

UNICEF HUMANITARIAN ACTION KENYA IN 2009



Core Country Data	
Population under 18 (thousands)	18,593
U5 mortality rate	121
Infant mortality rate	80
Maternal mortality ratio (2000–2007, reported)	410
Primary school enrolment ratio (2000–2007, gross, male/female)	107/104
Primary school enrolment ratio (2000–2007, net, male/female)	75/76
% U1 fully immunized (DPT3)	81
% population using improved drinking-water sources	57
HIV/AIDS prevalence	n/a
% U5 suffering moderate and severe underweight	20

Source: *The State of the World's Children 2009*

In 2009, UNICEF will continue to respond to the needs of more than 1 million women and children at risk due to multiple emergencies: the ongoing drought conditions in the arid and semi-arid lands (ASALs); continued influx of refugees from Somalia; internal displacement as a result of the post-election violence in 2008 as well as previous displacements due to political and resource-based conflicts; and very high prices of food, fuel and other basic commodities. An estimated 1.34 million people are receiving food assistance – 840,000 in ASALs and the rest displaced by recent conflicts or natural disasters.

Summary of UNICEF Emergency Needs for 2009*	
Sector	US\$
Health	1,600,000
Nutrition	4,000,000
Water, Sanitation and Hygiene	4,220,000
Education	3,660,000
Child Protection	4,500,000
Cross-Sectoral Preparedness and Coordination	1,200,000
Total**	19,180,000

* Funds received against this appeal will be used to respond to both the immediate and medium-term needs of children and women as outlined above. If UNICEF should receive funds in excess of the medium-term funding requirements for this emergency, UNICEF will use those funds to support other underfunded emergencies.

** The total includes a maximum recovery rate of 7 per cent. The actual recovery rate on contributions will be calculated in accordance with UNICEF Executive Board Decision 2006/7 dated 9 June 2006.

1. CRITICAL ISSUES FOR CHILDREN AND WOMEN

More than a million children and women in Kenya are at risk due to multiple crises, including the ongoing drought conditions in the arid and semi-arid lands (ASALs); continued influx of refugees from Somalia; internal population displacement as a result of the post-election violence in 2008 as well as previous displacement due to political and resource-based conflicts; and very high prices of food, fuel and other basic commodities.

At present, an estimated 1.34 million people are receiving food assistance – 840,000 in ASALs and the rest displaced by recent conflicts or natural disasters. Over 95,000 children under age five (22 per cent) suffer from moderate acute malnutrition, while 10,000 children (2.3 per cent) are severely malnourished. The numbers of severely malnourished children admitted at health facilities in semi-arid and other marginal areas are increasing every day. In addition, the most seriously impacted by high food and commodity prices are those who depend on the market for their food, including almost 5 million urban poor considered highly to extremely food insecure.

Last year's post-election violence exposed inter-ethnic stress, revealed deep-seated economic and social inequalities, stoked political turbulence and economic uncertainty and revealed the dangerous exclusion of youth from development participation and benefits. Consequences included mass destruction of property and loss of livelihoods, widespread gender-based violence (GBV), separation of children and displacement. Between April and September 2008, 1,794 children were placed in charitable children's institutions, while 3,689 were living in child-headed households. During the same period, less than 200 of these children were reunited with their families or caregivers. Close to 300,000 schoolchildren were directly affected as a result of the violence.

The Government plan 'Rudi Nyumbani' (Return Home) introduced in early May 2008 to resettle displaced families has resulted in a multiplication of smaller poorly serviced 'transit' camps, most of which lack access to health, water, sanitation and hygiene (WASH), education and protection services. As of 1 September 2008, approximately 25,000 people remained in 48 camps for internally displaced persons (IDPs), with at least 99,000 in 160 transit camps.¹ In addition, prior to the 2007 election there were an estimated 350,000 IDPs in Kenya due to earlier election-related clashes, unresolved land grievances and socio-economic insecurity.

Kenya also continues to host 270,000 refugees, mainly from Somalia and the Sudan. The Dadaab refugee camps near the Somali border host some 200,000 refugees, of which 35,000 are estimated to be children under age five. In the first nine months of 2008, there have been 33,170 new arrivals despite the official closure of the border. With this new influx of refugees, basic services in the camps have become severely overstretched.

2. KEY ACTIONS AND ACHIEVEMENTS IN 2008

In 2008, UNICEF played a critical role in strengthening the humanitarian coordination system by leading the nutrition and WASH clusters; co-leading the education and emergency telecommunications clusters; and acting as the lead for the child protection subcluster. UNICEF has worked to transition many of these cluster mechanisms linking them with existing sectoral coordination structures and systems and to ensure Government's sustainable capacity for effective humanitarian coordination and policy development.

UNICEF worked in collaboration with local, national and international partners, including the Kenya Red Cross Society (KRCS), World Vision, Oxfam UK, and Action Against Hunger amongst others. UNICEF provided health and nutrition support for almost 2 million out of 6.5 million children under age five and for nearly 500,000 out of 2 million pregnant/lactating women, including those living in IDP camps located in Nairobi, Rift Valley, Nyanza and Western Provinces. UNICEF helped increase staff in health facilities, provided emergency nutrition and medical supplies, backed emergency immunization programmes and assisted in the effective coordination of emergency health and nutrition partners. Successful emergency measles immunization campaigns resulted in the drastic decline of measles cases from over 300,000 in 2006 to 15 reported in 2008.

Thanks to UNICEF's direct support to 337 health facilities and the training of health-care workers in the delivery of critical nutrition services, approximately 150,000 children under age five were treated for acute malnutrition (10,000 for severe malnutrition and 140,000 for moderate malnutrition). The coverage for the treatment of moderate malnutrition was 38 per cent and 65 per cent for severe malnutrition. As a result of the distribution of educational materials and tents as well as

¹ Kenya Red Cross Society (KRCS), World Food Programme (WFP), Inter-Agency Assessment, September 2008.

the training of teachers, close to 100,000 schoolchildren affected by the post-election violence were able to continue their education.

UNICEF together with its local partners provided 200,000 camp residents (out of an estimated total of 250,000 to 300,000 IDPs) with access to safe water through chlorination, hygiene promotion and handwashing materials; distributed over 19,000 family kits, including tarpaulins, blankets, cooking utensils, jerrycans and hygiene supplies; and worked with the Department of Children's Services on the *Collaborative Programme Response to the Situation of Separated Children* that piloted a systematized process of identification, documentation, tracing, reunification and mediation (IDTR&M) for children placed in charitable children's institutions and for children living in child-headed households. As part of the gender-based violence subcluster, UNICEF participated in the development of Standard Operating Procedures for survivors and service providers. Through its own programmes UNICEF supported partners in post-rape care and in the distribution of post-exposure prophylaxis (PEP) kits, and contributed to the strengthening of prevention and response to GBV through the dissemination of information, education and communication (IEC) materials and trainings that brought together actors engaged in GBV, including counsellors, police and legal organizations.

UNICEF supported the Government in the drafting and adoption of *National Guidelines on Emergency Post-Disaster Psychosocial Principles and Response* and was able to operationalize the child-friendly space concept in areas that continue to be adversely affected by post-election violence through a number of collaborative training initiatives and programme interventions. UNICEF supported a Child Protection in Emergency (CPIE) specific emergency preparedness and response planning (EPRP) workshop for child protection partners, as a first step towards establishing a national coordination mechanism that will address coordination and capacity-building for partners engaged in both natural disasters and conflict crises in Kenya.

3. PLANNED HUMANITARIAN ACTION FOR 2009

Coordination and Partnership

In 2009, UNICEF will continue to play a key role as an active member of the Inter-Agency Standing Committee/ UN Country Team (IASC/UNCT) and support sector/cluster coordination in nutrition and food, as co-lead with the World Food Programme (WFP); education, as co-lead with Save the Children; WASH as cluster lead; as an active participant in health and protection clusters and as lead of the child protection subcluster. UNICEF will also continue to work closely with the UN Refugee Agency (UNHCR) to provide assistance and protection to refugee populations in Kenya.

Linkages of HAR with the Regular Programme

Emergency preparedness and response activities are integrated within the 2009–2013 Country Programme. Each programme sector is responsible for ensuring that a humanitarian response element is included in its annual work plan to support the development of emergency response capacity and management among government counterparts and other partners. This is to ensure that sectoral programmes accelerate key lifesaving interventions during times of emergency in line with UNICEF's *Core Commitments for Children in Emergencies*.

In 2009, UNICEF will work with Government and partners to identify and address the needs of children affected by emergencies and to promote the full realization of their rights.

Health (US\$ 1,600,000)

For 2009, the overall goal is to minimize the impact of emergencies on the health status of children under age five. A total of 250,000 children under age five will benefit from the following key activities:

- Procure and distribute essential drugs and equipment to health centres in areas affected by post-election violence and those experiencing drought, targeting 1.2 million people;
- Strengthen human resources for the delivery of essential health services;

- Support integrated outreach services in areas with highest needs, such as the distribution of long-lasting insecticidal nets (LLINs) to pregnant women and children under age one and focused antenatal care, including the prevention of mother-to-child transmission of HIV (PMTCT Plus);
- Support supplementary measles and polio immunization campaigns, targeting 250,000 children under age five, increasing full coverage from 60 per cent to over 80 per cent;
- Support Government in implementing development activities in northern Kenya affected by continuous and chronic emergencies and poor health infrastructure.

Nutrition (US\$ 4,000,000)

For 2009, the overall goal is to prevent and address acute malnutrition, micronutrient deficiency and associated mortality and morbidity among children under age five and pregnant/lactating mothers. This will be ensured through continued close collaboration with the Ministry of Health and established NGO partners and through support to the development of Ministry of Health's capacities and systems. Some 120,000 children under age five and 200,000 pregnant/lactating mothers will benefit from the following key activities:

- Accelerate and scale up development of a functional nutrition information system in Kenya (including routine and periodic data collection and analysis);
- Provide technical support and material and specialized supplies to detect and manage malnutrition at facilities and in communities;
- Implement training of nursing and medical staff on key nutrition issues, including the management of malnutrition;
- Provide technical input and supplies in order to take home fortification to scale in all vulnerable populations;
- Support outreach activities to increase/follow up management of moderate and severe acute malnutrition to above 50 per cent and 70 per cent, respectively;
- Support the implementation of essential nutrition activities in arid and semi-arid lands and among urban populations;
- Continue supporting coordination mechanisms within the nutrition sector at national and subnational levels to ensure a strategic, coherent and effective nutrition response. NGO partners will give additional support to coordination mechanisms at subnational level.

Water, Sanitation and Hygiene (US\$ 4,220,000)

For 2009, the overall goal is to ensure that all populations affected by emergencies, especially children, have access to adequate quantities of safe water and to sanitation facilities, are reached with hygiene promotion messages, and that the disruption of existing services is kept to a minimum. This goal will be pursued through the following key activities:

- Promote hygiene activities for affected populations with a focus on schoolchildren (targeting 67,500 children);
- Support the construction of 30 school latrines and water supply infrastructure used by 19,500 children in areas with high levels of displacement due to post-election violence;
- Support the training on management of water supply and sanitation facilities for vulnerable groups;
- Repair and rehabilitate damaged water supply and sanitation facilities, according to assessed needs;
- Equip the personnel of the Ministry of Water and Irrigation and the Ministry of Health in at least eight cholera-prone districts with portable water quality testing kits and train on their use, including the planning and implementation of a water quality surveillance strategy;
- Support the Government of Kenya personnel to plan and implement cholera response activities through the distribution of emergency water and sanitation materials and through hygiene promotion and awareness-raising campaigns;
- Construct latrines and rainwater harvesting systems in 40 schools in drought-affected areas, benefiting 26,000 children;
- Train local artisans in the construction of concrete latrine slabs;
- Construct and equip four new boreholes with pumps, generator sets and overhead steel tanks in Dadaab refugee camp and promote better hygiene and sanitation using the camp's 17 primary schools as an entry point;
- Support the establishment of a permanent national Water and Sanitation Coordination Committee (WESCOORD) Secretariat; and train district WESCOORDs to strengthen emergency coordination structures.

Education (US\$ 3,660,000)

For 2009, the overall goal is to ensure that children are able to access quality education during emergencies. A total of 200,000 drought- and conflict-affected children and 2,000 teachers will benefit from the following key activities:

- Assess drought impact on selected areas and provide gender-disaggregated data for more targeted interventions;
- Provide essential learning materials (school kits, recreational kits, desks and other educational materials);
- Conduct capacity development and training workshops on prevention, preparation and response to emergencies as well as peace education for education managers, including teachers and School Management Committees;
- Engage in advocacy and communication on child-friendly spaces and peace education, developing materials/documentation and disseminating them through various channels, mainly print and radio programmes; provide technical support to partners for the planning, preparation and development of the project and regular follow-up on implementation;
- Provide ongoing support to sectoral coordination with Ministry of Education and partners.

Child Protection (US\$ 4,500,000)

For 2009, the overall goal is to ensure that child protection prevention and response mechanisms are established in areas affected by conflict and natural disasters, including IDP/refugee populations, focusing on capacity-building and the development of the Child Protection in Emergency (CPIE) system. Key activities will include:

- Train and disseminate standard operating procedures for the *Collaborative Programme of Response to the Situation of Separated Children*, with additional training and the provision of technical support to partners engaged in prevention, and the elements of response (identification, documentation, tracing, reunification and mediation);
- Train community workers and other child protection partners to act as mentors to the most vulnerable children living in child-headed households and support them in responding to their protection concerns;
- Continue supporting GBV survivors and service providers in prevention and response to GBV through integrated training initiatives and through the dissemination of IEC materials, including the production of booklets and posters for survivors on how to seek help, and for service providers on how to provide assistance and referral;
- Continue training psychosocial service providers – including teachers – on how to operationalize community-based psychosocial support interventions and the concept of child-friendly spaces, with a view towards building national emergency capacity;
- Develop and implement a multimedia, multilanguage (English, Swahili and Somali) communication campaign based on a platform of ‘Keeping Children Safe during Emergencies’;
- Support the Child Protection in Emergency (CPIE) national level coordination mechanism financially and administratively, and through the provision of training opportunities for child protection partners.

Cross-Sectoral Preparedness and Coordination (US\$ 1,200,000)

For 2009, the overall goal is to ensure that the Government, UNICEF and partners enhance their emergency preparedness systems and their ability to identify and respond to the needs of children in emergencies. Key activities will include:

- Undertake contingency planning with Inter-Agency Standing Committee (IASC) partners and Government;
- Conduct capacity mapping and preparedness planning with Government and partners in high-risk districts;
- Preposition in strategic locations non-food items, including family kits for 100,000 people;
- Integrate cross-cutting issues, such as HIV/AIDS, gender, human rights and the environment, into humanitarian preparedness and response;
- Enhance programme monitoring and evaluation in emergencies so that programmes can be improved and better targeted;
- Continue strengthening the humanitarian coordination system by supporting sector/cluster coordination activities.