UNICEF’s Key Response with Partners in 2017

<table>
<thead>
<tr>
<th>Sector</th>
<th>UNICEF Target</th>
<th>Cumulative Results</th>
<th>UNICEF Target</th>
<th>Cumulative Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition: children under 5 with SAM admitted into the integrated management of acute malnutrition programme</td>
<td>83,848</td>
<td>35,273**</td>
<td>83,848</td>
<td>35,273**</td>
</tr>
<tr>
<td>Nutrition: children under 5 with MAM admitted into the integrated management of acute malnutrition programme</td>
<td>171,917</td>
<td>69,391**</td>
<td>171,917</td>
<td>69,391**</td>
</tr>
<tr>
<td>Health: Children under 5 accessing an integrated package of interventions, including for the management of diarrheal diseases</td>
<td>780,000</td>
<td>212,249</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WASH: People gain permanent access to 7.5-15 l/p/d of safe water for drinking, cooking and personal hygiene</td>
<td>400,000</td>
<td>96,838</td>
<td>2,663,423*</td>
<td>585,284</td>
</tr>
<tr>
<td>Child Protection: Most vulnerable children are provided with access to protection services, including case management, psychosocial care and access to child-friendly spaces</td>
<td>30,000</td>
<td>11,109</td>
<td>139,000</td>
<td>11,109</td>
</tr>
<tr>
<td>Education: Children aged 3 to 18 years affected by crises accessing formal and non-formal education opportunities</td>
<td>322,000</td>
<td>106,990</td>
<td>567,600</td>
<td>98,913</td>
</tr>
<tr>
<td>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</td>
<td>90,000</td>
<td>38,071</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*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.

** Higher numbers were erroneously reported in the last sitrep for nutrition component where children in treatment were reflected for refugees instead of children admitted. The above table has rectified the error of the admissions to end May 2017.

UNICEF Kenya – 5 July 2017

Highlights

- The drought impact is particularly severe in Isiolo and parts of Wajir (West and South), Turkana and Tana River counties.
- Nutrition surveys undertaken in June 2017 in Turkana indicate a deepening nutritional crisis compared to 5 months ago, with 3 of the 4 sub counties reporting acute malnutrition of greater than 30% and severe acute malnutrition ranging from 6-12%.
- Insecurity in parts of the country as well as the National health workers strike continues to seriously hinder health and nutrition interventions, especially in the most deprived areas of the country.
- With the increased numbers of vulnerable drought-affected children, UNICEF and partners have intensified child protection interventions reaching 3,080 children with case management services over the past two weeks.
- Four water points were repaired in Kibish/Turkana County over the past two weeks reaching 5,640 people including 300 school children (160 boys and 140 girls).
- UNICEF Kenya’s humanitarian requirements for 2017 remain underfunded with a funding gap of 44 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.

UNICEF HAC Appeal 2017

US$ 41,000,000

- Funds Received: US$ 11.0 M
- 2017 Funding Requirements US$ 41.0 M
- Carry-forward: US$ 7.2 M
- Gap: US$ 16.9 M

5 July 2017

3.5 million
People food insecure
(2017 Long Rains Mid-Season Assessment, July 2017)

2.7 million
People in urgent need of safe drinking water

1.1 million
Children food insecure
(Long Rains Assessment, January 2017)

109,464
Children under 5 in need of SAM treatment
(Nutrition SMART Surveys, Feb 2017)

174,954
Children not attending pre-primary and primary schools as a direct result of the drought. (2017 Kenya Flash Appeal, March 2017)
Situation Overview & Humanitarian Needs

The general drought situation across the Arid and Semi-Arid Lands (ASAL) of Kenya still remains dire\(^1\), while vegetation conditions and water availability have improved in a few regions that received some rainfall at end of May and in June. Drought impacts are particularly severe in Isiolo and parts of Wajir (West and South), Turkana and Tana River counties. The national food security situation is also expected to deteriorate further due to low annual maize yields following a combination of fall army worm invasion and drought conditions.

Nutrition surveys supported by UNICEF and conducted in June in Turkana indicate a deepening crisis compared to 5 months ago, with 3 of the 4 sub-counties reporting acute malnutrition of greater than 30%. Of great concern are elevated rates of severe acute malnutrition, which range from 6 – 12%. However, child mortality rates are low, illustrating the impact of ongoing nutrition response to curb rates of mortality. The prevalence of acute malnutrition in Turkana compared to the same time period in 2011 is illustrated in the below graphic. The overall prevalence of acute malnutrition for the county of Turkana has increase significantly from 23.8% in June 2016 to 31% in June 2017. In terms of the 4 sub counties, Turkana South has the highest rate of acute malnutrition at 37%, Turkana North has a rate of 34.1%, Turkana Central’s rate is 31.4% and Turkana West has an acute malnutrition rate of 23.4%. Equally worrying are the very high levels of severe acute malnutrition, ranging from 6% prevalence in Turkana West to 12% in Turkana South.

The nutrition situation in drought-affected counties continues to deteriorate. In the 9 arid counties (Turkana, Marsabit, Mandera, Wajir, Isiolo, Baringo Samburu, Garissa and West Pokot), a deterioration in the nutrition situation is expected in line with the deteriorating food security indicators. The key driver of the deterioration is a severe food access gap at the household level due to the ongoing drought and its consequences. Nutrition surveys are also ongoing in eight other vulnerable arid counties supported by UNICEF. All the surveys and final analysis on numbers of population in need in terms of nutrition and food assistance will be released by the government on 28 July – therefore all response plans will be updated at that stage.

Conflict and insecurity in parts of the country continues to hinder provision of basic services, especially health and nutrition interventions. For example, in Fafi Sub-county of Garissa County, four health facilities along the Kenya-Somalia border remain closed due to insecurity. In Baringo’s East Pokot sub-county, 14 health facilities are closed due to continued inter-communal conflict. The situation in East Pokot has worsened since conflict began in February 2017 and has resulted in many implementing partners shutting down humanitarian operations to protect the safety of their staff. At the end of June 2017, UNICEF and partners suspended planned SMART nutrition surveys in East Pokot due to insecurity and a lack of access to the affected populations. In Isiolo and Wajir counties, 2 and 6 primary schools respectively are closed due to conflict over water and grazing fields in drought affected areas. Insecurity in various parts of the country has also affected the provision of health services.

On ongoing countrywide health workers strike is of great concern and is already negatively affecting health and nutrition service provision in the counties. In the North and North eastern regions, the strike has paralyzed fixed, outreach and mobile public health care services in all health care facilities and has impacted heavily on healthcare services including routine vaccination and skilled deliveries, especially for the most vulnerable communities.

Multiple disease outbreaks continue in the country. Cholera outbreak still persists with five counties (Garissa, Nairobi, Muranga, Turkana and Wajir) currently reporting active outbreaks with 1,067 cases and 12 deaths (CFR 1 per cent) reported since January 2017. A dengue fever outbreak is also active in Mombasa and Wajir Counties with 1,199 cases

---

\(^{1}\) Vegetation Condition Index as at 26\(^{th}\) June 2017 – by National drought Management Authority (NDMA).
and 1 death reported between January and end of June. A measles outbreak has been reported in Garissa County’s Dadaab Refugee Complex and Mandera County with 44 reported cases and no deaths to date. A surge in Kala-azar (visceral leishmaniosis) cases amounting to 277 cases and 7 deaths (CFR 2.5) also remains a major concern.

With General Elections in Kenya only a month away, concerns have been raised as the EU Observation Mission to the Kenyan elections warned of possible violence during the 8 August elections.2

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 Kismayu, 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 provides 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 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 as well as in 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
Between January 1st and May 30th 2017, 35,273 SAM and 69,391 MAM children under 5 years of age received treatment accounting for 42.1% and 40.4% of the sectors’ 2017 target respectively.3 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.

In response to the deteriorating nutrition situation in Turkana, a meeting was called by the National Drought Management Authority with key partners on 5 July focusing on plans for immediate scale up in food response as well as plans to address the funding gaps for Blanket Supplementary Feeding Programme (BSFP) and Corn Soya Blend (CSB) for malnourished women and children. Currently there are 242 integrated health and nutrition outreach programmes in operation across Turkana supported by all partners (MoH, UNICEF, Save, KRCS, IRC, World Vision and Aphia Timiza). While the main focus of these outreach programmes is to screen and admit acutely malnourished children for treatment, the outreach programmes also include Vitamin A supplementation, routine vaccination and treatment for common childhood illness such as malaria, respiratory infections and diarrhoea.

---


3 Higher numbers were erroneously reported in the previous sitrep for nutrition component where children in treatment were reflected for refugees instead of children admitted.
UNICEF Kenya – 5 July 2017

The second round of the BSFP targeting children between 6 to 59 months and pregnant and lactating women has started in Turkana North, Kibish sub-counties and in North Horr of Marsabit County (the most affected sub counties). In the first cycle of BSFP, 34,361 children and 6,292 pregnant and lactating women were reached in both counties. However, WFP has a funding gap of $11 million for the BSFP programme in Turkana, and a total gap of $26 million for all 5 target counties in 2017. Lack of BSFP will result on a missed opportunity to protect women and children from acute malnutrition as there is significant gap in household food access resulting in continued increase on the number of acute malnourished among communities.

The supply pipeline for RUTF and RUSF remains secure until the end of the year assuming all funding commitments materialize based on current admission rates. A total of 40,408 cartons of RUTF which can treat 40,408 children were distributed between January and June 2017. 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. The ongoing countrywide nurse’s strike is also of great concern and is already negatively affecting nutrition service provision in the counties.

HEALTH

As part of the drought response, UNICEF has continued to support the government to conduct integrated health and nutrition outreach services in Mandera, Samburu, Turkana, Marsabit, Isiolo and Tana River. These outreach services are complementary to regular government services and are targeting at-risk populations that do not live close to a health facility. In Turkana for example, in the last two weeks, 4,340 children under five have been reached with health and nutrition interventions with 970 children receiving treatment for Acute Respiratory Illnesses (ARI) and 397 children under one receiving measles vaccination.

UNICEF has been supporting the Government to respond to disease outbreaks by distributing crucial commodities and supplies such as rapid diagnostic tests for cholera and Kala-azar. Advocacy on the use of the oral cholera vaccine in cholera hotspots is ongoing. A task force comprised of major stakeholders such as UNICEF, World Health Organization and the Centers of Disease Control has advised the Ministry of Health to develop a brief for the Director of Medical Services on the ongoing cholera outbreak, potentials for the continued spread and expanded populations at risk. The ministry will request WHO and UNICEF to provide technical advice to evaluate the epidemiology, develop vaccination plans, and applications for vaccine support to International Coordinating Group (ICG) or Global Task Force for Cholera Control (GTFCC). UNICEF has confirmed with GAVI the availability of a stockpile of the vaccine which will be shipped to the country once requested.

WASH

Over the past 2 weeks, four water points were repaired in Kibish Sub County in Turkana County with UNICEF support to the Diocese of Lodwar. A total of 5,640 people including 300 (160 boys and 140 girls) school children from one primary school and a health facility continue to benefit from this intervention. Overall 14 water points out of 15 planned for rehabilitation in Kibish have been completed. As a result, water trucking operations by the County Government to support affected populations in Kibish has been stopped.

In Mandera County, 6,276 drought affected people including 1,950 school children were reached with WASH supplies to improve access to safe water by households. More than 1,500 Jerry cans, 1,500 buckets and 2,000 bars of soap as well as 100 boxes of water flocculants were distributed. The same population was targeted for hygiene promotion to improve safe personal hygiene knowledge and practice.

UNICEF responded to cholera outbreaks in Garissa and Tana River Counties where 25 and 14 cases were reported respectively including 3 deaths in Garissa County. UNICEF provided communication materials for hygiene and cholera prevention and control as well as 100 boxes of water treatment chemicals to affected households reaching 5,472 people including 409 school children in Tana River County. Overall 11,748 people received critical WASH related information for the prevention of cholera and to improve safe hygiene practices in 3 counties (Mandera, Garissa, and Tana River).

Over the past two weeks, UNICEF delivered 103,000 bars of soap, 47,000 Jerry cans, 30,000 buckets and 274,000 aqua tabs to five INGO partners (FCA, Plan International, GAA, Diocese of Lodwar and OXFAM) for distribution to drought affected populations in respective areas of operation as part of their emergency partnership with UNICEF. UNICEF also provided technical support to Turkana County in drafting and finalizing a WASH contingency plan for the August 2017 election preparedness.

CHILD PROTECTION

UNICEF, the Department of Children services and other partners continue to respond to increased numbers of protection issues among drought affected children, which have been met through family tracing and reunification services, case management for children affected by (sexual) abuse and who are engaged in child labour or on the streets, and through community awareness raising on child protection concerns. Over the past two weeks, UNICEF, in partnership with local implementing partners and the Department of Children Services (DCS) provided case management support services to
In West Pokot County, the Umoja Development Organization (UDO) identified 198 children (63 girls and 135 boys) as separated from their families and 9 girls were reunited with their families. 48 of the separated children (32 boys and 16 girls) were placed in boarding schools for their safety, pending family tracing and reunification. 64 children (60 girls, 4 boys) affected by child abuse and at risk of child marriage were provided with psychosocial support including individual and group counselling, family mediation, and referral services to medical and legal aid providers as appropriate. In four schools in West Pokot, Umoja Development Organization (UDO) staff and teachers facilitated interactive group discussions with 74 children (45 girls and 29 boys) on how children’s protection from violence, abuse and exploitation is affected by the drought and gathered children’s recommendations on what should be done by child protection actors. The children shared their concerns on how the drought situation has affected them, voicing increased cases of neglect, psychosocial distress and risks of exploitation and abuse including defilement, teenage pregnancies and child marriage. As a way of mitigating the effects of drought, the children proposed having a focal person within the community or in schools whom they can entrust with their protection concerns for further reporting to the relevant authorities. Further, to promote the retention of children in schools during the drought season, they urged for support from relevant stakeholders to ensure provision of essential services such as health, WASH, education facilities, provision of food, psychosocial support and a safe environment for them both in the schools and at home. In Kacheliba, West Pokot County, UDO and UNICEF child protection staff facilitated two community awareness raising sessions for 140 adults (90 Female, 50 Male) and 77 children (37 boys and 40 girls), on Child Protection in Emergencies, Community Based Disaster Risk Reduction, Resilience Building and how to keep children safe from drought/emergency related protection risks.

In Turkana County, 505 children (260 boys, 245 girls) were identified as living on the streets as a result of drought related consequences, of which 252 children (122 boys, 130 girls) were reunified with their families. In Kakuma refugee camp, UNICEF supported partner Lutheran World Federation (LWF) identified and provided integrated protective services to 14 unaccompanied children (7 boys and 7 girls) and 60 separated children (42 boys, 18 girls).

In Garissa County, 554 children (345 boys, 209 girls) were reached through the Department of Child Services (DCS)/UNICEF child protection drought response project, while 42 children (17 girls, 25 boys) who were engaged in child labour within the livestock market were identified for rescue and support services by DCS and community child protection committee members. In Laghdera and Balambala Sub Counties, DCS staff provided case management and psychosocial services to 136 separated children (83 boys, 53 girls), who were living with relatives and 59 children (57 boys, 2 girls) in boarding schools, whose parents had migrated away from them. DCS also facilitated a community awareness raising fora’s on child protection in emergencies, focusing on the adverse effects of the drought on children. These fora reached 331 adults (162 female,169 male) and 317 children (180 boys, 137 girls). Community members from Garissa Township, Laghdera, Fafi and Ijara Sub Counties discussed the protection risks that children face during drought, including family separation; psychosocial distress; higher sexual and gender-based violence; heightened risk of physical violence and abuse; higher risk of neglect; risk of trafficking and being recruited into armed groups. The community members pledged to be Ambassadors for Children and look out for children in need of care and protection, liaising with the local Chiefs and Children’s Department, once they identify the children at risk.

In Marsabit County, 125 children (65 boys, 60 girls) affected by the drought were supported by DCS through case management and psychosocial care. Out of these children, 26 (11 boys,15 girls) were at risk of abuse and exploitation, 66 children (33 boys, 33 girls) had dropped out of school, 2 were child (girls) survivors of sexual violence and 16 children (13 boys, 3 girls) were identified as begging at night in Laisamis town. In addition, 15 child herders (8 boys, 7 girls) whose animals had died as a result of the drought were enrolled in a primary school in Loiyangalani town. In Marsabit County, DCS, community members and the area Chief of Serima, Loiyangalani, are following up on the rescue and support services for ten girls affected by sexual exploitation and abuse, who were reported on in the previous report.

In Wajir County, the Department of Children Services (DCS) provided case management support services to 107 children (72 boys, 35 girls). 63 of these children (41 boys, 22 girls) were rescued from child labour; 8 separated children (5 boys and 3 girls) were reunited with their caregivers; 26 out of school children (22 boys, 4 girls) were reintegrated back to their schools; 7 child survivors of violence (4 boys and 3 girls) were provided with counselling and support services together with their caregivers and 3 girls were rescued from child marriage. In addition, 50 children (37 girls, 13 boys) who had been identified by DCS previously and who were affected by child labour and neglect, as well as 1 unaccompanied boy, were all reintegrated with their families. DGS also facilitated awareness raising sessions on child protection in emergencies for 181 community members (59 female, 122 male) from Wajir East, South and West. The community members pledged to identify and collect full details of children who are in need of care and protection in their respective areas and work with DCS in supporting the children.

To prevent family separation and raise awareness of drought/emergency specific child protection concerns, child protection in emergencies messages were disseminated through local radio stations in Marsabit and Wajir Counties by the Department of Children Services, supported by UNICEF. The messages are likely to reach 13,000 listeners.
UNICEF Kenya – 5 July 2017

EDUCATION

Through Echo Mobile, the Ministry of Education (MoE) and UNICEF undertook an SMS survey to measure the impact of various crises on education. While the number of schools responding to the SMS survey was low, in Primary education, overall attendance was 89% in May from the sample. This is higher than the 75% attendance computed in February and March 2017. Drought and lack of water is noted to be the largest issue affecting school attendance in June 2017. Among the pupils who are absent from school, 50.7% and 51.5% are due to drought and lack of water respectively in ECD and Primary schools.

In collaboration with the WASH sector, supplies have been dispatched to 40 schools in West Pokot, Baringo, Turkana, Marsabit, Isiolo, Wajir and Mandera counties. These supplies include water tanks, jerry cans, water filters, soap and sanitary pads. The number of learners benefiting from this distribution will be captured in consequent reports.

During the reporting period, in Dadaab in response to the cholera outbreak, 8,077 learners (2,172 girls) in 8 secondary schools have benefited from the provisions of IEC materials. The content of these materials aims to increase knowledge of the teachers and students on causes, symptoms and prevention of cholera and for basic hygiene in school.

A total of 14 schools in Dadaab and Fafi sub counties have lost teaching personnel over the past few months as a result of the insecurity. Two of these 14 schools, Fafi & Madha Marub schools, are closed affecting 476 (285 boys, 191 girls) learners, while 11 of these schools are supported by UNICEF through the Out of School programme. In response to the situation, UNICEF is working with the MoE at the county and sub-county level, and the Norwegian Refugee Council, to develop strategies to support the continuation of learning through strengthening the monitoring and supervision of teachers.

UNICEF continues to provide technical support to the Education in Emergencies Working Group (EiE WG). During the reporting period, the EiE WG has participated in the Long Rains pre-assessment and national election preparedness, including preposition and preparation of emergency partnership agreements. Recruitment of a full-time Coordinator is ongoing.

At the county level, UNICEF zonal offices in Kisumu, Turkana and Garissa have provided leadership and technical support to county coordination mechanisms, including convening sector meetings, gathering data and information to determine gaps and number of children affected.

Funding for the Humanitarian Response

UNICEF requires US $41 million for its Humanitarian Action for Children (HAC) Appeal in Kenya in 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 Government of Australia, 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. During the reporting period, UNICEF has received $1.8 million from the Government of Australia.

The Kenya 2017 HAC appeal has a funding gap of 44 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 $450,000 from the UNICEF Emergency Programme Fund as well as $2,000,000 from UNICEF’s set-aside funds. In addition, UNICEF Kenya has allocated $517,531 from its regular programme resources for the emergency response this year.

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>HAC Requirements</th>
<th>Funds available*</th>
<th>Funding Gap</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>($)</td>
<td>($)</td>
<td>$</td>
</tr>
<tr>
<td>WASH</td>
<td>5,100,000</td>
<td>2,970,673</td>
<td>2,129,327</td>
</tr>
<tr>
<td>Education</td>
<td>8,500,000</td>
<td>2,286,573</td>
<td>6,213,427</td>
</tr>
<tr>
<td>Health</td>
<td>5,000,000</td>
<td>2,137,978</td>
<td>2,862,022</td>
</tr>
<tr>
<td>Nutrition</td>
<td>13,500,000</td>
<td>12,131,881</td>
<td>1,368,119</td>
</tr>
<tr>
<td>Child Protection</td>
<td>2,000,000</td>
<td>3,237,585</td>
<td>0</td>
</tr>
<tr>
<td>HIV/AIDS</td>
<td>1,500,000</td>
<td>15,283</td>
<td>1,484,717</td>
</tr>
<tr>
<td>Social Protection</td>
<td>4,300,000</td>
<td>150,000</td>
<td>4,150,000</td>
</tr>
<tr>
<td>Cluster/sector</td>
<td>1,100,000</td>
<td>1,113,466</td>
<td>0</td>
</tr>
<tr>
<td>coordination</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>41,000,000</td>
<td>24,043,439</td>
<td>18,207,612**</td>
</tr>
</tbody>
</table>

*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).
UNICEF Kenya – 5 July 2017

**The funds available includes funding received beyond the HAC requirements in Child Protection and Coordination, which is why the gap and funds available do not add up to the full HAC requirements for 2017.**

Next SitRep: 20 July 2017

UNICEF Kenya Crisis Facebook: [www.facebook.com/unicef](http://www.facebook.com/unicef)

Who to contact for further information:

- **Werner Schultink**
  Representative
  UNICEF Kenya Country Office
  Tel: +254 711 946555
  Fax: +254 762 2045
  Email: wschultink@unicef.org

- **Patrizia Di Giovanni**
  Deputy Representative
  UNICEF Kenya Country Office
  Tel: +254 705 263285
  Fax: +254 762 2045
  Email: pdigiovanni@unicef.org

- **Patrick Lavand’homme**
  Chief, Field Operations & Emergency
  UNICEF Kenya Country Office
  Tel: ++254 710 602226
  Fax: +254 762 2045
  Email: plavandhomme@unicef.org
### Annex A

**SUMMARY OF PROGRAMME RESULTS 2017**

<table>
<thead>
<tr>
<th>Sector Response</th>
<th>Overall needs</th>
<th>2017 Target</th>
<th>Total Results</th>
<th>Change since last report ▲▼</th>
<th>UNICEF and Implementing Partners</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NUTRITION</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children under 5 with SAM admitted into the integrated management of acute malnutrition programme</td>
<td>109,464</td>
<td>83,848</td>
<td>35,273****</td>
<td>—</td>
<td>83,848</td>
</tr>
<tr>
<td>Children under 5 with MAM admitted into the integrated management of acute malnutrition programme</td>
<td>330,333</td>
<td>171,917</td>
<td>69,391****</td>
<td>—</td>
<td>171,917</td>
</tr>
<tr>
<td><strong>HEALTH</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children under 5 accessing an integrated package of health interventions, including for the management of diarrhoeal diseases</td>
<td></td>
<td></td>
<td></td>
<td>780,000</td>
<td>212,249</td>
</tr>
<tr>
<td>Children under five vaccinated against measles*</td>
<td></td>
<td></td>
<td></td>
<td>46,013*</td>
<td>64,531</td>
</tr>
<tr>
<td><strong>WATER, SANITATION &amp; HYGIENE</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>People gain temporary access to 7.5-15 l/p/d of safe water for drinking, cooking and personal hygiene</td>
<td></td>
<td>886,765</td>
<td>▲ 6,276</td>
<td>120,000</td>
<td>74,782</td>
</tr>
<tr>
<td>People gain permanent access to 7.5-15 l/p/d of safe water for drinking, cooking and personal hygiene</td>
<td>2,663,423</td>
<td>2,663,423**</td>
<td>▲ 5,640</td>
<td>400,000</td>
<td>96,838</td>
</tr>
<tr>
<td>People that receive critical WASH-related information to prevent child illness, especially diarrhoea</td>
<td></td>
<td>48,946</td>
<td>▲ 11,748</td>
<td>520,000</td>
<td>48,946</td>
</tr>
<tr>
<td>Children access safe water, sanitation and hygiene facilities in their learning environment</td>
<td></td>
<td>7,766</td>
<td>No change</td>
<td>110,000</td>
<td>7,766</td>
</tr>
<tr>
<td><strong>CHILD PROTECTION</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Most vulnerable children are provided with access to protection services, including case management, psychosocial care</td>
<td>206,400</td>
<td>139,000***</td>
<td>▲ 3,080</td>
<td>30,000</td>
<td>11,109</td>
</tr>
<tr>
<td><strong>EDUCATION</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children aged 3 to 18 years affected by crises accessing formal and non-formal education opportunities</td>
<td>860,000</td>
<td>567,600</td>
<td>98,913</td>
<td>No change</td>
<td>322,000</td>
</tr>
<tr>
<td><strong>HIV and AIDS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adolescents have access to HIV, sexual and reproductive health and life-skills education and access to services that include testing and treatment</td>
<td></td>
<td></td>
<td></td>
<td>90,000</td>
<td>38,071</td>
</tr>
<tr>
<td><strong>SOCIAL PROTECTION</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of vulnerable households in six ASAL counties receive top-up cash transfers to help meet basic needs</td>
<td></td>
<td></td>
<td></td>
<td>70,000</td>
<td>-</td>
</tr>
</tbody>
</table>

* 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.
**** Higher numbers were erroneously reported in the last sitrep for nutrition component where children in treatment were reflected for refugees instead of children admitted. The above table has rectified the error of the admissions to end May 2017