; <http://www.nautilus.org/napsnet/dr/>

⁷ Analysis of the Situation of Children and Women in the Democratic People's Republic of Korea, UNICEF DPRK, October 2003; <http://www.nautilus.org/DPRKBriefingBook/humanitarian/situationanalysis.pdf>

⁸ According to the Public Health Law, "The State regards it as a main duty in its activity to take measures to prevent the people from being afflicted by disease and directs efforts first and foremost to prophylaxis in public health work."

Problems in Delivery of Health Care

Due to food shortages from 1993 to 1998, the infant mortality rate increased from 14 to 24 per 1,000 live births and the under-five mortality rate from 27 to 50 per 1,000 live births. The CIA 2005 Factbook claims that the infant mortality rate has declined again, from 26 in 2003, to 25 in 2004, to 24 this year.⁹ The main causes of child deaths continue to be diarrhoea and acute respiratory infections (ARI), with malnutrition underlying half of these deaths.¹⁰

On 7 March, UNICEF and WFP jointly released the 2004 Nutrition Assessment report in Beijing. Results showed a steady improvement since 2002, with rates of stunting at 37%, underweight 23%, and wasting 7%. According to WHO criteria, however, these levels are still considered high. Malnutrition among mothers has remained almost the same, at 32%, with an anaemia rate of about 35%. The survey draws a link between maternal and child nutritional status, suggesting a need to focus on the health of mothers and very young children.¹¹

Tuberculosis (TB) is a leading cause of death in the overall population, claiming some 2,300 lives annually. Between 1994 and 2001, there was an almost 600% increase in the incidence of TB, clearly another indicator of inadequate nutrition. Vivax malaria has reemerged as a health concern, as has the more recent threat of bird flu.

Severe and widespread shortages of basic equipment, a general degradation in the infrastructure, combined with the deterioration of water and sanitation systems have reduced the capacity of the health system to manage disease. There is a shortage of even basic equipment like stethoscopes and sphygmomanometers. When available, equipment is often over 30 years old.¹²

The UN-assisted rehabilitation of domestic pharmaceutical factories has been slow, making it difficult to produce most Western drugs. Hospitals currently receive very limited quantities of injectable penicillin, streptomycin, and Novocain from governmental sources. The country is now largely dependent on essential drugs provided by the WHO, UNICEF, and the Red Cross Federation.¹³

The most difficult time is winter, when temperatures can drop down to minus 30°C. Inpatient wards, operating theatres, emergency departments, and delivery rooms lack heating. Bed occupancy rates drop to half of total capacity.

WHO supports badly needed upgrading of knowledge and skills among medical staff, but access by household doctors in remote areas remains limited.

⁹ *Korea Times*, "North Korea's Population Reaches 22.9 Million," 3 June 2005.

¹⁰ United Nations Children's Fund Executive Board Annual session 2003 2-6 and 9 June 2003; <http://www.nautilus.org/DPRKBriefingBook/humanitarian/cpd2004-2006.pdf>

¹¹ WFP/UNICEF 2004 Nutritional Survey; http://www.unicef.org/dprk/Nutrition_assessment_2005.pdf

¹² <http://www.unicef.org/dprk/health.html>

¹³ International Federation of Red Cross and Red Crescent Societies, DPRK Appeal 2004 (No. 01.68/2004); <http://www.nautilus.org/DPRKBriefingBook/humanitarian/IRC016804.pdf>

Social Protection

Other aspects of the DPRK social security system are more difficult to document, since they have not been subjected to the level of international assistance (and therefore intrusion) as food, health, and education.

The Juche ideology—apart from emphasizing the importance of developing the nation’s potential using one’s own resources and human creativity—teaches that an individual’s value rests in how he or she serves the community, not in how he or she stands out from the community. It venerates the nation’s leader as a parent who supplies to his children all that is necessary for survival.

In addition to free education and free health care, this also involves the provision of free housing, clothing, etc. From the end of the Korean War, housing construction increased with each successive development plan. By 1976, North Korea had constructed some 2.5 million new housing units for almost three fourths of its urban and rural households.¹⁴ The DPRK’s commitment to the well-being of children and women is enshrined in its Constitution, laws, and policies that guarantee a comprehensive set of social services, subsidies, and safety nets.

One way to view the DPRK is from the perspective of a people determined to make an absolute break from a history of foreign oppression and domination that has plagued and traumatized the Korean peninsula for centuries. It is the story of a people who found dignity in hard work and sacrifice, convinced that they were building a utopia with uniquely Korean characteristics: a society built on national pride, confidence in their own abilities, loyalty to an infallible leader, the triumph of principles over interests, the needs of the nation over the needs of the individual, and faith in the future, when a reunited Korea will become a beacon of hope for the entire world.

Problems in Delivery of Social Services

Unfortunately this dream has a dark underside that none of us engaged in this story can ignore. For all its lofty ideals, the DPRK political and social system results in major insecurities for ordinary North Koreans, whose individual liberties are almost totally curtailed. Extremely harsh punishments are meted out for anti-social behaviour or disloyalty to the party or the leader. The economic hardships of recent years have led an increasing number of migrants, refugees, and defectors crossing into China, Russia, and South Korea.

There is one particular human rights aspect that should be of concern in any discussion of social protection in the DPRK, because it affects all other areas. Although the Juche socialist ideal promises a society of equals in which class oppression is eliminated, most evidence shows that great social and political inequality not only continues to exist but is fostered in the DPRK.

In a 1995 publication entitled *An Overview of North Korea*, the ROK Ministry of Unification identified three classes and 51 subclasses in the DPRK’s social stratification. The top 28% of the population constitute the “Nucleus Class,” the next 45% are the “Unstable Class,” and the

¹⁴ Helen-Louise Hunter, *Kim Il-song’s North Korea* (Westport, CT: Praeger Publishers, 1999), p. 187.

remaining 27% the “Hostile Class.”¹⁵ This stratification is based on expected levels of loyalty and reliability to the regime. But according to refugee-defector reports, there is no chance of mobility, with class labels inherited by succeeding generations. Since the state is the sole allocator of resources, inequalities are justified and perpetuated in terms of the state’s political and economic imperatives.

Not all population groups are able to benefit equally from the DPRK’s 2002 economic adjustments. Some are facing a serious reduction in their purchasing power, resulting in decreased access to social services. Newly emerging vulnerable groups tend to include the underemployed or unemployed urban industrial workers and their families.¹⁶

The social security system developed as a means of promoting equality among urban and rural populations, resulting in relatively equitable extension of services throughout the country. With dwindling resources, however, it has not been possible to maintain government spending and social investments. Although difficult to quantify, there is a growing gap in income and standard of living, and one can only assume that class ranking will have an impact on who benefits and who loses out.

The government says it is committed to continue social service schemes—including health, education, childcare, protection of the disabled, and entitlements for women—for 30 categories of recipients. But practical coping responses may exceed the abilities of individuals and their families. Many women, for example, forgo maternity benefits in order to accumulate the necessary work points to access food rations. The problem is whether such a wide range of free services is sustainable, considering that many of them are highly dependent on international humanitarian assistance.¹⁷

Transforming Attitudes

Seen from a North Korean perspective, the international community has always been hypocritical in its humanitarian approach. DPRK public education campaigns regularly warn of “the ‘yellow’ wind from the imperialists [that] is more fatal than an atomic bomb.”¹⁸ Far from expressing gratitude for the humanitarian aid received from international donors, editorials often warn people about contact with foreigners bearing gifts. Even humanitarians are portrayed as tools of the enemy, bent on the people’s destruction.

These attitudes are not based entirely on fiction. While we may hold that humanitarian aid and politics should be kept separate, the international political environment too often affects the level of assistance provided. Despite protestations to the contrary, there is a clear political element in every humanitarian interaction.

¹⁵ A table of classes is reproduced in Kim Soo-am, “Human Rights in North Korea: An International Issue or a Sovereign Matter?” *East Asian Review*, Vol. 14, No. 3, (Autumn 2002), p. 24.

¹⁶ 26 May 2004 Revision of the Consolidated Appeals Process (CAP): Humanitarian Appeal 2004 for Democratic People’s Republic of Korea, United Nations Office for the Coordination of Humanitarian Affairs (OCHA)

¹⁷ Analysis of the Situation of Children and Women in the DPRK (UNICEF), p. 19.

¹⁸ “Reject Imperialists’ Ideological and Cultural Poisoning,” *Pyongyang Times*, 12 June 1999.

In conference after conference, two distinct messages emerge from the humanitarian community: the first deplors that the expended aid has not achieved a hoped-for change in the North Korean political and economic system, while the second tries to prove that small but significant changes have indeed been achieved. But since Korea is neither Germany, nor China, nor Soviet Russia, it is presumptuous to believe that non-Koreans have a better model for the future of Korea than Koreans themselves.

Historical and current conflicts have produced an atmosphere of distrust and partiality that weighs heavily against forward movement on any social justice agenda. The level of trust in the international community has been further eroded by an adversarial emphasis on human rights violations that DPR Koreans regard as a lever for effecting regime change.

The DPRK has always had an ambiguous relationship with the United Nations, which continues to be used by member states as both carrot and stick. The DPRK has always been uncomfortable with intrusive monitoring as a security risk, so it should surprise no one that in the wake of the current nuclear standoff the government is asking the WFP and other agencies for simplified monitoring procedures and fewer resident international aid workers.

The international community sends conflicting messages when it presses for economic reform and increased marketization without offering assistance to offset or cushion the resulting income disparities and social security dislocations. The social safety net will have to be reinforced or realigned to ensure that the affected population has access to food and basic social services.

Recommendations

1. Since regime stability has been identified as a prime motivating force in the DPRK, it may be wise to find a positive connection between human security and regime security. This is more urgent in the wake of the DPRK's declaration that it is a nuclear power. Regime stability has become a necessary condition for any hope of denuclearising the Korean peninsula.
2. Instead of demeaning the Juche idea as morally inferior, it may be psychologically expedient to link Juche with self-help strategies emphasizing education as a means to help Koreans solve their own problems.
3. In order to help DPR Koreans find their own solutions to the pressing humanitarian problems, major emphasis should be placed on providing learning opportunities such as scholarships, study tours, and other avenues of exposure to the outside world. Education and training for economic modernization and integration into the global economy is an acute need, and will have impact on social development. DPR Korean students already undertake technical studies abroad in increasing numbers, sponsored by the UNDP, the EU, several national development agencies, and NGOs.
4. Education within the DPRK is equally important. A number of agencies have formulated detailed plans to improve the quality of the country's system of free and compulsory education. UNICEF provides textbooks and basic school supplies, including teaching

material on child rights and HIV/AIDS, for example. It also supports the development of an educational management information system to plan educational services for children.¹⁹

5. For the DPRK to exit from its chronic emergency, humanitarian assistance needs to be augmented by extensive development cooperation. Much greater emphasis needs to be placed on building the capacity for development, which will also increase the effectiveness of humanitarian aid.
6. The DPRK needs to learn that its request for more technical assistance and development-oriented support will require an improved quality of interaction with the aid community: better transparency, better data and information, more policy dialogues, and a change in the working relationship to that of a partnership and participatory approach.
7. Large-scale donors need to break out of the current political and ideological straitjacket that limits their involvement to the humanitarian sphere. Political constraints need to be removed from donor activities and the benefits of development cooperation need to be highlighted. The sectors of education, health, and social protection offer a variety of entry points for positive interaction between the DPRK and the international community.
8. The currently scarce resources, the small number of external partners, and the continuing humanitarian imperative severely limit the scope for large-scale interventions. The improvement of water and sanitation infrastructure is a desperate priority need, yet resources expended are pitiful. The return value of such improvements in terms of health care alone is vast, and of immediate benefit to all levels and classes in DPRK society.
9. Health service improvement has been a collaborative effort on the part of the World Health Organization, the United Nations Population Fund (UNFPA), the International Federation of Red Cross and Red Crescent Societies (IFRC), and UNICEF. Although miserably underfunded, these agencies have made detailed plans, especially in relation to children and women. Included are immunization campaigns, training for health personnel and section doctors, production of manuals and appropriate supply of equipment. New standard medicine lists and treatment protocols are provided along with the distribution of essential medicines. For the sake of sustainability, the country's capacity to produce the most essential drugs locally should be restored.²⁰
10. Until major donors see a way out of the current political and nuclear impasse, chances are that development activities will fail to find significant funding. This may be an ideal time for capacity-building and pilot projects. As many UN agencies and NGOs have discovered, the local county level is ideally suited for pilot innovations that can strengthen national planning in the social sector. Counties are relatively autonomous in terms of resources and decision making, and are of manageable size for modeling development strategies and determining their ability to be replicated at an affordable cost. County-level projects will provide

¹⁹ <http://www.unicef.org/dprk/education.html>

²⁰ <http://www.unicef.org/dprk/health.html>

valuable experience for planning larger-scale social development schemes once financing becomes available.²¹ NGOs are well suited to experiment with innovative projects at the local level, whether they are resident in-country or operate with non-resident experts on frequent visits. It is crucial that NGOs continue to receive both political and financial support.²²

Open Questions

1. How can we ensure that the benefits of improvements in education, health, and welfare reach all segments of society? This may be less of a problem if projects tackle large-scale infrastructure of the educational and health systems—such as schools, hospitals, water, and sanitation, which by their nature will benefit all citizens. Is it possible for the DPRK to accept the notion that in a market environment, upward mobility replaces ideological motivation as the motor of industriousness, efficiency, and innovation? What educational opportunities can be offered to DPRK policymakers for social welfare management in a market environment?
2. Is it possible to manage economic change in a way that does not erode social security? As the socialist origins of the DPRK health and education systems confront the realities of the emerging domestic and international markets, the social safety net for all levels and classes of society will have to be reinforced or realigned to ensure that the affected population has access to food and basic social services. Can international financial institutions avoid the mistakes of structural adjustment programmes that devastated social protection in so many countries?
3. How can improvements in social justice be encouraged without being co-opted for “blame and shame” tactics in coercive diplomacy—as in the case of human rights? If multilateralism also means a division of labour, is the USA the most appropriate country to lead the way on human rights? After three years pushing human rights resolutions at the United Nations Commission of Human Rights, how do European sponsors evaluate the effectiveness of this procedure? Does an adversarial approach to human rights further the aim of persuading DPRK authorities to share information and statistics on social welfare indicators? Can the importance of human rights and fundamental freedoms be reframed as central elements both of economic development and the ultimate fulfilment of Juche ideals?

In signing the UN Millennium Declaration along with 190 other UN member states, the DPRK has committed to the eight Millennium Development Goals: (1) eradicating extreme poverty and hunger; (2) achieving universal primary education; (3) promoting gender equality and women empowerment; (4) reducing child mortality; (5) improving maternal health; (6) combating

²¹ <http://www.nautilus.org/DPRKBriefingBook/humanitarian/cpd2004-2006.pdf>

²² NGOs currently resident in the DPRK: Adventist Development and Relief Agency (ADRA Switzerland), Campus für Christus (Switzerland), Cooperazione e Sviluppo Internazionale (CESVI Italy), Concern Worldwide (Ireland), Deutsche Welthungerhilfe (German Agro Action), Handicap International (Belgium), Korea Maranatha Enterprise Development (Australia), PMU Interlife (Sweden), Premiere Urgence (France), Triangle Génération Humanitaire (France), and Save the Children (UK). The Food Aid Liaison Unit (FALU) under the umbrella of WFP assists non-resident NGOs in providing assistance.

HIV/AIDS, malaria, and other diseases; (7) ensuring environmental sustainability; and (8) developing a global partnership for development. All eight goals are relevant to the North Korean people's struggle to find solutions to the pressing social development problems experienced in education, health, and social protection. The level of DPRK cooperation and multilateral commitment will determine whether these goals can be achieved in North Korea by the Millennium target date of 2015.