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Kenya

Disease outbreaks continue to affect vulnerable populations in Kenya, with type 2 polio virus reported in Nairobi; cholera reported in 20 counties (5,796 cases and 78 deaths);¹ and measles outbreaks reported in six counties (744 cases with 66 confirmed and one death).² The country is also vulnerable to the effects of the El Niño phenomenon, which may lead to climate-related emergencies in 2019.³ New refugee arrivals continued in 2018, though in smaller numbers. Kenya is now hosting more than 468,000 refugees and asylum seekers, 56 per cent of whom are children.⁴ Intercommunal conflict at the border between Ethiopia and Kenya led to the cross-border displacement of children and families and affected the primary health facility in Moyale, Kenya.⁵ Between March and September 2018, over 800,000 people were affected by flooding, including some 311,000 people who were displaced by floods.⁶ While the effects of drought lessened in 2018, the global acute malnutrition prevalence rate remains critical, at between 15 and 30 per cent in Mandera, Turkana, Samburu and parts of Baringo and Marsabit. By August 2018, the total global acute malnutrition caseload for children under 5 years was nearly 511,000.⁷

Humanitarian strategy

UNICEF's key humanitarian interventions in Kenya will include enhancing health outreach services in hard-to-reach areas, supporting vaccination campaigns, repairing strategic water points and conducting behaviour change communication as part of disease outbreak response. UNICEF will support the Ministry of Health and partners to respond to disease outbreaks and will provide technical support to the Cholera Task Force. Sector-level and multi-sector coordination will be strengthened, as will support for government-led efforts to deliver life-saving services. UNICEF will increase its engagement with the devolved government system to strengthen county capacities for emergency preparedness and response. The four zonal offices in Lodwar, Kisumu, Garissa and Dadaab will continue to provide oversight and technical support to the humanitarian response. In line with the Comprehensive Refugee Response Framework, UNICEF will collaborate with the United Nations High Commissioner for Refugees (UNHCR) to support the Government to strengthen coordination in the refugee response and develop policies that facilitate the inclusion of refugee children in national systems. Cross-border coordination will also be strengthened to enable the voluntary repatriation of refugees from the Dadaab refugee camp to Somalia and to monitor refugee influxes into Kakuma refugee camps and Moyale to facilitate timely assistance, particularly for women and children.

Results from 2018

As of 31 October 2018, UNICEF had US\$14.3 million available against the US\$34.2 million appeal (41.9 per cent funded).⁸ In 2018, UNICEF and partners reached nearly 189,000 children under 5 years with nutrition treatment, over 94,000 people with safe water and nearly 376,000 people with hygiene education. UNICEF also strengthened disease prevention and response, providing an integrated package of health services to nearly 307,000 children under 5 years. Education-in-emergencies interventions reached over 156,000 children and protection and risk mitigation services reached nearly 23,000 refugee children and children affected by natural disasters and resource-based community conflicts. Communication for development strategies were used to mobilize, engage and provide information for community response and resilience building. UNICEF continued to strengthen engagement with the devolved system of governance in Kenya, including by strengthening county capacities for emergency preparedness and response and supporting direct implementation. As part of the Comprehensive Refugee Response Framework, UNICEF constructed 32 classrooms with water, sanitation and hygiene (WASH) facilities in Kalobeyei, benefiting both refugee and host community children. UNICEF also strengthened sector coordination through technical guidance, information management and joint resource mobilization, thereby enhancing preparedness and response planning, improving monitoring, facilitating best practice sharing and strengthening collaboration with implementing partners.

Humanitarian Action for Children

unicef 

Total people in need:
3,368,261⁹

Total children (<18) in need:
1,625,226¹⁰

Total people to be reached:
463,075¹¹

Total children to be reached:
330,575¹²

2019 programme targets:

Nutrition

- 13,404 children aged 6 to 59 months with severe acute malnutrition (SAM) admitted for treatment¹³

Health

- 325,000 children affected by acute watery diarrhoea, malaria or measles accessing life-saving preventative and curative interventions¹⁴

WASH

- 250,000 people accessing the agreed quantity of water for drinking, cooking and personal hygiene¹⁵

Child protection

- 5,575 children (52 per cent girls) provided with psychosocial support, including access to child-friendly spaces with inter-sectoral programming interventions

Education

- 59,000 school-aged children, including adolescents (50 per cent girls), accessing formal or non-formal early learning, pre-primary, primary or secondary education¹⁶

	Sector 2018 targets	Sector total results	UNICEF 2018 targets	UNICEF total results
NUTRITION				
Children under 5 years treated for SAM	78,925	61,686	78,925	61,686
Children under 5 years treated for moderate acute malnutrition	240,196	127,187	194,656	127,187
HEALTH				
Children under 5 years accessing an integrated package of health interventions including for diarrhoea, malaria and pneumonia diseases			814,500	306,514 ⁱ
Children under 5 years vaccinated against measles ⁱⁱ			641,817	161,175 ⁱⁱⁱ
WATER, SANITATION AND HYGIENE				
Persons affected by crises are reached with (permanent) safe water interventions	250,000	279,028	250,000	207,712
People reached with hygiene education essential for disease prevention and response	400,000	344,661	400,000	363,489
Children accessing appropriate hygiene education in schools, temporary learning spaces and other child-friendly spaces	100,000	31,293	100,000	31,000
CHILD PROTECTION				
Most-affected boys and girls have access to protective case management services	95,000	22,535	20,000	22,535
EDUCATION				
School-aged children (including adolescents) affected by crises accessing quality education	635,000	133,886	205,000	156,406
HIV AND AIDS^{iv}				
Children, adolescents and pregnant women have access to HIV testing services			120,000	23,376
Adolescents received age-appropriate sexual and reproductive health/HIV messaging incorporated into life-skills education in humanitarian settings			15,000	0
CASH-BASED TRANSFERS				
Vulnerable households reached with cash transfer top-ups during crises			30,000	5,800 ^v

Results are through 31 October 2018.

ⁱ Due to funding constraints (only 25 per cent of requested funds were available for health programming), UNICEF prioritized eight counties that had the greatest burden of flood and related disease outbreaks for life-saving interventions.

ⁱⁱ This target is for the measles immunization campaign for the most-affected counties of Mandera, Garissa and Nairobi between October and November 2018.

ⁱⁱⁱ Due to limited funding for the procurement of vaccines, only one county implemented the campaign. Additional resources have been mobilized and one additional sub-county will conduct the campaign before the end of the year.

^{iv} Due to funding constraints (no funds were available for the HIV and AIDS response), UNICEF did not support direct service delivery but provided technical assistance to the county and sub-county health management teams.

^v Funding constraints resulted in low achievement.

Funding requirements

UNICEF is requesting US\$5.6 million to meet the humanitarian needs of children affected by disease outbreaks and provide basic services to refugees and host communities. Without adequate funding, UNICEF will be unable to support the survival and protection needs of vulnerable children. Basic supplies for primary education are also urgently needed to uphold refugee children's right to education. In 2019, the emergency nutrition response will be included in programme planning supporting system strengthening to improve the linkages between humanitarian action and development programming.

Sector	2019 requirements (US\$)
Nutrition	500,000
Health	2,250,000
Water, sanitation and hygiene	500,000
Child protection	500,000
Education	1,708,000
Cluster/sector coordination	100,000
Total	5,558,000

¹ This represents a case fatality rate of 1.3 per cent. Government of Kenya Ministry of Health, 'Disease Outbreak Situation Report', October 2018.

² This represents a case fatality rate of 0.1 per cent. Government of Kenya Ministry of Health, 'Disease Outbreak Situation Report', 24 December 2018.

³ Food and Agriculture Organization, 'El Nino Advisory Global Information and Early Warning System (GIEWS) and Early Warning Early Action (EWEA)'; FAO, 31 October 2018.

⁴ Including nearly 209,000 in Dadaab refugee camps, more than 186,000 in Kakuma refugee camps and over 73,000 in Nairobi. Statistics based on UNHCR's Refugee Registration System, ProGres, as of 31 October 2018.

⁵ 'Ethiopia's Moyale hit by heavy inter-ethnic fighting, casualties reported', africanews, May 2018, <www.africanews.com/2018/05/06/ethiopia-s-moyale-hit-by-heavy-inter-ethnic-fighting-casualties-reported/>, accessed 29 December 2018.

⁶ United States Agency for International Development, 'Kenya - Disaster Assistance: Fact sheet #1, fiscal year (FY) 2018'; USAID, 30 September 2018.

⁷ Government of Kenya, Kenya Food Security Steering Group, 'The 2018 Long Rains Season Assessment Report', Government of Kenya, August 2018.

⁸ Available funds include US\$8.4 million received against the current appeal and US\$5.6 million carried forward from the previous year.

⁹ This figure was calculated based on: an estimated 1.4 million people to be affected by climate shocks (National Disaster Operations Centre); 468,261 refugees who will require assistance (UNHCR); and an estimated 1.5 million people to be affected by health and epidemic-related emergencies (Government of Kenya Ministry of Health).

¹⁰ This figure was calculated based on children accounting for 48 per cent of the total affected population (Kenyan census). Kenya National Bureau of Statistics, 'Population and Housing Census August 2009', 2010.

¹¹ Overall UNICEF coverage includes the highest programme targets for children under the health response, the percentage of adults targeted by WASH services (53 per cent of affected people) and children receiving child protection services.

¹² This was calculated based on the highest coverage targets under the health and child protection responses. Other sectors are not included to avoid double counting.

¹³ The SAM treatment target is for the refugee response.

¹⁴ Forty-five per cent of children under 5 years, who are 16 per cent of the total population in the 12 most-affected counties, are expected to be reached during integrated outreach services.

¹⁵ The 2019 target is the same as the previous year's target based on trend analysis and the destruction of water points during the flood season. As such, it is estimated that the affected population will remain the same or will increase during the projected crisis in 2019.

¹⁶ The Government is increasingly taking up emergency preparedness and response responsibilities at the national and county levels, which has resulted in a reduction in the 2019 humanitarian caseload by 47 per cent compared with 2018. UNICEF and partners will focus more on strengthening systems and the policy environment for education in emergencies.

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