



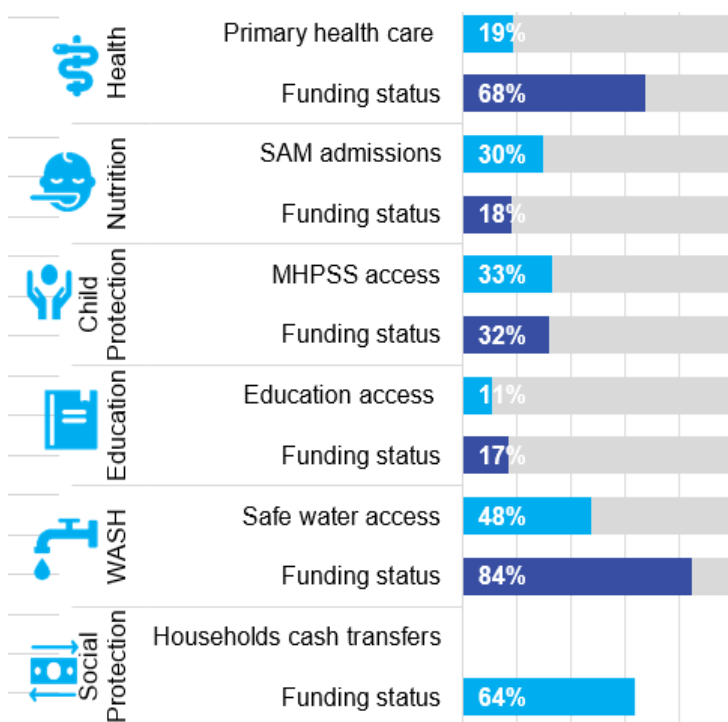
A learner washes her hands at a handwashing station at Nadapal Primary School, Turkana @UNICEF Kenya/2020/LameckOrina

Reporting Period: 1 January to 30 June 2021

Highlights

- Kenya is facing a worsening drought situation due to the cumulative impacts of two consequent failed rains season. Over 1.4million people are facing food insecurity, and the number is expected to go up to 2 million by end of the year.
- On 23rd March 2021, the Government of Kenya announced the closure of the Dadaab and Kakuma refugee camps.
- By June 2021, Kenya had experienced the third wave of the COVID-19 pandemic with 184,161 confirmed cases, 125,684 recoveries and 3,634 deaths reported.
- 50,680 children (25,847 girls and 24,833 boys) were reached through UNICEF supported-integrated health outreach services between January to June 2021.
- 28,904 (15,055 girls and 13,849 boys) malnourished children were admitted for treatment of Severe Acute Malnutrition (SAM) between January to May 2021.
- 21,662 children, parents and caregivers (9,970 female, 9,807 male and 1,885 gender undisclosed) were reached through UNICEF-supported child protection support services by 30 June 2021.
- Since the start of 2021, UNICEF has reached 713,066 vulnerable children (50% girls) with face masks for adherence to COVID-19 school safety protocols.
- Between January and June 2021, UNICEF has reached 2,685,751 people (684,892 men, 641,270 boys, 706,079 women and 653,510 girls) with access to safe water for drinking, cooking, and personal hygiene as well as COVID-19 hygiene messaging.
- The 2021 Humanitarian Action for Children (HAC) appeal has a funding gap of 65% by 30 June 2021.

UNICEF's Response and Funding Status




*Funding status includes: funds received in the current year; carry-over from the previous year; and repurposed funds with agreement from donors.


Kenya Mid-Year Humanitarian Situation Report

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for every child

Situation in Numbers

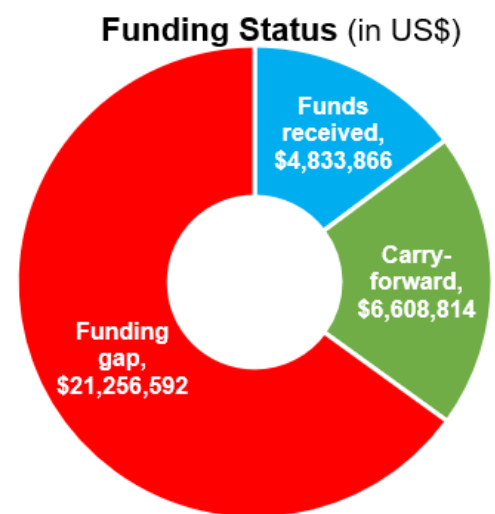
670,440
 children in need of humanitarian assistance (NDMA, Feb 2021)

1,426,468
 people in need (NDMA, Feb 2021)

55,002
 Internally displaced people (KRCSS, June 2021)

519,989
 # of refugees and asylum seekers (UNHCR, 31 May 2021)

UNICEF Appeal 2021 US\$ 32.7 million



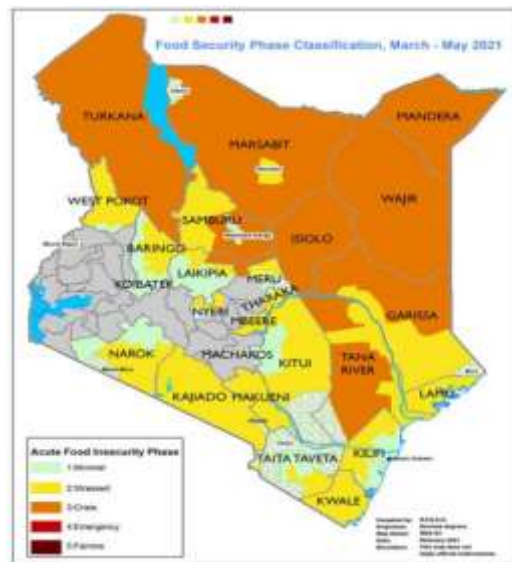
Funding Overview and Partnerships

In 2021, UNICEF appealed for US\$ 32.7 million to sustain the provision of life-saving services for women and children in Kenya. The United Kingdom Committee for UNICEF, USA (USAID) OFDA, USAID/Food for Peace, European Commission / ECHO, USA (State) BPRM, Japan Committee for UNICEF and Government of Japan have generously contributed to UNICEF Kenya's humanitarian response against the appeal. UNICEF expresses its sincere gratitude to all public and private donors for new contributions of US\$ 4.8 million received. However, the 2021 Humanitarian Action for Children (HAC) appeal has a funding gap of 65% by 30 June 2021. UNICEF is continuing to support resource mobilization efforts through its sector lead role for Nutrition, WASH, Education and Child Protection and its technical oversight role for Health and Social Protection.

Situation Overview & Humanitarian Needs

According to the National Drought Management Authority, Kenya is facing a worsening drought situation due to the cumulative impacts of two consequent failed rain seasons, with all Arid and Semi-Arid Lands (ASAL) counties receiving less than 50% of expected rainfall. Consequently, over 1.4 million people are facing food insecurity in Kenya, and the number is expected to go up to 2 million by end of the year. Water access at the household level is above the long-term average in 18 of the 47 ASAL counties. According to the FAO, there were no locusts in Kenya by mid-May 2021, attributable to the intensified outbreak control efforts. However, locust breeding is still possible in northern Kenya as laying and hatching is still being reported in Somalia and Ethiopia. Due to heavy seasonal rains in some areas, a total of 55,002 people were displaced by floods in seven counties that are around water bodies in Western Kenya, the Rift Valley and in Nairobi informal settlements by June 2021. According to the Ministry of Health, by June 2021, Kenya had experienced the third wave of the COVID-19 pandemic with 184,161 confirmed cases, 125,684 recoveries and 3,634 deaths reported. Of concern is the rapid spike in cases in the western region, which called for heightened control measures by end of June. There are also cross-border transmission concerns with the spike in Uganda and the low testing in Tanzania and Somalia. Kenya launched the COVID-19 vaccination campaign on 5th March 2021 across all 47 counties. As of 30th June 2021, a total of 1,008,120 persons were vaccinated with the first dose and 370,465 persons with the second dose, targeting frontline workers, teachers, security officers and those above 58 years of age. Due to low public information to increase vaccine uptake and poor adherence to control protocols a fourth wave of the pandemic is expected in the second half of the year. According to integrated phase classification for acute malnutrition (IPC-AMN) conducted in February 2021, malnutrition levels remained unacceptably high with arid areas such as Turkana and parts of Marsabit reporting emergency levels of acute malnutrition. Nutrition screenings conducted from February to March 2021 in the most affected hotspots in Marsabit county indicated that over 50 percent of children assessed the required treatment of acute malnutrition. The main driver of acute malnutrition is poor dietary intake with reduced milk production and consumption which forms the main diet for children in arid areas reported across the arid areas. Other drivers include morbidity, poor childcare practices, poor sanitation, and health environment. The government (national and counties) with support from UNICEF and other partners updated and activated the multi-sectoral response plans to mitigate the effects of drought and ensure early identification and treatment of children with acute malnutrition. Integrated nutrition SMART surveys are planned in several arid counties and a comprehensive food and nutrition situation analysis will be conducted during the 2021 long rain assessment from July to August 2021. According to UNHCR, Kenya hosts 521,185 refugees and asylum seekers as of 30th June 2021, of which 54% are from Somalia and 24.5% are from South Sudan. Almost half of the refugees in Kenya reside in Dadaab refugee camps (44%), 40% in Kakuma refugee camps, and 16% in urban areas, mainly Nairobi. On 23rd March 2021, the Government of Kenya announced the closure of the Dadaab and Kakuma refugee camps. The Government of Kenya and UNHCR are working together to implement a roadmap for the closure that is based on voluntary, durable, safe, sustainable, and orderly solutions and in line with Kenya's national and international obligations.

Food Security Situation in Kenya, May 2021



Summary Analysis of Programme Response

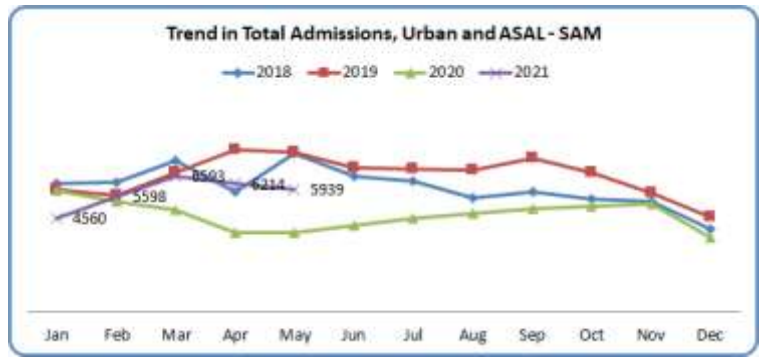
Health

Between January and June 2021, a total of 52,114 persons, of which 50,680 are children (25,847 girls and 24,833 boys) and 1,434 are pregnant and lactating women were reached through UNICEF supported-integrated health outreach services with life-saving health interventions including treatment of common illnesses including acute respiratory illness, diarrhea, as well as routine immunization and deworming for children, ante-natal care for pregnant/lactating women. In addition, 62,114 people were reached with awareness, preventive messages on drought and floods related disease epidemics and COVID-19. A total of 150 community health volunteers from 6 counties (Turkana, Marsabit, Wajir, Mandera, Tana River and Garissa) were identified and sensitized on drought, floods related disease epidemics and COVID-19 and deployed to conduct community awareness on the drought, floods related diseases, COVID-19 to improve skills and practice of communities to the prevention of the disease emergencies at the household level, and referral of sick community members for treatment at the outreach sites. The achievements were in partnership with county government and Kenya Red Cross Society (KRCS) to take services closer to vulnerable communities through integrated outreach services, enhancement of communities knowledge and practices on prevention of drought-related disease epidemics, and community mobilization for uptake of integrated outreach services in response to drought emergency and the impact of COVID-19 in the 6 counties of Mandera, Wajir, Garissa, Tana River, Turkana and Marsabit counties. UNICEF has directly provided technical and financial support to the 6 counties departments of health to enhance capacities of county and sub-county managers on drought, floods related emergencies, and are currently using the evidence generated during hazard vulnerability and capacity assessments to update respective counties' Emergency Preparedness and Response Plans, undertake monitoring supervision of the life-saving interventions currently under implementation by KRCS and conduct performance reviews to redirect implementation of the interventions. UNICEF has further supported the procurement of assorted life-saving health commodities and dispatched to counties in ASAL and Western Kenya totaling USD 250,000 in support of the implementation of the life-saving interventions. Further support has been provided to the Ministry of Health Headquarters (MoH) in the procurement of COVID-19 assorted Personal Protective Equipment (PPE) including N95 respirators, surgical masks, gowns totaling USD320,000. UNICEF provides continuous technical support to the National COVID-19 Taskforce through the taskforce and various technical sub-committees. UNICEF has technically supported the MoH in the development and roll-out of event-based surveillance for COVID-19 in learning institutions. Additional technical support continues to be provided in strengthening coordination mechanisms between the Ministry of Health and Ministry of Education (MoE) on COVID-19, as well as the development and implementation of a multi-sectoral plan for continuity of safe learning in context to COVID-19.

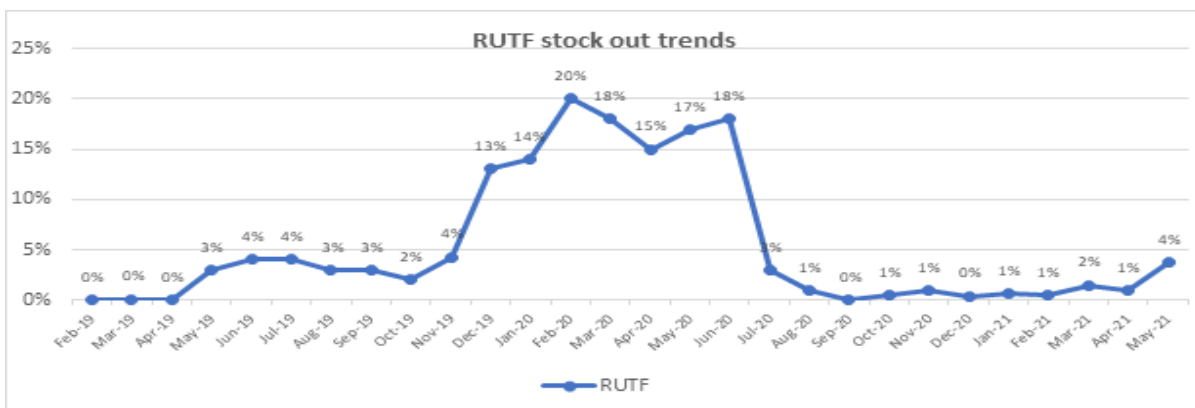
For the next 6 months, UNICEF plans to intensify its efforts in mobilizing resources for the worsening drought to cater to needs beyond 2021. At the national level, UNICEF plans to continue supporting the Ministry of Health Headquarters in strengthening coordination mechanisms for COVID-19 response through the National Taskforce, as well as strengthening Covid-19 coordination mechanisms between the Ministry of Health and Ministry of Education. UNICEF shall work closely with the Ministry of Health Headquarters and KEMSA for the distribution of UNICEF procured PPEs to counties based on need. Further support is to be provided for the development of a multi-sectoral plan (MOH and MOE) for safe continuity of learning, and the roll-out of an event-based surveillance system. At the county level, UNICEF focus is on supporting strengthening coordination mechanisms for emergency response in the 6 counties on the implementation of drought response through integrated outreach services, community mobilization for increased uptake of the life-saving interventions, and directly supporting the 6 counties departments of health to undertake supervision sessions for implementation of drought-related health emergencies and impact of Covid-19, update of the emergency preparedness and response plans and quarterly performance review meetings. Additional support is to be provided to 5 counties (Turkana, Marsabit, Tana River, Baringo, Wajir) in the development of hazard, vulnerability and Capacity risk profiles and advocacy briefs.

Nutrition

A total of 28,904 (15,055 girls and 13,849 boys) malnourished children were admitted for treatment of Severe Acute Malnutrition (SAM) between January to May 2021 in arid, semi-arid (ASAL) and urban areas. The number admitted is higher compared to the same period last year where 23,880 (12,209 girls and 13,849 boys) children were admitted between January and May 2020 mainly attributed to the substantial interruption of health and nutrition services by the COVID-19 in the early months of the pandemic. However, the admissions trends are



notably not on course with 35 percent of SAM annual targets (81,948¹) being achieved as of May 2021. This is mainly attributed to the scale down of integrated outreach services in hard-to-reach areas due to limited funding support. Currently, the support has reduced from over 350 outreaches across the counties to about 60 outreaches in 6 ASAL counties. There are efforts to improve early identification and referral through mass screenings albeit limited in scale. SAM program performance indicators are within the SPHERE standards² with proportion cured, defaulting and dying at 81.3 percent, 13.2 percent, and 1.0 percent respectively. Implementation of Family MUAC is ongoing in Isiolo, Marsabit, Turkana, Tana River and Baringo counties as part of strengthening screening and self-referrals for treatment of acute malnutrition. UNICEF collaborated with the Ministry of Labour and Social Protection to register a total of 2700 households in 5 counties (Turkana, Marsabit, West Pokot, Kilifi & Kitui) under the consolidated cash transfer programme who will be receiving nutrition counseling and health education. The number is expected to increase at the end of the year. UNICEF supported the development of 3 sets of Maternal, Infant and Young Child Nutrition (MIYCN) video animations both in Kiswahili and English (breastfeeding, complementary feeding, and maternal nutrition) in the context of COVID 19. All the 47 counties were sensitized on the same. These were to be used to pass messages on MIYCN during COVID times when physical meetings are limited. UNICEF in partnership with Kenya Red Cross Society continued to support the Ministry of Health to implement community messaging and feedback mechanism on the RapidPro platform in four counties (Turkana, Kilifi, Kisumu and Nairobi) to enhance community mobilization, improve nutrition knowledge at the community level and reinforce the recommended nutrition practices. A total of 483 health facilities across 10 arid counties implemented IMAM surge approach. Between January and May 2021, 73 (15%) health facilities surpassed the set threshold and subsequently activating surge actions as part of nutrition response with Turkana reporting the highest number of 35 percent. UNICEF supported MOH in the procurement and distribution of 22,048 cartons of Ready-To-Use Therapeutic Food (RUTF) in January to June 2021 across 2,103 health facilities in 23 ASAL counties and Nairobi urban informal settlements and refugee camps through the Kenya Essential Medical Supplies Authority (KEMSA). The Nutrition sector continues to face challenges related to the RUTF pipeline for 2021 which is not secure increasing the risk of a pipeline break. In May, not all orders for RUTF could be serviced hence the recording of a 4% stock out rate compared to 1 percent in January 2021. At the time of this reporting, there were no stocks of RUTF in KEMSA. Should this persist, there will be a dramatic rise in the stock out rate in the country with negative impacts on the programme being anticipated. UNICEF continues to intensify high-level advocacy with the Government to accelerate the allocation of resources for procurement and is also mobilizing resources to meet immediate gaps. GOK MOH is in the process of procuring Corn Soya Blend (CSB) worth approximately USD 20,000 for the management of moderate acute malnutrition.



¹ 2020 Short Rains Assessment conducted in February 2021

² Proportion of discharges died <10 percent, proportion of discharges defaulting <15 percent and proportion of discharges cured >75 percent

UNICEF continued to support coordination at the National and county level and has led in developing, disseminating and resource mobilization for the sector preparedness and response plan. Emergency coordination was activated in the period to support Marsabit county following reports of a marked deterioration in hot spot areas of the county. Significant programme gaps have been noted and raised within partnership forums to support the sector implement a scaled response in Marsabit. The sector in July is jointly with the food security sector undertaking the long rains seasonal assessment whose results will be important in responding to the impacts of the March-May rain performance. There will be an effort to ensure that systems remain responsive to the situation to ensure that children (boys and girls), pregnant and lactating women as well as other special interest groups have access to essential and integrated high-impact nutrition interventions at a scale that is responsive to the needs identified. The sector will enhance advocacy and resource mobilization efforts given the current low level of support to response actions at the county level by both partners and the County governments. The supply chain and integrated outreaches will be prioritized should additional funds be sourced during the period.

Child Protection

Between 1st January and 30th June 2021, a total of 21,662 children, parents and caregivers (9,970 female, 9,807 male and 1,885 gender undisclosed) were reached through UNICEF-supported child protection support services, out of which 12,218 (5,315 female, 5,018 male, and 1,885 gender undisclosed) children, parents and caregivers were reached with Mental Health and Psychosocial Support Services (MHPSS). Most children supported during the reporting period were identified through community Child Protection Volunteers (CPVs) who UNICEF has, through the Department of Children Services, continued to engage with and support since the onset of the COVID-19 pandemic. The Child Protection Volunteers work in communities to support the identification, case management and referrals for children affected by COVID-19 and violence, exploitation and abuse. The services provided by the CPVs include mental health and psychosocial support (MHPSS) and rescue of children surviving or at risk of child marriage, neglect, exploitation, violence and child labour. By continuing to collaborate with trained community workers UNICEF has been able to provide child protection support and referral to case management services to children in the refugee context, despite the ongoing COVID-19 restrictions in place, with 947 children (474 girls, 473 boys) in Dadaab refugee camp being reached with support services by CPVs. Across four arid and semi-arid (ASAL) counties (Garissa, Mandera, Tana River and Wajir), 40 Child Protection Volunteers provided MHPSS services to a total of 1,231 children (699 girls & 532 boys) during community outreach session. During these community outreaches and psychosocial support sessions, children reported to the CPVs that some of their peers had become involved in child labour as a result of being out of school due to COVID-19, with other peers having fallen pregnant and married. UNICEF has also continued to work closely with government partners to provide child protection case management services, including MHPSS and Family Tracing and Reunification (FTR) services. In Lodwar town for example, UNICEF engaged with Social Welfare Officers, in partnership with the Directorate of Social Protection, to provide MHPSS to 260 children (225 boys, 35 girls) identified to be living on the streets while they were provided with FTR services. In addition to supporting child protection volunteers who are playing a lead role in community outreach and identifying at-risk children, UNICEF has continued to collaborate with Childline Kenya to provide free tele-counseling and referral support to children surviving and at risk of violence, exploitation and abuse. During the first 6 months of 2021, Childline Kenya reached a total of 8,785 children and caregivers (3,247 male, 3,653 female and 1,885 gender undisclosed) with child protection support, including information sharing, MHPSS services and referral to child protection services in cases of violence and abuse. The child protection section also engaged with the education sector in ensuring continuity of MHPSS to children as they returned to school. To this end, UNICEF partnered with the Teachers Service Commission (TSC) through which 6 different bulk SMS messages were sent out to 324,051 teachers across Kenya, to sensitize teachers on how children might have been exposed to violence and abuse, in preparation for their return to school after school closures due to COVID-19, including information on Child Online Sexual Exploitation and on how to recognize signs of psychosocial distress and violence against children. A 7th message on the topic of Gender-Based Violence (GBV) and how to offer support to children showing signs of abuse was sent to 45,368 teachers. In the second half of 2021, UNICEF will work with the education sector and Child Protection Volunteers, as well as other community-based actors, in expanding the prevention and protection of children from violence, abuse and exploitation. UNICEF will work with the Ministry of Health on the provision of Psychological First Aid (PFA) training for teachers across Kenya. In addition, UNICEF and the Ministry of Health are partnering with the Department for Social Development to roll out a 5-day training for 435 Lay Volunteer Counsellors and 115 Social Development Officers on the provision of Psychological First Aid (PFA) and how to recognize signs of violence and abuse – and on how to make referrals to child protection services and MHPSS services. UNICEF will also continue to support the expansion of the child protection volunteers scheme to enhance service delivery to children especially in the hard-to-reach areas. Identified volunteers will be trained to equip them with skills on child protection in emergencies.

Education

Since the start of 2021, UNICEF has reached 713,066 vulnerable children (50% girls) with face masks for adherence to COVID-19 school safety protocols. The masks were distributed in targeted schools across the 47 counties as selected by MoE based on school population as well as areas identified to host vulnerable community members in informal settlement areas. Of these, 518,049 are Primary school children and 195,017 are in secondary schools. Through the refugees' programme, UNICEF continued to enhance access to quality basic education for 65,098 (27,083 girls) children in Kakuma/Kalobeyei. Of which, 3,631 (1,381 girls) overage adolescent boys and girls (10 to 18 year olds) in refugee camps and host communities have been supported with increased access to Accelerated Education Programme (AEP). To enhance the quality of refugee education, UNICEF supported 81 teachers on AEP and use of Early Childhood Development (ECD) kits. Also, additional 57 secondary school teachers were trained on the integration of ICT in teaching and learning, developing digital content for Science, Technology, Engineering and Mathematics (STEM) related subjects, new approaches of teaching STEM subjects and the deployment of virtual labs in teaching the sciences. On procurement and distribution of teaching/learning materials, ECD level education kits were distributed to learners in ECD centers in Kakuma/Kalobeyei reaching a total of 6,544 (45% girls) children and 2,800 textbooks and revision materials supplied to learners in Kakuma improving learners' textbook ratios and enhancing the quality of learning. Laboratory materials and equipment were procured during this period to support a total of 3,838 learners (1,013 girls) pursuing various STEM-related subjects in the Kenya Certificate of Secondary Education (KCSE) national examination which took place between March and April 2021. UNICEF also supported education expansion access through the construction of 16 classrooms at primary schools in Kakuma and renovated over 20 classrooms in the camp and host community of Turkana west that improved learning space for children and improved preparedness of schools for the re-opening benefiting over 6,000 (41% girls) children. In Dadaab, 5,540 solar-powered radios have been received benefitting 28 schools in the camps and 35 in the host community that will support most vulnerable learners to follow the radios lessons, attend to their home while at the same time lightening the entire household. UNICEF supported the printing and distribution of assessment materials as a measure to gauge the needs of the learners, especially after the long school break. 41,572 (18,180 girls) learners benefitted from this activity when undertaking the Kenya National Examinations Council (KNEC) assessments for Grades 1-4 and the end term examinations for Pre-primary 1,2, Grades 1-4 and Class 5-8. 1,140 (485 girls) children and adolescents aged between 10 and 17 years have enrolled in the Accelerated Education Programme (AEP). While supporting the quality of education, 31(5 females) teachers were trained on competency-based curriculum and pedagogy in order to increase capacity to the delivery NFE and CBC curriculum and 27(9 females) Board of Management trained on conflict resolution and management in and out of schools, mobilization, and learner's welfare support. As part of the preparation for schools re-opening, UNICEF has contributed 300 (20-liter Jerricans) for handwashing stations to 28 learning institutions in the refugee camps benefiting over 50,000 learners. This formed part of the other resources required for safe reopening as stipulated in MoE COVID-19 guidelines.

WASH

Between January and June 2021, UNICEF has reached a total of 2,685,751 people (684,892 men, 641,270 boys, 706,079 women and 653,510 girls) with access to safe water for drinking, cooking, and personal hygiene, as well as COVID-19 hygiene, messaging. Provision of WASH supplies including Jerry cans, soap, buckets was done in Garissa, Isiolo, Marsabit and Tana River and soap to Mandera Counties. In Mandera County, 3,825 households 19,125 people (9,753 female and 9,371 male) reached with soap for handwashing through the distribution of soap to vulnerable households by the water department. In Garissa County, 13,715 people (7,330 male and 6385 female) were reached with WASH supplies including Jerry cans, soap, and buckets. Provision of WASH supplies in Wajir, Diff area to support Health and Socio-economic impact of Covid-19 to vulnerable border communities targeting 11,000 households in total 55,000 people (Women 14,867, Girls 13,184, Men 14,284, Boys 12,667) with WASH/COVID-19 supplies, hand washing facilities, rehabilitation of 18Km pipeline to ensure communities in Diff have access to safe and adequate water supply, COVID-19 messaging to community and in schools and Risk Communication and Community Engagement (RCCE). In Garissa County, 23,200 people have been reached with critical WASH supplies including Jerry cans, soap, buckets and household water treatment chemicals. UNICEF has also supported the repair of the Daley water supply system benefit about 6,200 people (3,162 female and 3,038 male) in Garissa County one health facility is accessing water from the repaired water supply. School children with 332 school children (222 boys and 110 girls) reached with improved access to safe water. In Turkana County, UNICEF has reached 500 households, 30,000 people (Women 8,109, Girls 7,191, Men 7,791, Boys 6,909) affected by floods in Baringo County through WASH Non-Food Items (NFIs) including 1,000 – 20L jerricans, 1,000 – 10 Litres buckets and 8000 pieces of bar soap. UNICEF is leading the coordination of floods response in the Western Hub and in partnership with KRCS and World Vision, is also providing NFI response to displaced households. UNICEF, Nakuru Water and Sanitation Services Company (NAWASCO) and the Department of Health Nakuru County is implementing a Sweden-funded project to improve access to safe water for communities living

in the five low-income areas of Nakuru County. This project is meant to enhance COVID-19 prevention measures through the construction of 6.7 KM water network that will increase water supply to 5 water kiosks constructed in the communities and 25 communal yard taps reaching 42,278 people. UNICEF has also constructed 21 handwashing basins at 5 health facilities to ensure patients and staff including all visitors at the health facilities adhere to COVID-19 measures. UNICEF is also constructing 10 drinking water points reaching 8,055 staff and patients with practice safe handwashing for COVID-19 prevention in 5 health facilities, hygiene promotion reaching 50,033 people with critical COVID-19 prevention messages on safe handwashing with soap, wearing face masks and social distancing and strengthening coordination of the WASH Infection Prevention and Control (IPC) sector response to COVID-19 pandemic in Nakuru County. Under Sanitation for Universal Health Coverage (S-UHC), a Japan Government funded project which UNICEF is implementing with the County Governments and implementing partners in 9 Counties (Homa bay, Turkana, Baringo, West Pokot, Samburu, Kilifi, Kwale, Narok and Marsabit Counties). COVID-19 protection measures are being mainstreamed in this sanitation project to protect frontline health workers. By end of May 2021 total of 9,530 frontline health workers (4,670 men and 4,860 women) had received basic PPEs. Handwashing messages are being emphasized for COVID-19 prevention where over 254,100 (54,972 men, 51,612 women, 77,365 boys and 70,151 girls). A total of 2,136,796 people (Women 1,089,766, Girls 512,190, Men 554,926, and Boys 492,104) has received COVID-19 prevention messages. The project is ongoing until November 2021. In Turkana County, through the KOICA project, UNICEF is improving community Resilience to climate change through improved WASH services. A total of 53 boreholes have successfully been completed out of which 42 boreholes have been equipped with solar and hand-pumps, resulting in improved access to safe drinking water to a total of 76,920 people (15624 females, 16641 males, 23419 boys and 21236 girls). COVID-19 messaging is being integrated into Community-Led Total Sanitation (CLTS) activities under the S-UHC program and KOICA program in 4 sub-counties: – targeted by the ongoing mass media campaign. A total of 274 UNICEF Family kits were distributed in Kisumu County and 120 in Garissa County, reaching a total of 1,970 beneficiaries (533 women, 472 girls, and 511 men and 454 boys). UNICEF has continued to support WASH sector coordination fora at national and county levels. For the next six months, UNICEF is focusing on the implementation of access to safe water, hygiene and COVID-19 messaging in Wajir county and in the informal settlements in Nakuru and Nairobi counties as well as strengthening WASH sector coordination at the national and county level.

HIV/AIDS

To respond to the high Mother to Child Transmission (MTCT) rate in Turkana between 1st Jan to 30th June 2021, UNICEF supported procurement of 350 Early Infant Diagnosis Point of Care HIV testing reagents for children born to HIV positive mothers in Turkana County, reaching 112 HIV exposed infants (0-18 months). Community PMTCT has also been earmarked as a critical intervention towards increasing the demand for HIV services among children, pregnant and breastfeeding women living with HIV. In the second half of the year, the HIV section within UNICEF plans to support the orientation of community-based Prevention of Mother to Child Transmission (PMTCT) model/orientation package which is a cascaded approach that provides strategies to empower the individuals, families, and communities including those living in humanitarian/ASAL counties. Specifically, UNICEF will support the orientation of the county and sub-county health management teams of Turkana, Garissa, West Pokot, Lamu, Tana-river, Wajir and Mandera counties. It is expected that 100% of the focal points (all sub-counties) within the mentioned counties will be reached through the UNICEF-MOH partnership. In addition to this, in May 2021, UNICEF together with other UN agencies begun the process of procuring Dolutegravir, on behalf of the Government of Kenya as an emergency stock. Dolutegravir is a newer child-friendly anti-retroviral formulation, that leads to better health outcomes in people living with HIV.

Social Protection

UNICEF is supporting current existing Social Protection mechanism including existing data management instruments such as the Single Registry and the Management Information Systems, explore linkages and referral mechanisms within the National Safety Net Programme (NSNP) and the wider Social Protection landscape including complementary programmes and the enhancing shock-adaptive social protection systems through the operationalization of the existing shock-responsive pillars of the government-led social protection programme. Technical support is being provided for vertical expansion to all the 3,061 households benefiting from the Persons with Severe Disabilities cash transfers programme under the NSNP. UNICEF is advocating for utilization and adequate sustainable funding of the Kenya National Hunger Safety Net Programme (HSNP) scale-up mechanism to respond to shocks beyond the drought, such as the locust invasion and COVID-19. UNICEF and Foreign, Commonwealth and Development Office (FCDO) engineered the creation of Sectorial Group for Social Protection (SGSP) with UNICEF elected as chair and major Social Protection actors. (E.g., SIDA, EU, USAID, Japan, World Bank, WFP, ILO, FAO). UNICEF regularly collaborates with Cash Working Group for humanitarian-development nexus and shock responsiveness. A Universal Child Benefit (UCB) pilot is being designed in close collaboration with the government to target around 8,000 children in three sub-counties for 12 months. This pilot aims at both cushioning children and their families from the long-term adverse effects of the

COVID-19 pandemics and at generating evidence to support the introduction (in both the design and advocacy aspects) of a long-term, regular UCB in Kenya. UNICEF established a formal partnership with the National Hospital Insurance Fund (NHIF), which aims to expand health insurance coverage for most vulnerable groups including COVID-19 heavily affected, and innovating a new NHIF product to complement the community-based health insurance (CBHI) in Garissa Primary Health Care pilot. In the next six months, UNICEF is exploring how to best implement integrated Social Protection measures as part of the Economic Recovery Strategy (ERS) of the Government and hence to ensure an inclusive recovery.

Communications for Development (C4D) and Accountability to Affected Population

In the last 6 months, the greater focus of C4D in Emergencies technical and financial support was invested in COVID-19 prevention, focusing on the key prevention practices of wearing of masks correctly while in public, observing social distancing and frequent handwashing with soap. This provided the foundation upon which the Back to School Community Engagement campaign launched in 2020 was continued till March 2021. This integrated messages on Violence Against Children and Psycho-Social Support for children in school. To create demand for and engage the target publics across all the 47 counties, a multimedia campaign on vaccination, *Pata Chanjo ya Tumaini*, mooted in February was launched in May and will run till October 2021. The campaign, consisting of a campaign guide for radio presenters; radio call-in shows; radio interviews; radio testimonials; radio spots; dramas and social media cue cards, is implemented in partnership with the Centre for Behaviour Change and Communication (CBCC). In its first phase, 5 million people have been reached, culminating in the formation of county-based radio listening groups linked to the various community radio stations, through which myths on vaccination were collected, concerns addressed and timely feedback on issues provided. The radio listening groups are proving effective not only as an innovative community engagement platform but as a mechanism for nurturing social accountability. To respond to the health and socio-economic impact of COVID-19 in Wajir County, a partnership with the County Government of Wajir to implement COVID-19 sensitive water, sanitation and hygiene, risk communication and community engagement interventions has been established. A local organization, the Waso Resource Development Agency, WARDA has been engaged, to among others, lead and facilitate COVID-19 risk communication and community engagement for the at-risk population in Diff and Dadajabulla cross-border areas and to develop the capacity of county health staff in behavior change messaging on social media. A TOR to conduct a Knowledge, Attitude, Beliefs and Practice (KABP) survey has been finalized and the recruitment of a consultant to support the evidence basis for RCCE, including the institutional capacity to implement cross-border COVID-19 sensitive interventions is underway. Since the advent of COVID-19, cholera cases have decreased partly due to the increased hygiene measures and practices. Following confirmed 5 cases of cholera in Garissa county (Dadaab Refugee camp, within Dagahaley), cholera flipcharts were disbursed to support risk communication and community engagement activities in the affected camp. The sub-county teams were able to undertake house-to-house hygiene promotion and community engagement within Blocks DC and B2, bring the outbreak to a halt. A Polio mass immunization campaign with supplementary immunization activities (SIAs), was undertaken in 13 counties, successfully achieving over 90 percent coverage. Schools, house to house, organized community gatherings (Barazas), and existing religious and social gatherings (churches, mosques, and markets) were effective points of community mobilization and education. A total of 444 community meetings were held in all counties to discuss the campaign, the importance of vaccination, and community leadership support during the campaign. Radio engagement as a strategy was geared at keeping polio on the national agenda, through calls to action and date notification. Activities undertaken included jingles, live reporting, talk shows in community radios, radio spots and key experts' interviews. This led to the airing of 859 Radio jingles, and the hosting of 36 Experts who discussed various aspects of polio. An estimated 4.8 million people were reached through radio engagement. Further, a total of 36 Advocacy stakeholder meetings at county and sub-county levels were held before the campaign, drawing 1627 participants into creating strong ownership and buy-in and supporting the campaign. To ensure campaign visibility across the 13 counties, IEC materials were produced including posters (46,500), banners (98), mobilizer aprons (2978), identification badges (2944) and mobilizers guide (3889).

Humanitarian Leadership, Coordination and Strategy

The Government of Kenya leads disaster preparedness and response while the Kenya Red Cross Society is the first line of emergency response in support of the Government and has substantial presence and activities throughout the country. The National Drought Management Agency (NDMA) which was established in 2013 guides disaster management and response at the national level and the National Disaster Operations Center provides critical support to rapid onset emergencies. There are also disaster committees in the 23 arid and semi-arid counties. Kenya does not yet have an official policy and legal framework to guide disaster management as the draft disaster risk management policy is still going through the approval process by the Parliament. Transfer of the Disaster management Functions between the National and County Governments has been legalized, providing clarity on the responsibilities of the county

and national government in Disaster Risk Management. The Ending Drought Emergency framework is the main policy framework which has six pillars including pillars on sustainable livelihoods (co-chaired by Ministry of Agriculture and Livestock and Fisheries and FAO and which works on promoting sustainable livelihoods to mitigate the impact of shocks); drought risk management (co-chaired by the Ministry of Devolution and Planning and WFP and which works to promote resilience through early action and better preparedness to predicted crises); and human capacity (co-chaired by the Ministry of Education, Science and Technology and UNICEF and which works on developing the resources and capabilities for an integrated provision of basic social services including health, nutrition, wash and education). On the ongoing drought, UNICEF is leading sector preparedness through our sector lead role, as well as support to county-level preparedness and response the zonal offices. UNICEF is also supporting the Resident Coordinator's Office (RCO) in advocating for the DRR and resilience agenda on drought and floods response through the UNCT. UN agencies and NGOs (both national and international) have a program and operational presence all over the country in support of both development and emergency response. The Resident Coordinator's Office and UNOCHA are leading the coordination of humanitarian action for UN and partners support to the government response to the ongoing triple threats of COVID-19 pandemic, flooding and locust invasion in Kenya and support to Government structures to strengthen national disaster management capabilities to improve resilience and disaster risk reduction. UNICEF actively participates in interagency coordination mechanisms, including the Kenya Humanitarian Partnership Team (KHPT) forum and Kenya Red Cross Partners' forum and is supporting the county hub coordination structure by leading the Kisumu and Garissa hubs through the UNICEF zonal offices. UNICEF is leading the Nutrition, Education and WASH sectors and the Child Protection sub-sector, as well as the Education sector with Save the Children. UNICEF provides technical and financial support to line ministries at the national and county level to support sector coordination and leadership. UNICEF-led sectors are all part of the Inter-Sector Working Group (ISWG) led by UNOCHA at the national level. The review of the Refugee Act 2006 and the finalization of a National Refugee Policy is ongoing with the support of members of the Kenya Parliamentary Human Rights Association (KEPHRA), UNHCR and partners. A roadmap for the Dadaab refugee camp, which has been expanded to include the Kakuma refugee camp based on the 2016 and 2019 solutions strategies is being implemented until June 2022. In December 2020, UNICEF formalized the partnership with UNHCR in Kenya through the signing of a Letter of Understanding.

<https://www.unicef.org/kenya/press-releases/over-1-million-covid-19-vaccine-doses-arrive-nairobi-via-covax-facility>
<https://www.unicef.org/kenya/stories/covid-19-vaccinations-begin-kenyan-health-workers>
<https://www.unicef.org/kenya/stories/child-nutrition-key-accelerating-development>
<https://www.unicef.org/kenya/stories/getting-jab-routine-immunisation-during-covid-19-pandemic>
<https://www.unicef.org/kenya/stories/mr-golden-sun-solar-powered-radios-support-remote-learning>
<https://www.unicef.org/kenya/stories/vaccine-hope-teachers-and-parents-get-covid-19-jab>
<https://www.unicef.org/kenya/press-releases/innovative-cash-transfer-and-nutrition-programme-launched-reduce-child-poverty-five>
<https://www.unicef.org/kenya/press-releases/japan-supports-kenyas-safe-distribution-covid-19-vaccines-through-grant-unicef>
<https://www.unicef.org/kenya/press-releases/urgent-immunisation-campaign-launched-13-counties-tackle-polio-outbreak>
<https://www.unicef.org/kenya/press-releases/almost-four-million-children-be-vaccinated-against-measles-and-rubella-22-counties>
<https://www.unicef.org/kenya/stories/cash-transfers-help-children-achieve-their-potential-during-covid-19>

Next SitRep: 31 December 2021

UNICEF Kenya HAC appeal: <https://www.unicef.org/appeals/kenya.html>

UNICEF Kenya Crisis Facebook: <https://www.facebook.com/UNICEFKenya/>

UNICEF Kenya Emergency Page: <https://www.unicef.org/kenya/emergency>

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Annex A

Summary of Programme Results

Sector Indicator Disaggregation		Total needs	UNICEF and IPs Response			Cluster/Sector Response		
			2021 target	Total results	Change* ▲▼	2021 target	Total results	Change* ▲▼
Health								
children and women accessing primary health care in UNICEF-supported facilities	girls	400,000	266,662	25,847	N/A			
	boys			24,833	N/A			
	women			1,434	N/A			
Nutrition								
children aged 6 to 59 months with severe acute malnutrition admitted for treatment	girls	147,000	96,751	15,055		147,000	15,055	N/A
	boys			13,849			13,849	N/A
Child Protection**								
children and caregivers accessing mental health and psychosocial support	girls	36,664	36,664	4,496	N/A	36,664	4,496	N/A
	boys			4,254	N/A		4,254	N/A
	women			706	N/A		706	N/A
Education								
children accessing formal or non-formal education, including early learning	refugee girls	12,100,000	589,434	45,2638	N/A	12,100,000	45,2638	N/A
	host girls				N/A			N/A
	refugee boys			61,407	N/A		61,407	N/A
	host boys				N/A			N/A
WASH								
people accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene	girls	1,800,000	250,000	31,370	N/A	1,800,000		N/A
	boys			33,155	N/A			N/A
	women			27,051	N/A			N/A
	men			27,620	N/A			N/A
C4D								
people reached with messages on access to services	girls	1,623,062	1,623,062	5,000,000***	N/A	1,623,062	5,000,000	N/A
	boys				N/A			N/A
	women				N/A			N/A
	men				N/A			N/A
Social Protection								
households benefiting from new or additional social transfers from governments with UNICEF technical assistance			10,000	0****	N/A			
HIV/AIDS								
pregnant and lactating women living with HIV receiving antiretroviral therapy	Women		2,000	112	N/A			

* Change since last report.

** Total reach is 12,218. (including men and those callers to Childline Kenya whose Gender and/or Age was not recorded).

*** Disaggregated data is not available. This is being collated. Target is over-achieved due to wide radio network coverage through community radio FM stations and listening groups across 43 counties.

**** Cash transfer payment process is ongoing. Results to be reported in the next sitrep.

Annex B

Funding Status*

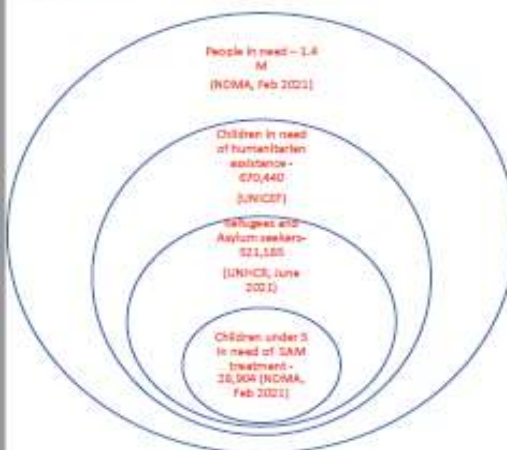
Sector	Requirements	Funds available		Funding gap	
		Humanitarian resources received in 2021	Resources available from 2020 (Carry-over)	\$	%
Health	5,100,000	2,982,872	462,428	1,654,700	32
Nutrition	9,240,154	685,366	1,010,596	7,544,192	82
Child Protection	2,750,000	522,729	356,678	1,870,593	68
Education	10,789,118	576,000	1,280,440	8,932,678	83
WASH	3,850,000	66,900	3,180,915	602,185	16
Social Protection	500,000	0	317,757	182,243	36
HIV/AIDS	220,000	0	0	220,000	100
Cluster Coordination	250,000	0	0	250,000	100
Total	32,699,272	4,833,866	6,608,814	21,256,592	65

* As defined in Humanitarian Appeal of 1/1/2021 for a period of 12 months

KENYA Humanitarian Overview – June 2021 unicef

Affected Counties and People in need (Source: NDMA, KFSSG, FEWS NET)

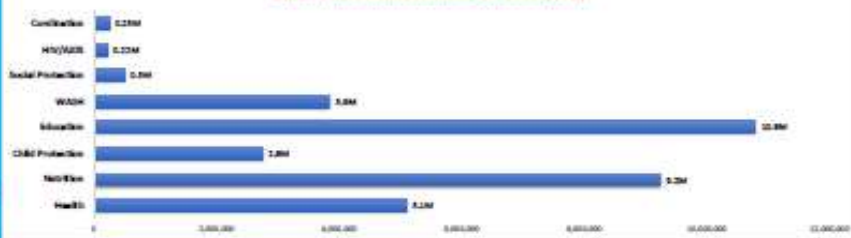
Key Figures



Funding Status (US\$)

32.7 M US\$ funding Requirements
4.8 M US\$ funding Received in 2021

UNICEF Funding Requirements per Sectors (US\$)



UNICEF Funding Received per Sectors (US\$)



Key Figures



Food Security Situation Update

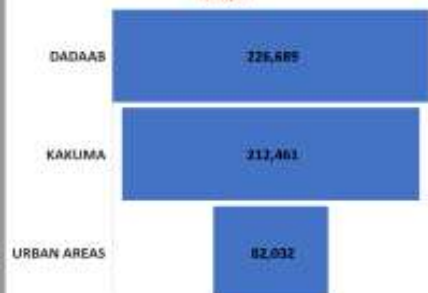
- Kenya is facing a worsening drought situation due to the cumulative impacts of two consequent failed rains season, with all ASAL counties receiving less than 50% of expected rainfall. Consequently, over 1.4M people are facing food insecurity in Kenya, and the number is expected to go up to 2M by end of the year (NDMA).
- UNICEF and other partners updated and activated the multi sectoral response plans to mitigate the effects of drought and ensure early identification and treatment of children with acute malnutrition. Integrated nutrition SMART surveys are planned in several arid counties
- A total of 28,904 (15,055 girls and 13,849 boys) malnourished children were admitted for treatment of Severe Acute Malnutrition (SAM) between January to May 2021 in arid, semi-arid (ASAL) and urban areas. The number admitted is higher compared to the same period last year where 23,880 (12,209 girls and 13,849 boys) children were admitted between January and May 2020 mainly attributed to the substantial interruption of health and nutrition services due to the COVID-19 in the early months of the pandemic.

UNICEF RESPONSE

- UNICEF supports implementation of Family Mid-Upper Arm Circumference (MUAC) as part of strengthening screening and self-referrals for treatment of acute malnutrition.
- UNICEF advocates for utilization and adequate sustainable funding of the Kenya National Hunger Safety Net Programme (HSNP) scale-up mechanism to respond to shocks beyond the drought, such as the locust invasion and COVID-19.
- UNICEF supports the procurement and distribution of Ready-to-use therapeutic food (RUTF) across health facilities in 23 ASAL counties and Nairobi urban informal settlements and refugee camps through the Kenya Essential Medical Supplies Authority (KEMSA).
- UNICEF supports coordination at the National and county level and has led in developing, disseminating and resource mobilization for the sector preparedness and response plans.
- UNICEF enhances capacities and pre-positions critical supplies to facilitate the delivery of lifesaving health interventions to unreached children. Capacities for emergency water, sanitation and hygiene (WASH) preparedness and response are also being strengthened through sector coordination and strategic partnerships to facilitate rapid response to emergency needs.
- UNICEF supports policy development to strengthen the enabling environment for a shock-responsive social protection system.

Refugee Situation Overview as of 30th June 2021 (Source: UNHCR Kenya, Ministry of Interior - Government of Kenya)

Refugee and Asylum-Seekers Host Locations in Kenya

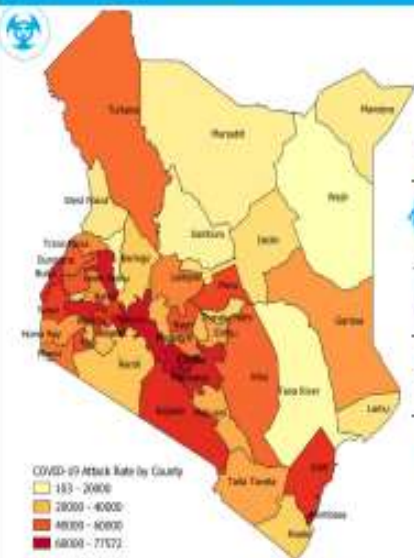


Refugee Situation Update

- As of 30th June 2021, Kenya hosts a total 521,185 Refugees and Asylum Seekers in Kenya (UNHCR Kenya). 84 percent live in camps while 16 percent live in Urban areas.
- On 23rd March 2021, the government of Kenya announced the closure of refugee camps by June 2022. The Government of Kenya, UNHCR and partners have developed a solutions roadmap for refugees that is voluntary, durable, safe, sustainable and orderly in accordance with Kenya's national and international obligations.

UNICEF RESPONSE

- UNICEF provides technical support and resources to strengthen advocacy and partnerships for protecting the rights of refugee children. This includes supporting an enabling environment and advocacy for education in emergencies; influencing resource allocation by county governments in disaster-prone areas; and strengthening refugee programming in line with the Global Compact for Refugees and the Comprehensive Refugee Response Framework.
- UNICEF provides child protection support and referral to case management services to children in the refugee context.



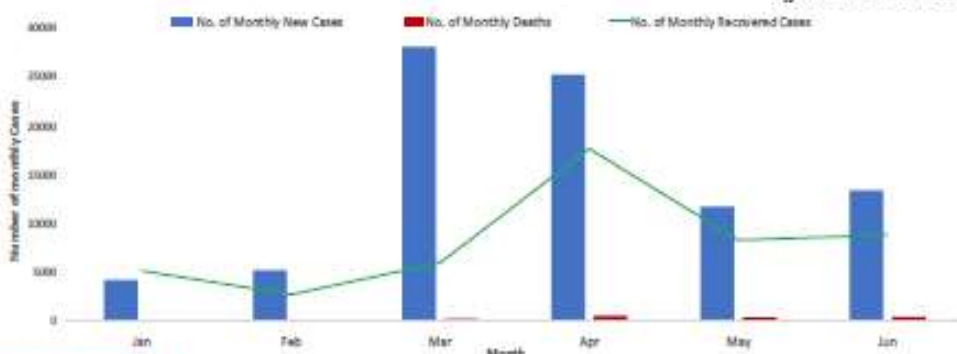
Key Figures

-  184,161 # of Cumulative case Cases
-  1,008,120 Vaccines administered
-  2% CFR
-  3,634 # of deaths

COVID-19 Situation Update

- As of 30th June 2021, 184,161 cases were confirmed of which 123,684 people have recovered and 3,634 deaths reported.
- One hundred and seventy-eight thousand and thirty-six – 178,036 (97%) of the 184,161 confirmed cases are local transmissions.
- The City of Nairobi and Mombasa County have the highest attack rates of COVID-19 at 1,764.2 and 1,052.4 per 100,000 population respectively when compared to 387.2/100,000 for the whole country and need enhanced interventions. In addition, the COVID-19 outbreak has so far spread to 100% of the counties in the country.
- One hundred and eleven thousand three hundred and seventy-two (80%) are males and 72,789 (40%) are females. 49,534 (27%), of the cases are in the age group of 30-39 years
- On 30th of June, 6,357 samples were tested across various laboratories of which Five hundred and fifty-eight (558) samples turned positive for COVID-19. A total of 1,959,701 cumulative tests have so far been conducted.
- As of 17th of June, increased mitigation and containment measures were introduced in western Kenya.
- Kenya launched the COVID-19 vaccination campaign on 5th March 2021 and Vaccination is ongoing in all 47 counties. As of 30th June 2021, a total of 1,008,120 persons were vaccinated with the 1st dose and 370,465 persons with the 2nd dose, targeting frontline workers, teachers, security officers and those above 58 years of age.

Epidemiological Curve for COVID-19 Outbreak since January- June 2021



UNICEF COVID-19 RESPONSE

WASH

- Provision WASH supplies
- Hygiene promotion
- WASH sector coordination

HEALTH

- Provision of essential health services in the context of COVID-19.
- UNICEF provides continuous technical support to the National COVID Taskforce through the taskforce and various technical sub-committees.

NUTRITION

- UNICEF has continued to support the Ready to Use Therapeutic Feeding (RUTF)
- UNICEF through partnership with Kenya Red Cross and support from other partners has supported Ministry of Health (MoH) to intensify mass screening activities for timely identification, referral and treatment of children with acute malnutrition.

EDUCATION

- Hygiene awareness in schools
- Sensitization on COVID-19 protocols in schools
- UNICEF provides support to the Ministry of Education (MoE) efforts to safely reopen schools by helping draft criteria to assess the readiness of WASH facilities and procurement of face masks for the most vulnerable children that will be delivered to the learners when schools reopen.

CHILD PROTECTION

- UNICEF supports child protection support services, children, parents and caregivers were reached with Mental Health and Psychosocial Support Services (MHPSS)
- UNICEF has been providing child protection support and referral to case management services for children in the refugee context.
- UNICEF has continued to collaborate with Childline Kenya to provide free tele-counselling and referral support to children surviving and at risk of violence, exploitation and abuse.

SOCIAL PROTECTION

- UNICEF established a partnership with the National Hospital Insurance Fund to increase health coverage for vulnerable groups, also addressing issues beyond COVID-19.
- UNICEF supported provisions of new or additional social assistance measures provided by governments to respond to COVID-19.

COORDINATION & OPERATIONAL SUPPORT

- UNICEF NCO Logistics has supported the Ministry of Health (MoH) in clearance and delivery to MoH Central warehouse of AstraZeneca COVID-19 Vaccines under the COVAX facility.
- UNICEF provides technical and financial support to line ministries at national and county level to support sector coordination and leadership

COMMUNICATION FOR DEVELOPMENT & ADVOCACY

- Support to development and dissemination of Information, Education and Communication (IEC) materials
- Support for Community mobilization.
- Support to development and dissemination of Public Service Announcements (PSAs)

Floods Situation Overview as of 30th June 2021 (Source: Kenya Red Cross Society)

Key Figures



55,002 # Population displaced

Floods Situation Update

- A total of 55,002 people were displaced by floods in seven counties that are around water bodies in Western Kenya, the Rift Valley and in Nairobi informal settlements by June 2021 (KRCSS).

UNICEF RESPONSE

- UNICEF's flood response is focused on WASH, Nutrition, HIV and AIDS, Health, Shelter, Child Protection and provision of Emergency Family Kits in high-risk counties.
- UNICEF supports coordination at National and county level and has led in developing, disseminating and resource mobilization for the floods sector preparedness and response plans.