



## EDITORIALS

# Global health engagement with North Korea

Rare chance to improve the health of a hard to reach population

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The recent rapprochement between South Korea and North Korea (officially known as the Democratic People's Republic of Korea) is an exciting opportunity for the peoples of the two countries and for global health, especially if diplomatic engagement with the United States produces favourable results.<sup>1</sup> At the time of writing, the first meeting between a sitting US president and North Korea's supreme leader is scheduled for 12 June in Singapore.

Previous inter-Korean summits, in 2000 and 2007,<sup>2,3</sup> led to agreements by the two Korean leaders to cooperate on health, medical services, agriculture, and environmental protection, which received widespread support. Similar developments to improve population health are possible after the new talks, but two major challenges must be overcome.

Firstly, the current health status and needs of the North Korean population are largely unknown. Any meaningful effort to engage with North Korea to improve health must prioritise data collection and research to address large knowledge gaps and to inform a strategy to ensure universal health coverage.<sup>4</sup> A recent search for health related publications on North Korea in five medical databases (PubMed, CINAHL, Embase, Web of Science, and Google Scholar) found fewer than 200 peer reviewed English language articles.<sup>5</sup>

During the 1990s, when international organisations first began working in North Korea, the government viewed requests for health data through a security prism, concerned that data could be exploited by foreign states.<sup>6</sup> In recent years, however, the government has recognised that research is essential to achieve improvements in population health, especially when faced with limited resources.<sup>4</sup>

Important breakthroughs in data collection and research include publications on nutrition in 1998, 2005, and 2014,<sup>7-9</sup> hepatitis B in 2015,<sup>10</sup> and tuberculosis in 2016 and 2017.<sup>11,12</sup> Though these developments offer reason for optimism, future engagement by global health actors, donors, and academics, must tackle the large gaps in research and ensure that evidence is translated into policies. Research priorities include non-communicable diseases, which are now the primary determinant of morbidity and mortality in the country,<sup>13</sup> and disabilities and injuries, which

account for a rapidly rising proportion of the total burden of disease.<sup>14</sup>

Secondly, as travel restrictions from South Korea to North Korea begin to relax, South Korean based health organisations, faith based organisations, academics, and donors are applying for direct engagement with North Korea.<sup>15</sup> Over the past decade, South Korean organisations have found it difficult to engage in North Korea because of political hurdles, and tensions have emerged between organisations working directly with the North Korean government and those engaged in refugee related work.

Perhaps one of the most important and recurring failures of global health dialogue on North Korea has been the absence of the country's own representatives. Although the rising number of global health actors with substantial levels of funding—from South Korea and globally—provide an exciting opportunity to improve the health of populations across North Korea,<sup>15,16</sup> a global platform and mechanism must be developed to ensure that organisations can talk to each other, build trust, and work in coordination with North Korean officials. Securing improvements in health will require vision and a collective willingness to collaborate with North Korea and its citizens in a new partnership towards ensuring universal health coverage. A window of opportunity for global health has opened and demands a new forum to link new donors with policy makers and academics. The efforts should be underpinned by effective systems of data collection and analysis to generate much needed evidence on the current and future health needs of the North Korean population.

There are no "sides" in global health, only unity towards a common goal to maximise the health and wellbeing of populations. Global health organisations currently working in North Korea should be prepared to harness the potential of health organisations, development experts, and academics willing and able to engage while the window of opportunity is still open. There are no guarantees, but now is the time for bold new partnerships forged in the interests of one of the world's most hard to reach populations.

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