

Humanitarian Situation Report: Kenya

Date: 05 September 2013

Period: 11 July– 04 September, 2013

HIGHLIGHTS

- According to Government of Kenya, since May 2013 to-date, 14 cases of wild polio virus have been confirmed in Dadaab Refugee camp and host community, reflecting a sustained transmission of the wild virus. UNICEF Kenya has operationalized Polio Situation Room as *one stop information shop* as well as to monitor the developing situation on the ground.
- The security situation in Mandera County, north-eastern Kenya bordering Somalia and Ethiopia, continued to deteriorate as inter-communal conflicts have persisted since March 2013. According to OCHA, at least 90 people died and over 52,000 others were displaced following inter-communal conflicts between the Garre and Degodia communities in Mandera and Wajir Counties, since March 2012.
- Despite the early cessation of the March-to-May rains in Kenya, which were cumulatively average to above average, food security remains stable but stressed (IPC Phase 2) across the country. However, most poor households in both pastoral and south-eastern and coastal marginal mixed farming livelihood zones are likely to meet their food requirements through September.
- The Climate Outlook for the 2013 “Short Rains” (October-November-December) season indicates that much of the country is likely to experience depressed rainfall starting from early September. As the distribution throughout the county is expected to be generally poor over most parts of the country, the western parts of the country are, however, likely to experience enhanced rainfall.

Situation Overview & Humanitarian Needs

| Estimated Affected Population | | | |
|--|-----------|---------|---------|
| <i>(Estimates calculated based on initial figures from the from the Short Rains Assessment, OCHA and UNICEF)</i> | | | |
| | Total | Male | Female |
| Total Affected Population | 1,100,000 | 546,800 | 553,200 |
| Children Affected (Under 18) | 591,900 | 294,200 | 297,700 |
| Children Under Five | 170,200 | 84,500 | 85,500 |
| Children Acutely Malnourished (GAM) | 300,000 | 165,000 | 135,000 |

- Kenya has declared the polio outbreak a national emergency, with 14 confirmed cases of Wild Polio Virus (WPV) type-1 reported as of first week of September in Dadaab refugee camp and host community. UNICEF has operationalized the Polio Situation Room as *one stop information shop* as well as to monitor the developing situation on the ground. Round four of Kenya’s immunization response to the current outbreak was conducted 17-21 August. According to Government of Kenya and WHO, Independent Monitoring (IM) of vaccination coverage using finger marking for children <5 years in households was 95% and 93% in public places. IM coverage using finger marking for adults was 89% in households and 87% in public places. Porous international borders with Somalia and Ethiopia, where over 100 confirmed WPV cases have been recorded, remains a major challenge for the polio surveillance team. OCHA has releases CERF funding of USD 299,635 in support of ongoing multi agency Polio rapid response. (Click [here](#) for Government/WHO/CDC/UNICEF Polio Outbreak Situation Report)
- The security situation in Mandera County, north-eastern Kenya bordering Somalia and Ethiopia, continued to deteriorate as inter-communal conflicts have persisted since March 2013. According to OCHA, at least 90 people died and over 52,000 others were displaced following inter-communal conflicts between the Garre and Degodia communities in Mandera and Wajir Counties, since March 2012. KIRA assessments conducted in Mandera and Wajir in July identified gaps in food, shelter/NFIs, health and nutrition, protection/security and WASH. The assessment further observed that besides lack of funding, constraints in response were largely due to lack of access related to insecurity. A travel ban is currently in place for all UN staff to areas north of Wajir Town and Mandera. Due to the lack of humanitarian access in the affected area, UNICEF provided humanitarian support through partners on the ground.
- According to FEWSNet Kenya Food Security Outlook update, despite the early cessation of the March-to-May rains in Kenya, which were cumulatively average to above average, food security remains stable but Stressed (IPC Phase 2) across the country. Most poor households in both pastoral and south-eastern and coastal marginal mixed farming livelihood zones are likely to meet their food requirements through September.

- According to Kenya Meteorological Service, the Climate Outlook for the 2013 “Short Rains” (October-November-December) season indicates that much of the country is likely to experience depressed rainfall starting from early September. As the distribution throughout the county is expected to be generally poor over most parts of the country, the western parts of the country are, however, likely to experience enhanced rainfall.
- Transition to devolved governance structures is ongoing, which provides opportunities and challenges for humanitarian response and resilience building strategies. UNICEF has been requested to support the County Integrated Development Plan (CIDP). In Kenya where over 55% of the total population in Kenya are under 18 years old, UNICEF provided technical support to the county government by ensuring child rights focused CIDP for the next five years. As of September, UNICEF supported 7 county government County Integrated Development Plans (CIDPs).
- UNHCR Chief António Guterres made an official mission to Kenya on 10 July to discuss further the scope and conditions for the Government proposal for the return of refugees to Somalia. The Government of Kenya renewed its intention to repatriate the Somali refugees on grounds that the situation in Somali has shown some relative stability conducive for returns in secure areas. UNHCR has proposed a phased approach in light of the fragile situation in large parts of Somalia, starting by assisting refugees who are voluntarily and spontaneously returning to Somalia. The UN continues to emphasize that return of refugees should be voluntary and conducted in a safe and dignified manner.

Inter-Agency collaboration, coordination, cluster leadership and key partnerships

- Inter-agency coordination continues to be carried out under the IASC cluster structure, with clear government leadership in each sector area and co-leadership by UN agencies. UNICEF co-leads in nutrition, education, WASH and Child Protection; and plays a strong role in Non-Food Items and health coordination.

Programme response -- UNICEF and partners

While 52% of UNICEF’s US\$34,343,885 million appeal¹ is unfunded as of the end of July; WASH, Education, Health and Child Protection sectors are less than 50% funded; which is constraining the achievement of results. UNICEF’s response focused on maintaining optimum levels of programme coverage while continuing to strengthen and develop systems. Despite reduced funding in the first half, UNICEF and partners met 41% of the annual targets for severe acute malnutrition. After the government declared polio virus outbreak in May², UNICEF supported Government’s polio vaccination campaign targeting 4.5 million including children in refugee camps in Dadaab and Kakuma. Enhanced inter-sectoral linkages facilitated reaching of hygiene promotion messages to a larger target group. Continuous support being provided to the Government co-lead National Child Protection and Education Sector in introducing the Minimum Standards in Humanitarian Action and developing Information Management platforms for the country.

Nutrition

| Estimated #/% coverage | UNICEF & operational partners | | | Sector / Cluster | | |
|---|---------------------------------|----------------------|--------------------------|----------------------------------|--------------------|--------------------------|
| | UNICEF Target (Jan to Dec 2013) | Cumulative results** | Change since last report | Cluster Target (Jan to Dec 2013) | Cumulative results | Change since last report |
| Children <5 with SAM admitted to therapeutic feeding programmes in ASAL and Urban areas ¹ | 43,400 | 24,835 (57.2%) | 13.4% | 43,400 | 24,835 (57.2%) | 13.4% |
| Children <5 with MAM admitted to supplementary feeding programmes in ASAL and Urban areas ¹ | 149,200 | 44,471 (29.8%) | 5.2% | 149,200 | 44,471 (29.8%) | 5.2% |
| Proportion of children 6-59 months receiving at least one dose of vitamin A supplement in ASAL | 1,315,664 | 334,565 (25.4%) | 3.3%% | 1,315,664 | 334,565 (25.4%) | 3.3%% |
| Children <5 with SAM and MAM admitted to therapeutic and supplementary feeding programmes in refugee camps (Dadaab). | 50,000 | 18,556 (37%) | 11% | Not applicable | Not applicable | Not applicable |
| UNICEF Operational Partners: UNHCR, Ministry of Public Health and Sanitation, MERLIN, World Vision, IRC, IMC, Mercy USA, Food for the Hungry, Save the Children, Islamic Relief, ACF, Concern World Wide | | | | | | |
| ¹ Data for Urban areas to be included starting from May 2013 | | | | | | |
| ** Data for the reporting period Jan- May 2013. | | | | | | |

Analysis of Results (January – August 2013)

¹ As per the mid-year revised requirements

² UNICEF KCO Humanitarian Situation Report # 5 covering 07 May – 06 June, 2013

Between March- June 2013, UNICEF supported the implementation of Nutrition Action Plan for Kenya at the 47 devolved counties. The government owned nutrition plan articulates the integration of emergency preparedness and response plans to prevent deterioration of nutritional status of children and to save more lives. Nutrition sector, co led by UNICEF with the Government of Kenya, triggered the comprehensive nutrition preparedness and response plan (April 2013) during emergency response in flood affected areas. UNICEF also intensified the support to the Nutrition Indicators Data Collection and Analysis in the Country Health Information Systems. Despite decrease of funding to the nutrition sector in the first half of 2013, UNICEF and partners maintained the scale of the programme; about 24,800 (57% of the annual target) were treated for severe acute malnutrition. Key milestones include the launch of iron and folic acid supplementation policy guideline in January 2013 and finalization of urban nutrition strategy. The Iron Folic Acid plan of action (2014-2017) is being used to guide implementation of activities.

Refugee Response (July – August 2013)

No changes since last reported.

Drought-Affected Areas (July – August 2013)

- UNICEF is supporting the dissemination of the national nutrition action and the development of county specific nutrition action plan in the 22 arid and semi-arid lands (ASAL) counties.
- Delivery of nutrition services affected by ongoing clashes in Mandera and Moyale. Kenya Red Cross society, with the support of UNICEF, carried out mass screening of 133 children living in the affected area in Mandera and referred 12 acutely malnourished children for treatment.
- A Nutrition monitoring and evaluation meeting held in Nakuru in August 2013 focussed on updating nutrition county profiles, tools for documentation, operation research, county level monitoring and evaluation support and participation in long and short rains assessment.

Nutrition Cluster/Sector

- Sector coordination is on-going with increased focused to counties level coordination.

Health

| Estimated #/% coverage | UNICEF & Operational Partners | | | Sector/Cluster | | |
|--|---------------------------------|--------------------------------|--------------------------|----------------------------------|--------------------|--------------------------|
| | UNICEF Target (Jan to Dec 2013) | Cumulative results** | Change since last report | Cluster Target (Jan to Dec 2013) | Cumulative results | Change since last report |
| Children have sustained access to essential health services for high impact preventative and curative interventions including immunization, PMTCT, and emergency obstetric care through integrated outreach services delivered using essential health supplies | 1,200,000 ¹ | 4,358,859 (360% ²) | 3,700,000 | Not applicable | Not applicable | Not applicable |
| Number of additional functioning community health units in northern Kenya in 2013 to strengthen community-based high impact preventive and curative interventions | 290 | 160 (55%) | 0 | Not applicable | Not applicable | Not applicable |

UNICEF Operational Partners: UNHCR, GoK, WHO

¹ Polio outbreak was declared in Kenya on 10th May. Four rounds of emergency polio vaccination campaigns have been planned targeting 127 districts on the Kakuma-Nairobi-Dadaab corridor covering approximately 4.5 million children. UNICEF to support the immunization of the children through procurement of vaccines and coordination of advocacy, communication and social mobilization.

² By August 2013, the target for health sector was already surpassed by 360% due to wider geographic targets integration for vaccination to interrupt transmission of the wild polio virus.

** For the reporting period of January – August 2013

Analysis of Results (January – August 2013)

High level preparedness that included prepositioning of health related supplies, human resources and funds, helped during post elections localized emergency responses. The prepositioned supplies were also released during April/May floods emergency response in flood affected like Nyanza and Coast provinces. From January-May, there has been consistent

increase in case load of diarrhoeal cases. When 8³ suspected cases of Cholera originating from Somalia were reported in Dadaab area (including refugee camps), the UNICEF prepositioned health supplies were dispatched to the host community health facilities. After the government declared polio virus outbreak on 10 May⁴, UNICEF with WHO and UNHCR continued its support to the Government for the coordination and procurement of vaccines for the polio vaccination campaign in 127 districts targeting 4.5 million (including 2 refugee camps in Dadaab and Kakuma). As of August, a total of a total of 4,358,859 children from 127 districts from 22 out of 47 counties were vaccinated. Further, high HIV prevalence of 8.7% reported in the Turkana region with mother to child transmission at 9.4% against the national goal of below 5%. UNICEF has supported efforts in strengthening the integration of Preventing Mother-to-Child Transmission (PMTCT) of HIV services into Maternal, New-born and Child Health (MNCH) and to improve evidence based planning.

Refugee Response (July – August 2013)

- In Dadaab refugee camp, the fourth round of the Polio campaign targeting all the age groups started on the 15th August while in the host community the same exercise started on the 17th– 21st August. UNICEF supported the 4th round of the polio campaign in the host community and the refugee populations.

Drought-Affected Areas (July – August 2013)

- As of first week of September, Government of Kenya confirmed 14 cases of Wild Polio Virus (WPV) type-1 in areas bordering Somalia. UNICEF operationalized the Polio Situation Room as one stop information shop as well as to monitor the developing situation on the ground. Round four of Kenya’s immunization response to the current outbreak was conducted 17-21 August. Independent Monitoring (IM) of vaccination coverage using finger marking for children under 5 years in households was 95% and 93% in public places. IM coverage using finger marking for adults was 89% in households and 87% in public places.
- UNICEF is currently supporting training of community health workers in Dadaab, Turkana and Garissa, including training on integrated community case management to empower community health workers for manage minor illnesses and conditions and facilitate referrals of severe conditions for prompt treatment. These initiatives are expected to contribute to reduction of the under-five mortality and maternal mortality.
- UNICEF supported Turkana County Government in strengthening the integration of Preventing Mother-to-Child Transmission (PMTCT) of HIV services into Maternal, New-born and Child Health (MNCH). UNICEF developed an advocacy brief of the investment case, that the county health team and partners are currently using to advocate with county governor to increase allocation of resources for maternal, new-born and child health as part of disaster risk reduction to increase the rate of development in the county ad increase resilience at health facility and community level to health shocks.

WASH

| Estimated #/% coverage | UNICEF & Operational Partners | | | Sector/Cluster | | |
|--|---------------------------------|----------------------|--------------------------|----------------------------------|--------------------|--------------------------|
| | UNICEF Target (Jan to Dec 2013) | Cumulative results** | Change since last report | Cluster Target (Jan to Dec 2013) | Cumulative results | Change since last report |
| Number of affected populations including children and women with access to sufficient water of appropriate quality and quantity for drinking, cooking and personal hygiene | 700,000 | 49,550 (7%) | 0 | 1,200,000 | 88,961 (7.41%) | 80,211 |
| Number of affected populations including children and women who have received critical WASH related information to prevent illness, especially diarrhoea | 700,000 | 108,405 (15.49%) | 0 | 750,000 | 164,697 (21.96%) | 86,770 |
| Number of affected populations accessing institutional WASH (schools & Health Facilities) have access to adequate and quality water, improved sanitation facilities and hygiene promotion messages | 200,000 | 69,226 (34.61%) | 0 | 300,000 | 88,629 (29.54%) | 76,223 |
| UNICEF Operational Partners: UNHCR, DPHO Mandera, DPHO Wajir, CRS/CARITAS, Islamic Relief, RACIDA, ARIDA and Save The Children UK | | | | | | |
| Note – not all partners have reported beneficiary numbers reached for all activities – WESCOORD/UNICEF are following up with | | | | | | |

³ UNICEF KCO Humanitarian Situation Report # 4 covering 31 March – 07 May, 2013

⁴ UNICEF KCO Humanitarian Situation Report # 5 covering 07 May – 06 June, 2013

partners to ensure 4Ws are updated correctly.
 *The cumulative result reported under the cluster is as reported from UNICEF; the sector result will be updated next month once WESCOORD members report is consolidated.
 ** Data for the reporting of June 2013

Analysis of Results (January – August 2013)

As of end of June 2013, 342,287 people have been provided with WASH emergency services (227,181 people through UNICEF while the remaining 115,106 through other WESCOORD Partners). Water quality remains a major challenge in the ASAL areas. Whilst access to water is at normal level across the ASAL districts, districts like Wajir, Mandera, Isiolo, Tana River and Ijara water consumption is below normal around 6 – 10 l/p/c/d. As there is a low latrine coverage (10 – 40 %) in the north eastern districts with huge reliance on unprotected water sources increasing, the risk of diarrheal disease outbreaks in the region is marginally high. In the refugee camps, UNICEF supported the safe water supply services through UNHCR. The on-going latrine construction programmes for refugees have improved in terms of coverage. Gaps still remain in schools and child friendly spaces particularly for children with special needs. The number of hygiene promoters in the refugee camps is grossly inadequate in relation to emergency standards of one promoter per 500 persons. This is hampering hygiene promotion activities and subsequent behaviour change initiatives.

Refugee Response (July – August 2013)

- UNICEF supported ongoing latrine construction in Dadaab refugee camps to minimize reported latrine gaps and open defecation practices. Peace Winds Japan (PWJ) has initiated a latrine construction project in IFO II camp. UNHCR has asked WASH partners to undertake a gap assessment for latrine and school WASH and report in the first week of September 2013.
- The inaugural Dadaab Hygiene and Sanitation promotion working group meeting was held at UNICEF offices where discussion on to discuss how to improve effectiveness of hygiene promotion activities and reduce WASH related diseases. UNICEF supported ACF hygiene promotion activities in refugee camps is ongoing.
- Construction of borehole at Bulla Banan settlement in Dadaab town started. The borehole will serve about 3,000 persons in Bulla Banan and Bulla Kiwanja settlements.

Drought-Affected Areas (July – August 2013)

No changes since last reported.

WASH cluster/sector (WESCOORD)

- Sector coordination is on-going with increased focused to counties level coordination.

Child Protection

| Estimated #/% coverage | UNICEF & Operational Partners | | | Sector/Cluster | | |
|---|---------------------------------------|--|---|----------------------------------|-------------------|--------------------------|
| | UNICEF Target (Jan to Dec 2013) | Cumulative results** | Change since last report | Cluster Target (Jan to Dec 2013) | Cumulative result | Change since last report |
| # of children attending regularly (daily) the Child Friendly Spaces in Dadaab, Kakuma and non-refugee settings, by sex* | 16,000 ¹ | 20,195 ⁴ (8,230 girls and 11,965 boys) | 16,246 | Not applicable | Not applicable | Not applicable |
| # of separated and unaccompanied children that receive child protection services by sex | 100% of those identified ² | 139 identified, 17 addressed* | 5 identified | Not applicable | Not applicable | Not applicable |
| # of Gender Based Violence survivors that receive psychosocial and/or medical/legal services (women/girls) | 100% of those identified ³ | 235 | 50 (32 boys, 18 girls), + 21 family members | Not applicable | Not applicable | Not applicable |

UNICEF Operational Partners: MoSSP, Save the Children UK (SCF-UK), Child Welfare Society of Kenya (CWSK), TdH, , RCK, CRADLE, DCS

¹ UNICEF Internal targets - 10,600(Refugee Settings) and 5,000 (other locations)

² UNICEF Internal target 2,500 (Refugee setting) and 300 in other locations.

³ Internal target 280 (Refugee setting) and 2450 in other locations.

⁴ After the new PCAs were signed partners reports on targets reached have been incorporated.

* No disaggregated figures available

Analysis of Results (January – August 2013)

Emergency needs assessment and response training anchored activities benefitted over 100 national staff from the Department of Children's Services and other key stakeholders. UNICEF, in collaboration with the Department of Children's Services and relevant NGOs, has also yielded positive changes by establishing clinical psychosocial and legal services in Turkana and providing assistance to child and adult survivors of physical and sexual abuse, rape and defilement. Complementary to child protection services offered to survivors of sexual violence, an internet based Gender Based Violence (GBV) service map with information of services provided by 137 organizations countrywide was also established. To strengthen the child protection emergency needs assessment and response, child protection sector successfully trained Departments of Children's Services Staff and other stakeholders on the use of the Rapid Assessment tool.

Refugee Response (July – August 2013)

- Tdh and UNICEF met with 7 male Duksi teachers and religious leaders to speak about time allocated to religious studies during the August school holidays. A common understanding was reached whereby the Religious Committee chairperson and Tdh would work on children mobilization to attend the Duksi classes, without causing conflict with time spent at the Community Centre. UNICEF funded Community Center offers recreational sports for children and counselling services. 73 children (boys 69 and girls 4) had accessed services in the community centre on day of the visit.
- Tdh and Film Aid have initiated a cooperation to raise awareness on Sexual and Gender Based Violence (SGBV) among adolescent; 35 girls and 29 boys were mobilized on August 14th to watch a SGBV video produced by Film Aid. Issues such as evidence preservation, role of caregivers, neighbours and relevant authorities, and the prevention of discrimination for SGBV survivors are addressed in the video.
- Sexual and Gender Based Violence (SGBV) training was organized for the refugee community leaders in Ifo on August 15th. UNICEF participated in this event attended by 30 persons (27 men, 3 women), and supported RCK in giving an overview of the Sexual Offence Act 2006 and the Children's Act 2001. Twenty six participants (23 men and three women) recognized that violation of women and children rights should be eliminated; yet three male leaders still valued early marriage, in relations to culture and religion.
- On August 13, UNICEF attended the Education and Youth WG meeting at in IFO2. UNICEF co-chairs both the Child Protection and Education WGs in Dadaab Main Office (DMO) and addresses CP mainstreaming into education in both forums. Section leaders voiced their concerns about UNICEF lack of visibility at camp level, compared to UNHCR and WFP. Some clarifications were therefore brought on the respective roles of UNICEF and its implementing partners, emphasizing the complementary of actions. It was agreed that child protection would be included in the training of the Parents and Teachers Association (PTAs) to be organized in September.

Drought-Affected Areas (July – August 2013)

- UNICEF funded a breakfast meeting on August 20th, 2013 where Turkana County child protection stakeholders, including County government executive officials and ward representatives, discussed the issue of street children in Lodwar town. 80 representatives from Government line ministries, NGOs, INGOs, CBOs, FBOs and the Lodwar business community attended the meeting. There has been a visible increase in the number of street children in Lodwar, and concerns were raised by duty bearers that adolescent street children were engaging in transactional sex in Lodwar town, and that children were being used as cheap labour by hotel and business owners. Lodwar does not have a rescue/rehabilitation center and the County government has committed to allocating land; an action plan was also developed that prioritized the issue of prosecuting business and hotel owners for exploiting children.
- UNICEF also participated in a three-day exercise organized by the County government for development of the County Integrated Development Plan (CIDP). Issues identified by the protection sector for prioritization in the CIDP include programmes to eliminate harmful cultural practices, the provision of services for children in conflict with the law (including child friendly cells), the establishment of a child protection center, promoting the rights of People Living With Disabilities (PLWDs), facilitating children's active participation in social and political life, and providing social protection to vulnerable groups.

Child Protection sub-cluster/sector

- Pursuant to the Information Management Workshop held on July 29th, the CPWG Coordinator has been working on how best to support the Information Management needs of the sector. A large part of the month has been dedicated to finalizing the Child Protection sector humanitarian ranking matrix, the capacity building tracking table, the contacts list, and designing and distributing the 4W (who is doing what where and when) spread sheet (to both national CPWG members and County Coordinators).

GBV sub-cluster/sector

- UNICEF supported GBV training for WFP and partner field staff based in Coast region. This effort was a continuation of the training that UNICEF has been providing to WFP staff on ensuring that staff are aware of basic principles in

communicating with-, and responding to-, survivors of abuse. Training has been provided nationwide and aims to ensure that WFP staff are able to refer survivors of abuse to the most appropriate and closest service provider, ensure the confidentiality of the survivor and ensure that their programmes are facilitating basic information on available referral pathways.

- WFP have produced the first copy of the 'staff referral pathways' card. The card, which was initiated and drafted by UNICEF, provides basic guidance to all WFP staff on what to do if confronted with survivors of abuse to ensure basic principles are respected. It also includes the 116 hotline and the 1195 number. These cards are being distributed progressively throughout Kenya to all staff and partners.
- UNICEF participated in the Kakuma SGBV coordination meeting held on 7th Aug. Forced marriage was reported to be highly prevalent among the Somali refugee community as compared to other nationalities residing at the Kakuma refugee camp. Schools in the refugee camps were reported to lack complaint reporting mechanisms where it was also noted that school prefects were hesitant to report sexual exploitation of self or fellow colleagues for fear of being reprimanded by the management.

Education

| Estimated #/% coverage | UNICEF & operational partners | | | Sector / Cluster | | |
|--|---------------------------------|--------------------|--------------------------|----------------------------------|--------------------|--------------------------|
| | UNICEF Target (Jan to Dec 2013) | Cumulative results | Change since last report | Cluster Target (Jan to Dec 2013) | Cumulative results | Change since last report |
| children including pre-school age, girls and other excluded children, access quality education opportunities | 240,000* | 17,937** | 0 | 360,000 | 90,892 | 21,619*** |
| UNICEF Operational Partners: Ministry of Education, Ministry of Youth Affairs and Sports, district Education Offices, AVSI Foundation Note: *The UNICEF target consists of 66% of the Cluster target. ** The numbers include 16,900 children reached through supplies in Mandera and Kisumu and 1,037 children and youth reached through ABE programme in Dadaab. *** Refers to the number of children and teacher reached through education in emergencies interventions including: provision of learning materials, school WASH activities, construction, rehabilitation of classrooms and teacher training. | | | | | | |

Analysis of Results (January – August 2013)

With support of newly hired education cluster coordinator and information management officer embedded within the Ministry of Education, UNICEF has strategized emergency response approaches both at the national and sub national level. One of the key results of such engagements were the joint education assessments and response during local emergencies where 16,900 children reached through education supplies in Mandera and Kisumu and 1,037 children and youth reached through Alternative Basic Education programme in Dadaab.

Refugee Response (July – August 2013)

- In order to respond to residual drought crises in Dadaab refugee camps (and host communities), UNICEF initiated an icon project on Alternative Basic Education. This project is a result of the Joint UNICEF-UNHCR Dadaab Education Strategy for refugee and host communities.
- UNICEF is supporting 7 ECDE / Alternate Basic Education Centres in Dadaab refugee camps engaging 1,037 children, youth and adults in ECDE, Catch Up, Literacy and vocational classes. UNICEF implementing partner has identified ten sites outside the camp in the host communities where they are going to start construction in September to reach out to additional children and youth.

Drought-Affected Areas (July – August 2013)

- Inter communal conflicts in North Eastern Counties of Wajir and Mandera continue to take toll on social services including Education. Currently, 28 schools in Madera North and Banisa are closed. A total of 22 schools are converted into rescue centers in the districts of Mandera North, Banisa, Lafey and Mandera East. There is an increased attendance of children in the schools working as Rescue Centers.

Education Cluster

- Indicators for the education sector were reviewed and incorporated in the Kenya Food Security Steering Group (KFSSG) Long Rains Assessment.
- Education partner's mapping was undertaken and thematic maps on education cluster 4Ws for national and county levels were prepared.
- Two Kenya Initial Rapid Assessments (KIRA) were conducted in Wajir and Mandera counties with support of education cluster partners and response priorities for the education sector were noted including: enhancement of school feeding programme, provision of classroom tents, construction of pit latrines for schools, awareness creation on school admissions for children, provision of learning materials and furniture.

- Education in emergency advocacy has been carried out through various fora including; the Education Development Partners Coordination Group, Centre for Education and Innovation (supported by DFID) and Senior management within the Ministry of Education Science and Technology.

Security Updates

- Ethnic tensions have also arisen in Moyale, Marsabit County in recent times. This is a re-emergence of similar inter-tribal violence in the latter part of 2011 and early 2012. This has resulted in deaths, injuries and displacements. Although the terrorist threat remains, there have been fewer terrorist incidents in Kenya in 2013 than in the two preceding years. The threats related to the hostage taking of UN and NGO staff members, particularly internationals, have however continued to increase.

Funding (As of July 2013)

| UNICEF KCO - 2013 Humanitarian Requirements* | | | | |
|---|--------------------------------------|--|---------------------------------|-------------------|
| Sector | Initial 2013 HAC requirements | HAC 2013 Revised requirements (CAP MYR) | Funding Received to date | % unfunded |
| WASH | 7,845,100 | 5,189,500 | 1,400,000 | 73% |
| Education | 6,045,500 | 5,555,000 | 1,684,988 | 70% |
| Health | 3,959,000 | 5,243,000 | 1,926,561 | 63% |
| Child Protection | 5,221,600 | 4,975,500 | 1,977,991 | 60% |
| Nutrition | 15,783,035 | 13,380,885 | 9,352,059 | 30% |
| Non Food Items | 1,005,800 | 0 | 0 | 0% |
| Total | 39,860,035 | 34,343,885 | 16,341,599 | 52% |

During the Mid-Year Review of the Kenya's inter-agency 2013 Consolidated Appeal Process, UNICEF's funding requirements for drought-affected areas were revised downwards due to a change in the projected humanitarian situation following the mostly peaceful 2013 general elections. However, the Health requirements were revised upwards in order to respond to the on-going Polio outbreak. In line with the mid-year revised requirements, UNICEF is requesting US\$34,343,885 to meet the humanitarian needs of children and build capacities in communities and in local and national service delivery systems to enhance resilience to recurrent shocks. Without additional funding, gains in programme coverage and coordination maybe lost and women and children faced with multiple shocks such as food insecurity, drought and temporary or protracted displacement will not receive timely assistance to support them in fulfilling their basic need and realising their rights.

Note:

*Note funding is **inclusive** of the 7% PSC costs

*To date funds have been received from USAID/OFDA, DFID, Government of Japan, SIDA, ECHO and UNOCHA

Next Situation Report: 10 October 2013

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