

Young People and HIV/AIDS

The population of DPR Korea, according to 2004 estimates, is 22 776 000 of which 24% are young people in the age group of 10-24 years. It is estimated that there are fewer than 100 people living with HIV/AIDS in the country^{1,2}. According to UNAIDS estimates the adult HIV prevalence rate in the country is less than 0.2%³.

There is no recent data available on the HIV/AIDS situation in the country. There is little or no knowledge on sexual behavioural patterns and the prevalence of other sexually transmitted infection among young people in the country. However, risk factors for HIV/AIDS exist in DPR Korea. Poor injection practices and low quality of blood transfusion services along with increasing cross-border travel between DPRK and China, a country with a growing rate of HIV infections, heightens the risk of potential exposure to HIV/AIDS in DPR Korea.

The government of DPR Korea has a widespread infrastructure for delivery of health services to the population in terms of access and coverage of health care. It has taken steps to systematically improve the health and well-being of its people, women and children in particular. The fundamental principles of the national health policy include universal and free medical care and

services, including preventive and curative health services.

To document the prevalence rate of HIV infection in pregnant women, the government has put in place measures to monitor the HIV/AIDS situation. The prevention and control of HIV/AIDS Strategy 2003-2007 outlines the framework for this. According to the government, no case of HIV-positive persons has been recorded till date⁴.

WHO has developed a country cooperation strategy with the aim of responding to the priority health problems in the country⁵. With regard to HIV/AIDS, the challenge is in terms of shifting surveillance strategy from travellers' blood tests to surveillance of sexually transmitted infections and promotion of the use of condoms. The priority areas identified for support are:

- Development of national HIV/AIDS prevention strategies;
- Improve surveillance of STI and HIV infections;
- Advocacy for better access to and use of condoms at community level;
- Improving knowledge and skills for prevention and management of STIs, and
- Strengthening interagency and intersectoral coordination.

References

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4. *Improving maternal, newborn and child health in the South-East Asia Region*. Pyongyang: WHO Country Office for DPR Korea, 2004.
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