



KENYA

Humanitarian Situation Report

SITUATION IN NUMBERS

Highlights

- Out of 37,096 children under 5 years screened for acute malnutrition in nine counties in the month of May 2017, 7% were identified as severely malnourished and 25.4% as moderately malnourished with all referred and admitted for treatment.
- Between January and May 2017, a total of 42,579 children have been admitted for treatment of severe acute malnutrition in ASAL, urban and refugees, reaching 51% of UNICEF’s 2017 target.
- People living in many parts of ASALs (where the long rains have ended) are still experiencing long distances between home and water sources, unusually high food prices, and worrying levels of malnutrition.
- Five disease outbreaks continue in parts of the country with Kala zaar (Visceral leishmaniosis) having the highest Case Fatality Rate (CFR) of 3.4 per cent.
- UNICEF Kenya’s humanitarian requirements for 2017 remain underfunded with a funding gap of 48 per cent. Without additional funding, UNICEF will be unable to support the drought emergency response, and mitigate risks of a worsening drought situation for children

19 June 2017

- 2.6 million** People are food insecure (2017 Kenya Flash Appeal, March 2017)
- 2.7 million** People are in urgent need of safe drinking water (2017 Kenya Flash Appeal, March 2017)
- 1.1 million** Children are food insecure (Long Rains Assessment, January 2017)
- 109,464** Children under 5 are in need of SAM treatment (Nutrition SMART Surveys, Feb 2017)
- 174,954** children are not attending pre-primary and primary schools as a direct result of the drought. (2017 Kenya Flash Appeal, March 2017)

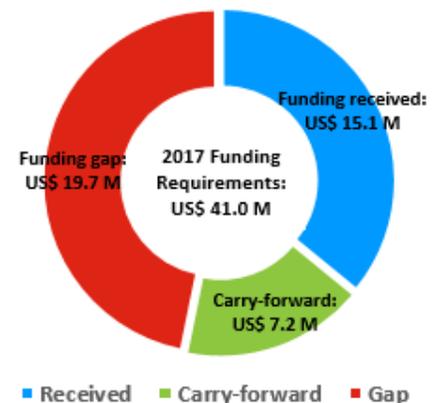
UNICEF’s Key Response with Partners in 2017

	UNICEF		Sector	
	UNICEF Target	Cumulative Results*	Sector Target	Cumulative Results
Nutrition: children under 5 with SAM admitted into the integrated management of acute malnutrition programme	83,848	42,579	83,848	42,579
Nutrition: children under 5 with MAM admitted into the integrated management of acute malnutrition programme	171,917	89,214	171,917	89,214
Health: Children under 5 accessing an integrated package of interventions, including for the management of diarrheal diseases	780,000	207,909		
WASH: People gain permanent access to 7.5-15 l/p/d of safe water for drinking, cooking and personal hygiene	400,000	91,198	2,663,423*	579,644
Child Protection: Most vulnerable children are provided with access to protection services, including case management, psychosocial care and access to child-friendly spaces	30,000	8,029	139,000	8,029
Education: Children aged 3 to 18 years affected by crises accessing formal and non-formal education opportunities	322,000	98,913	567,600	98,913
HIV: Children, adolescents, pregnant and lactating mothers previously on HIV related care and treatment continue to receive ART in Kakuma Refugee Camp and the host community of Turkana West	90,000	38,071		

*The Government has not set sector drought targets for WASH. For permanent access to water the population in need in the 23 ASAL counties is taken as a cluster target.

UNICEF HAC Appeal 2017 US\$ 41,000,000

2017 Funding Status



Situation Overview & Humanitarian Needs

The National Drought Management Authority's (NDMA) early warning bulletin for June indicates that while the long rains have ended, many parts of the Arid and Semi-arid Lands (ASALs) are still experiencing long distances between home and water sources, unusually high food prices, and worrying levels of malnutrition. Being the third consecutive below-average rainfall season, the modest recovery conditions in some parts of ASALs are likely to be short-lived. Therefore, the upcoming dry season (June to September) will be a difficult one for the ASALs in terms of malnutrition, access to water and food, particularly for pastoral communities. Insecurity linked to resource-based conflicts has worsened, while Fall Armyworm and African Armyworm infestations continue to threaten crops in marginal agricultural counties, further worsening the prospects for the next harvest.

Disease outbreaks continue in parts of the country with Kenya currently responding to five disease outbreaks. There is an active Cholera outbreak in five counties (Garissa, Nairobi, Muranga, Turkana and Nakuru) with 581 confirmed cases and seven deaths (CFR 1.2 per cent). A dengue fever outbreak also continues in Mombasa and Wajir Counties, with 1,015 cases, and one death (CFR 0.1) reported to date. In addition, 17 cases of Measles were reported in Garissa County's Dadaab refugee camp with no death reported so far. The last measles case was reported on the 5th of June, likely to be the end of the outbreak after the measles vaccination campaign in the camps concluded. In Marsabit and Wajir counties, Kalaazar outbreak has resulted to 208 cases and seven deaths (CFR 3.4 per cent). A key challenge for the health sector is the ongoing nurses' industrial strike over delays in pay since 7th June 2017 which continues to affect access to health services including integrated outreach services across all levels of care.

Kenya continues to receive an increased number of refugees from South Sudan, with 10,772 new arrivals from South Sudan since January 2017. The majority of new arrivals (69.7%) are from Central Equatoria. The situation in Kakuma and Kalobeyi Refugee camps is further aggravated by the ongoing cholera outbreak.

Humanitarian access in East Pokot sub-county (of Baringo County) remains severely constrained due to ongoing intercommunal conflict and security operations by government forces. While the humanitarian situation in the sub-county is of great concern (especially the malnutrition situation); access to the affected population is extremely limited. About fifteen health facilities in the area remain closed, and the remaining nineteen facilities are operating sub-optimally.

Humanitarian Strategy and Coordination

UNICEF is supporting the Government-led drought response efforts, through its multi-sector response plan, focusing on sector coordination, increased partnerships and delivery of lifesaving interventions and supplies. Programme implementation is being coordinated and monitored through three Zonal Offices in Kisumu, Lodwar and Garissa. UNICEF's core programme response continues to focus on nutrition services and the provision of water. To reach the people most in need, UNICEF includes the provision of emergency lifesaving integrated health outreach services for the most vulnerable drought affected communities with little or no access to regular health care. UNICEF is addressing contaminated sources of drinking water to reduce the risk of waterborne disease such as cholera. Cross-border coordination with UNICEF Uganda and Somalia is ongoing to address cross-border issues and population movements due to the drought, among other reasons.

The Government is leading the drought response at both national and county levels. However, the scale of the need is overwhelming national structures and national capacity to respond. As sector lead for Nutrition, Education, Child Protection and WASH, UNICEF is scaling up sectoral coordination and technical support to the government, including technical support for Information Management through the secondment of Information Management Specialists to key line ministries. Several Government and partner mechanisms are providing cash and/or food assistance in the country: i) the Hunger Safety Net Programme; ii) the Government's State Department of Special Programmes; iii) Government safety nets from the State Department of Social Protection; iv) county governments; v) WFP, vi) the Kenya Red Cross Society; and vii) non-governmental organizations.

UNICEF is also supporting cross-border information sharing and coordination with Somalia and Uganda. For inter-country coordination with Somalia, UNICEF is supporting cholera prevention through monitoring of arrival trends, tracking places of origin and surveillance of other diseases. For Uganda, UNICEF is facilitating ongoing coordination and cross-border information sharing on the Karamoja – Turkana border to monitor population movements and service provision to drought affected communities. In the border regions of Kenya, Ethiopia and Somalia, UNICEF is enhancing cross border cooperation and programming in response to the impacts of the current drought affecting Kenya and Ethiopia and pre-famine situation in Somalia.

In response to the ongoing Cholera and past Measles Outbreaks, a multi-sectoral joint proposal has been developed by WHO, UNICEF and UNHCR for key Health, WASH, Advocacy, Communication and Social Mobilization interventions in Dadaab and Kakuma refugee camps and in the host communities. UNICEF participated in a joint Cholera assessment mission to Kakuma refugee camp with the Ministry of Health at the National and Turkana County level along with WHO,

CDC and UNHCR, which informed the development of an inter-agency plan to enhance coordination as well as the development of partnerships to implement specific C4D activities in Kakuma refugee camp and the host community.

UNICEF's Response with Partners – Summary Programme Response

NUTRITION

As part of the Long Rains Assessment, the nutrition sector has now commenced the next round of nutrition SMART surveys, mostly funded through UNICEF. The surveys began in Turkana on the week of 11th June, while Samburu, Laikipia and West Pokot will start on the week of 18th June. Mandera, Marsabit, Garissa and Wajir surveys will be conducted after Ramadan (Holy month of fasting for Muslims) in the first two weeks of July. Survey plans are on hold for Baringo (East Pokot) due to heightened insecurity though these will be resumed as soon as access is permitted.

During the month of May, 37,096 children under 5 years of age were screened for acute malnutrition in nine counties (Baringo, Marsabit, Samburu, Turkana, West Pokot, Kilifi, Tana River, Laikipia and Kajiado). Of those screened, 7% were identified as severely malnourished and 25.4% as moderately malnourished with all referred and admitted for treatment. These numbers continue to highlight the deepening nutrition crisis with no obvious improvement following the poor performing rains and confirming the need to maintain the scale up of emergency response at least until the end of 2017 when the impact of the next rainy season should be felt.

The first round of the Blanket Supplementary Feeding Program (BSFP) targeting 553,258 children between 6 to 59 months and pregnant and lactating women, has been completed in Turkana North and Kibish sub-counties, and in North Horr of Marsabit County. The second month distribution is expected to commence at the end of June. Preparations are underway for the remaining targeted counties of Isiolo, East Pokot sub-county of Baringo and Mandera where distributions are due to start at the end of June.

Between January and May 2017, a total of 42,579 SAM and 89,214 MAM children received treatment accounting for 51% and 52% of the sectors' 2017 target respectively. This has been possible mainly due to the investment in mass screening and integrated outreach activities in the worst affected counties of Marsabit, Turkana, Mandera and East Pokot. The supply pipeline for RUTF remains secure until the end of the year and RUSF until the end of October based on current admissions. Of concern however, is the ongoing insecurity affecting access to nutrition services by the affected communities in East Pokot, and parts of Turkana and Mandera.

HEALTH

UNICEF has supported the Government of Kenya to conduct comprehensive mapping of communities most affected by ongoing emergencies, including the drought. As part of the response, integrated enhanced outreach services are currently ongoing in Mandera, Samburu, Turkana, Marsabit, Isiolo and Tana River. The outreach programmes are delivering emergency health and nutrition life-saving interventions to affected communities with a focus on reaching children under five years of age. During the reporting period, 37,960 children have been reached with interventions on deworming, vitamin A, immunization and treatment of common childhood illnesses through enhanced outreach services supported by UNICEF. This includes 2,379 children under one year who were immunized against measles. The outreach programme is expected to improve the health, nutrition and vaccination status of children who otherwise may not have been reached.

UNICEF continues to support counties affected by disease outbreaks with health commodities (including vaccines for children, ORS, intravenous solutions, inter-agency kits, and RDT for Kalazar and Cholera) to help them respond to the combined impacts of disease and drought. About 15,000 people in Garissa and Dadaab benefited from distribution of IEC materials with various messages on hygiene promotion and disease prevention; Rapid Diagnosis Kits (RDT) for Kalazar and Cholera and other lifesaving commodities such as Oral Rehydration Solutions (ORS) have also been distributed.

UNICEF is advocating with the government to consider increasing the use of the oral cholera vaccine in areas currently most stricken by Cholera as a supplementary intervention. A team is being convened who will conduct a feasibility assessment for the use of the cholera vaccine in the most affected and at risk areas of the country.

WASH

Over the past few weeks, 9,400 people, including 1,007 school children in 5 schools, were reached with safe water from the rehabilitation of eight water points (six in Turkana county and two in Marsabit County). Furthermore, a total of 96,800 livestock (29,400 in Turkana and 67,400 Marsabit) benefited from the rehabilitation of water points. A new generator set was delivered to Ambalo Borehole in Marsabit County, and when installed, another 4,200 people (including 200 school children and a dispensary) will be served with safe drinking water.

The three County Governments of Garissa, Marsabit and Turkana reached a total of 108,026 drought affected people with water trucking services.

Over the past two weeks, UNICEF disbursed US \$1,584,800 to 10 INGO partners (KRCS, Caritas, World Vision, Samaritan's Purse, GAA, ACTED, PLAN, NRC, FCA, OXFAM) to scale up humanitarian interventions in eight ASAL Counties- Turkana, Baringo, Marsabit, Mandera, Wajir, Garissa, Tana River and Samburu targeting 451,000 people for access to safe water, 414,000 people for access to critical WASH related information for the prevention of childhood illnesses and 31,672 school children with safe water and hygiene knowledge and practice.

A two-day information management training workshop for 4 Counties (West Pokot, Turkana, Baringo and Samburu) was held in Eldoret to strengthen information management and coordination capacity. 27 Participants, including 6 NGO representatives and County and national WESCOORD participants attended. Each county agreed to conduct monthly coordination meetings to ensure a more coordinated emergency response is rolled out.

CHILD PROTECTION

Over the past two weeks, UNICEF, in partnership with local partners and the Department of Children Services (DCS) provided case management support services to 1,302 children (595 girls and 707 boys) who were affected by drought in Turkana, West Pokot, Garissa, Marsabit and Wajir counties. In West Pokot County, 535 children (235 girls and 300 boys) were identified as separated, while 323 children (142 girls and 181 boys) were identified as unaccompanied. UNICEF is working with DCS and partners to trace and reunite the children with their families who are currently in temporary shelter for safety and psychosocial support. In Turkana County, 261 children (146 boys and 115 girls) were identified as living in the streets, of which 218 children (109 boys, 109 girls) were reunified with their families. In Marsabit County, 10 girls were reported to be affected by sexual exploitation and abuse have been identified for rescue and support services. In Garissa County, 42 children (13 girls, 29 boys) who were engaged in child labour were rescued and provided with care. In Wajir County, 50 children (37 girls, 13 boys) who were affected by child labour and neglect and one unaccompanied boy were all identified for re-integration with their families.

To prevent family separation during the drought, child protection in emergencies messages have been disseminated through local radio stations in Lodwar, Turkana County, by a UNICEF supported organization. The messages are likely to reach 10,000 listeners. In addition, cautionary letters targeting businesses knowingly engaging children in labour were circulated in Lodwar and Kalokol towns after their endorsement by the County Commissioner, local chiefs and the Turkana Gender and Child Protection Network. This is in response to reported increase in numbers of children engaged in labour during the drought.

In partnership with DCS, UNICEF held a one day workshop in Marsabit County to strengthen its joint Child Protection in Emergencies (CPiE) response, targeting 27 stakeholders from the Government, Non-Governmental Organizations and Community Based Organizations in Marsabit and Isiolo Counties. The key outcome included prioritizing interventions in the most affected areas of El-Hadi, Bubisa and Balesa in North Horr and Bala, Korr and Loiyangalani in Laisamis, and developing sub-county response plans to address the child protection needs in these areas.

EDUCATION

During this reporting period, over 20,000 pre-school and primary aged refugee children in Kakuma refugee camps have benefitted from early learning, educational materials and recreational materials which were distributed by UNICEF. UNICEF continues to monitor the impact of emergencies, especially drought on children and their families. The second SMS survey was sent out during the last week of May to 10,950 schools/head teachers in 23 counties, and 2,866 schools responded. The analysis indicates that enrollment at both ECD and Primary School levels has slightly increased in comparison to the January survey earlier this year. The increase is interpreted as a result of the commencement of the government's school feeding programme that reached the majority of schools before the start of the second term. The survey found that less than 50% of ECD and Primary schools have school feeding programmes and only 46% have access to safe drinking water. UNICEF is further analyzing the data to gain a full understanding of the extent and impact the recent drought and floods have had on the education sector.

In preparedness for 2017 general elections which will take place in August, UNICEF has ordered education supplies for emergency pre-positioning in Garissa and Kisumu hubs. These supplies will benefit approximately 25,000 children.

Funding for the Humanitarian Response

UNICEF requires US\$ 41 million for its Humanitarian Action for Children (HAC) Appeal in Kenya revised in March 2017 to meet the increased humanitarian needs in the country, including US \$23.3 million for the drought response, US \$7.3 million for the refugee response and US \$10.4 million for election preparedness which takes into consideration the potential for pre/post-election violence and subsequent displacement as well as resource based conflict, disease outbreaks and flashfloods.

In 2017, **The United Kingdom, DFID, Netherlands Committee for UNICEF, European Commission/ECHO, Government of Japan, USAID/Food for Peace, USAID/OFDA** and the **Central Emergency Response Fund (CERF)** have provided generous contributions to UNICEF’s humanitarian response in Kenya. However, the Kenya 2017 HAC appeal has a funding gap of 48 per cent and without additional funding, UNICEF will be unable to support the national drought emergency response, and mitigate the risks of a worsening situation for children. In order to meet the immediate humanitarian needs and to cover funding gaps, UNICEF Kenya has mobilized US \$450,000 from the UNICEF Emergency Programme Fund as well as US \$2,000,000 from UNICEF’s set-aside funds. In addition, UNICEF Kenya has allocated US \$517,531 from its regular programme resources for the emergency response.

Appeal Sector	HAC Requirements	Funds available*	Funding Gap	
			\$	%
WASH	5,100,000	2,720,673	2,379,327	46.7
Education	8,500,000	2,286,573	6,213,427	73.1
Health	5,000,000	1,692,978	3,307,022	66.1
Nutrition	13,500,000	11,786,881	1,713,119	12.7
Child Protection	2,000,000	2,987,585	0	0
HIV/AIDS	1,500,000	15,283	1,484,717	99
Social Protection	4,300,000	0	4,300,000	100
Cluster/sector coordination	1,100,000	841,090	258,910	23.5
Total	41,000,000	22,331,064	19,656,522	48%

*Funds available include funding received against current appeal as well as carry-forward from the previous year (US\$7.2 million, which includes US\$2.8 million for the refugee response).

Next SitRep: 3 July 2017

UNICEF Kenya HAC appeal: <http://www.unicef.org/appeals/index.html>

UNICEF Kenya Crisis Facebook: www.facebook.com/unicef

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Annex A SUMMARY OF PROGRAMME RESULTS 2017

	Sector Response				UNICEF and Implementing Partners		
	Overall needs	2017 Target	Total Results	Change since last report ▲ ▼	2017 Target	Total Results	Change since last report ▲ ▼
NUTRITION							
Children under 5 with SAM admitted into the integrated management of acute malnutrition programme	109,464	83,848	42,579	▲ 18,879	83,848	42,579	▲ 18,879
Children under 5 with MAM admitted into the integrated management of acute malnutrition programme	330,333	171,917	89,217	▲ 37,677	171,917	89,214	▲ 37,677
HEALTH							
Children under 5 accessing an integrated package of health interventions, including for the management of diarrhoeal diseases					780,000	207,909	▲ 37,960
Children under five vaccinated against measles*					46,013*	64,134	▲ 2,379
WATER, SANITATION & HYGIENE							
People gain temporary access to 7.5-15 l/p/d of safe water for drinking, cooking and personal hygiene		**	880,489	▲ 108,026	120,000	68,506	No change
People gain permanent access to 7.5-15 l/p/d of safe water for drinking, cooking and personal hygiene	2,663,423	2,663,423**	579,644	▲ 9,400	400,000	91,198	▲ 9,400
People that receive critical WASH-related information to prevent child illness, especially diarrhoea		**	37,198	No change	520,000	37,198	No change
Children access safe water, sanitation and hygiene facilities in their learning environment		**	7,766	No change	110,000	7,766	No change
CHILD PROTECTION							
Most vulnerable children are provided with access to protection services, including case management, psychosocial care	206,400	139,000***	8,029	▲ 1,302	30,000	8,029	▲ 1,302
EDUCATION							
Children aged 3 to 18 years affected by crises accessing formal and non-formal education opportunities	860,000	567,600	98,913	▲ 20,000	322,000	98,913	▲ 20,000
HIV and AIDS							
Adolescents have access to HIV, sexual and reproductive health and life-skills education and access to services that include testing and treatment					90,000	38,071	No change
SOCIAL PROTECTION							
Number of vulnerable households in six ASAL counties receive top-up cash transfers to help meet basic needs					70,000	-	-

* Target will be finalized after the HAC mid-year review process based on updated assessments/situation

** The Government has not set Sector drought targets for these indicators

*** Sub-Sector drought response target.