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Due to intense drought, most families have to travel long distances in search of water, in Kenya.

Reporting Period: 1 April to 31 May 2022

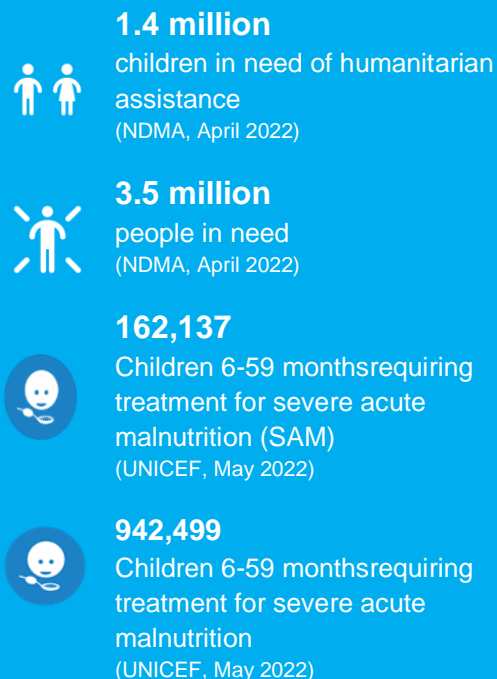
Highlights

- Kenya is facing a severe drought due to the cumulative impacts of four consecutive failed rain seasons a strong probability of a fifth consecutive below-average rainy season during the October-December 2022 short rains.
- Consequently, over 3.5 million people are facing food insecurity in Kenya February 2022 an increase from 3.1 million in December 2021 after the mid-short rains season assessment.
- A total of 26,963 children were admitted for treatment of severe acute malnutrition during the reporting period along the targeted drought affected counties.
- A total of 380,384 people comprising 62,968 men, 169,620 women, 47,796 school children (23,420 boys and 24,375 girls) provided with access to safe water during the reporting period through the rehabilitation of 94 non-functional boreholes in 6 counties.
- A total of 461,954 people, (226,357 men and 235,597 women) were reached with WASH supplies (Jerry cans, buckets, soap and Aqua tabs) accompanied with hygiene messages, household water treatment and safe storage
- UNICEF in partnership with Kenya Red Cross Society (KRCS) has reached a total 152,483 people (Girls 58,865, Boys 45,498, Men 18,188 and Women 27,932 - including 2,550 pregnant and lactating mothers) with critical lifesaving integrated outreach services
- UNICEF's drought emergency funding requirements to respond to life-saving health, nutrition, WASH and education over the period April - December, 2022 is **US\$ 67.8 million** with funding gap of 88 per cent.

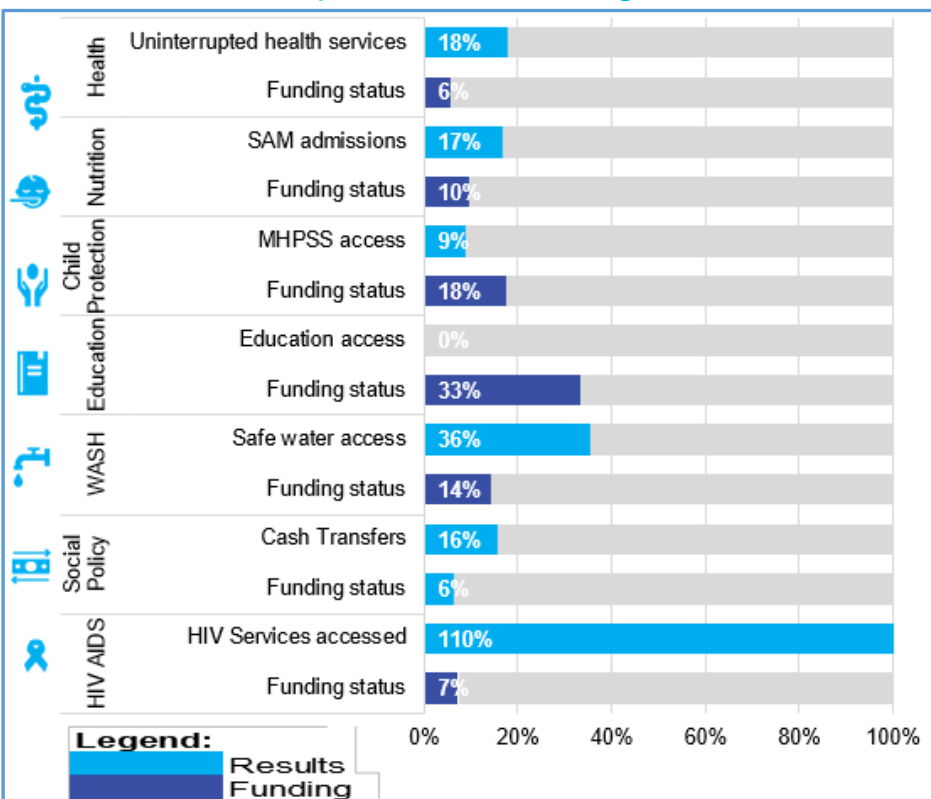
Kenya Drought Situation Report No. 1

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for every child

Situation in Numbers

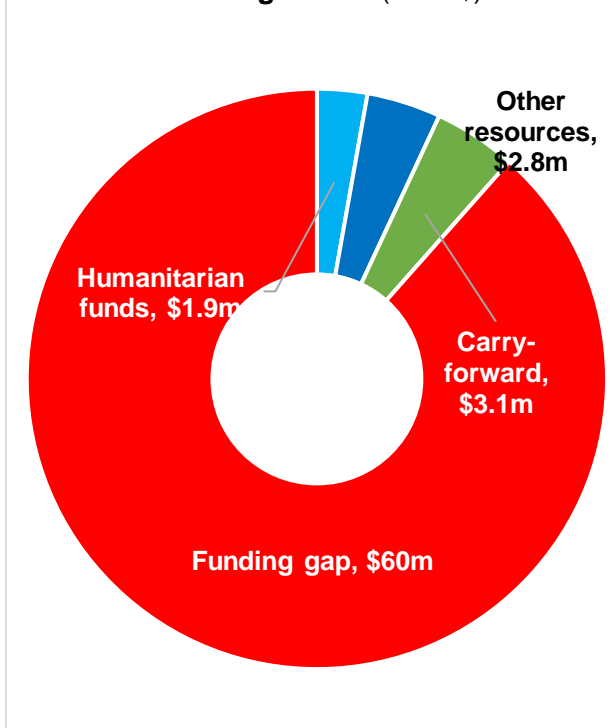


UNICEF's Response and Funding Status



UNICEF Appeal 1 April – 31 December 2022 US\$ 180 million

Funding Status (in US\$)



Funding Overview and Partnerships

UNICEF is appealing for **USD 67.8 million** to sustain the provision of life-saving services for the drought affected populations in Kenya over the period of April – December 2022, of which **USD\$7.8 million (12 per cent)** has been received leaving a funding gap of **USD\$60 million (or 88 per cent)**.

UNICEF has intensified her resource mobilization efforts so as to minimize the gap to be able to respond effectively to the needs of the drought affected boys and girls, men and women in target counties.

Overall, during the FY 2021/22, the government of Kenya has allocated a budget of **Ksh 15.63 billion (Approx USD\$135 million)** amounting to 1 per cent of the total government budget for emergency interventions under the coordination of the **Ministry of Interior** and the National Drought Management Authority (NDMA) which is leading operational coordination.

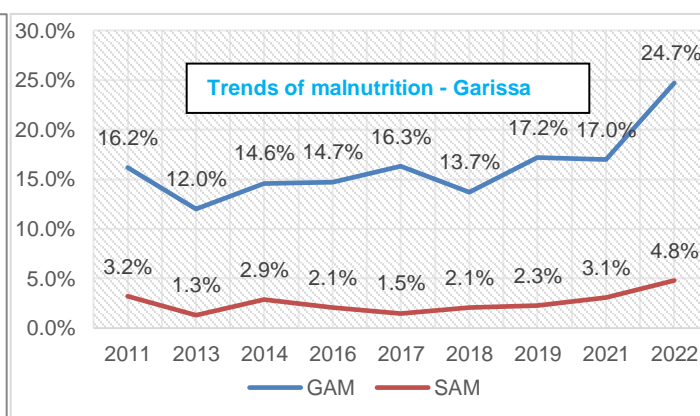
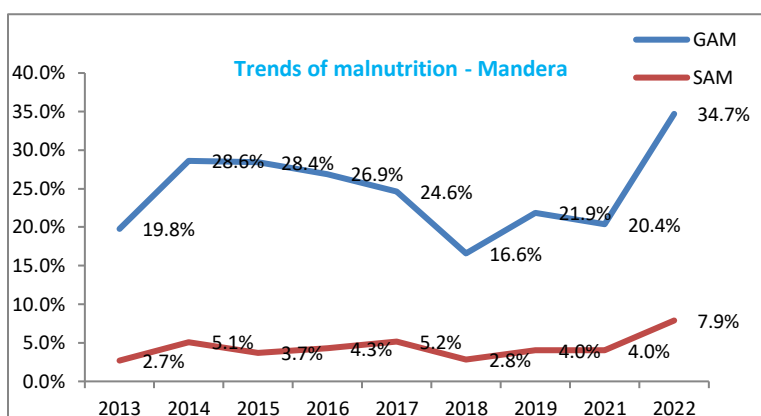
The European Commission/ECHO, USAID, Foreign, Commonwealth & Development Office (FCDO), Swedish International Development Cooperation Agency (SIDA), the Government of Japan, Japan Committee for UNICEF and UNOCHA (CERF) have generously contributed to UNICEF Kenya's humanitarian response against the drought appeal. Where is FCDO and USAID in this??

UNICEF continues to support the Government of Kenya at both the National and County level, civil society organizations (CSOs) and other humanitarian partners to respond to the drought affected population.

Situation Overview & Humanitarian Needs

According to NDMA, Kenya is facing a severe drought situation due to the cumulative impacts of four consecutive failed rain seasons with all Arid and Semi-Arid Lands (ASAL) counties having received below average rainfall. From March 1 to May 20, seasonal cumulative rainfall is on the whole less than 85 percent of the 1981-2010 average across much of Kenya. Consequently, over 3.5 million people are facing food insecurity in Kenya February 2022, up from 3.1 million in December 2021 after the Short Rains Assessment. According to FEWS NET there is a strong probability of a fifth consecutive below-average rainy season during the October-December 2022 short rains¹.

The SMART surveys carried out over the January – March 2022 period show a marked deterioration of the malnutrition situation compared to previous years in most drought prone ASAL counties (see trends in table below) with Garissa and Mandera recording the highest GAM rates on record: (Mandera GAM – 34.7% SAM – 7.9%; Garissa GAM – 24.7% SAM - 4.8%; Isiolo GAM – 17.8% SAM -1.7%; Tana River GAM – 14.3% SAM – 2.8% and Wajir GAM – 21.7% SAM – 4.3%).



From the Long Rains Assessment, August 2021 to the Short Rains Assessment, February 2022 the current caseload of children 6-59 months acutely malnourished and in need of treatment has increased from 523,354 to 656,657 and the SAM caseload has increased from 111,141 to 159,653. The deteriorating situation is mainly attributed to the worsening food insecurity situation, poor WASH, below average milk production and increased morbidity. The coverage for treatment programme is low with counties including Samburu, Baringo, Garissa, Kwale, Lamu, and Narok registering proxy programme coverage of below 40%.

In most of the pastoral areas, the return trekking distances between water and pasture increased by 120–150 per cent with an average distance of 20–35 km resulting from poor recharge and drying up of most surface water sources. In

¹ FEWS NET, May 2022

some areas over 90 per cent of open water sources have dried up and the remaining are expected to last between 1–2 months compared to 3–4 months normally. As the drought crisis deepens, water sources are expected to last for less than a month in pastoral areas of Mandera, Marsabit, Turkana and Isiolo. In most of the counties affected by drought, mechanized and non-mechanized water sources become non-functional due to the draw down on the water tables, pumping system failures and faults in the infrastructure.

The on-going data collection exercise by UNICEF and partners has, in recent months, identified 884 non-functional boreholes which is about 14% of total and this number is expected to increase significantly as further data from the field is received. In total, **515** are in Priority 1 counties (Turkana, Marsabit, Mandera, Wajir and Garissa) and **369** are in Priority 2 counties (Isiolo, Samburu, Baringo, West Pokot, Kajiado and Kitui). The rehabilitation of these boreholes will provide access to safe water to about 2 million people and their live-stock. Increased morbidity is being reported across the affected counties with URTIs recording the highest caseloads compared to diarrhoea and malaria having a significant impact on nutrition status.

Table: Drought Response Plan Sector PiN, Sector Target and UNICEF Target

Sector	PiN	Kenys Flash Appeal Sector Target	UNICEF Target
Health	2,002,903	1,221,487	855,036
HIV/AIDS	301,200	301,000	101,000
Nutrition	213,052	162,137	162,137
Child Protection	397,673	214,507	41,820
Education	1,266,249	440,855	176,342
WASH	3,300,496	1,537,894	936,261
Social Protection	2,812,840	1,583,639	103,250
C4D/SBC & AAP	3,481,000	0	3,481,000

A total of 550,817 refugees and asylum seekers continue to live in Kenya, 57% of whom are from Somalia, 29.0% from South Sudan, 6.4% from Congo and 4.3% from Ethiopia and the remaining 3.2% from other nationalities. Continuing instability in the region may lead to more inflows of people into Kenya further constraining humanitarian agencies capacities to respond to multiple emergencies: COVID19, drought, communal conflict fuelled by competition over resources, diseases outbreaks such as measles and yellow fever.

Humanitarian Leadership, Coordination and Strategy

The Ministry of Interior is responsible for the overall coordination of the Government of Kenya's drought response with the National Drought Management Authority (NDMA) leading the operational multi-sectoral coordination of the drought response at the national level and across the 23 arid and semi-arid counties. UNICEF is supporting the government to co-lead the national sector response through our sector lead role in WASH, Education, Nutrition and Child Protection, as well as support to county-level response through the zonal offices in Lodwar and Garissa. UNICEF provides technical and financial support to line ministries at national and county level to support sector coordination and leadership. UNICEF co-led sectors are all part of the Inter-Sector Working Group (ISWG) led by UNOCHA at the national level.

The Resident Coordinator's Office and UNOCHA are leading the coordination of humanitarian action for UN and partners support to the government's response. UNICEF actively participates in interagency coordination mechanisms, including the Kenya Humanitarian Partnership Team (KHPT).

UNICEF has supported the Yellow Fever Outbreak response with MoH and WHO sector lead providing the strategic technical leadership in the coordination mechanisms in Isiolo and Garissa Counties. Additional support has been provided in the development of an application to the International Coordinating Group (ICG) on Vaccine Provision for Yellow Fever Vaccines and funds for operational cost of conducting the response vaccination campaign. UNICEF is on standby to receive Yellow Fever Vaccines once ICG approval is made and support in-country distribution of the vaccines and logistics, and lead in the implementation of the social behaviour change component of the campaign.

UNICEF, as co-lead of the Nutrition sector, supports the Ministry of Health to strengthen Nutrition coordination at the national and sub-national levels to enhance coverage, quality and overall effectiveness of the response. During the reporting period, all 9 Arid counties (Turkana, Baringo, Samburu, Garissa, Mandera, Wajir, Marsabit, Isiolo and Tana

River) have held emergency nutrition coordination meetings. The focus has been on these 9 counties over the reporting period as these are the most affected in terms of the nutrition situation. The remaining 6 counties will hold meetings next month: Kajiado, Kilifi, Kitui, Laikipia, West Pokot. One national emergency nutrition advisory committee meeting being convened to support overall response implementation and monitoring.

Summary Analysis of Programme Response

Health

During the reporting period, UNICEF in partnership with Kenya Red Cross Society (KRCS) has **reached a total 152,483 people (Girls 58,865, Boys 45,498, Men 18,188 and Women 27,932 - including 2,550 pregnant and lactating mothers) with critical lifesaving integrated outreach services** linked to targeted supported health facilities and this is out of the planned target of 855,036. These services included: immunization, treatment of pneumonia, diarrhea, health education, demonstration to community members participating in outreach services on household water treatment, nutrition monitoring, issuance of supplementary foods, antenatal care.

Critical behaviours change communication for drought-related disease prevention reached **228,550 children, caregivers and communities** through the **330 community health assistants, trained** on drought emergency and the key preventive household messages.

Lifesaving drugs and other emergency health supplies distributed by UNICEF and partners reached **150,000 people** in Marsabit, Turkana, Wajir, Mandera, Garissa, and Tana River.

Drought-related outbreaks of Kalaazar, Chikungunya, Dengue fever and Yellow fever (89 suspected cases, 11 presumptive positive, 10 deaths) have been reported in drought affected ASALs. To support the Yellow Fever outbreak response, UNICEF has accepted Ministry of Health (MoH's) request to be the consignee for the International Coordinating Group (ICG) funded Yellow Fever vaccines and devices, including support with clearance and in-country logistics costs.

Nutrition

A total of **26,963 children (16% of target) were admitted for treatment of severe acute malnutrition** during the reporting period along the targeted drought affected counties and a total of 190,650 caregivers were reached with nutrition messages in the month of April 2022. Training on integrated management of acute malnutrition was provided to **20 health workers** in Garissa county over the reporting period to ensure adequate capacity is available to provide quality management and care of acute malnutrition. The distribution of **16,656 cartons of RUTF** reached 2,100 health facilities between April to May 2022 for continued **treatment of severe acute malnutrition**. During the reporting period, a total of 65 health facilities (3% of all health facilities) across all the 23 ASALs reported having no closing stocks and were resupplied as were health facilities that required increased replenishments owing to increased number of children in need in treatment especially in counties where mass screenings had been undertaken (Turkana, Wajir, Marsabit, Mandera, Samburu , Garissa and Isiolo counties).

Child Protection

UNICEF continued to support the Government of Kenya to mitigate and respond to the child protection concerns during the drought, including the heightened risks of family separation, violence, neglect and negative coping practices such as subjecting children to FGM and child marriage – as a result of disrupted livelihoods, food insecurity and water scarcity.

Over the reporting period, a total of **8,003 children, parents and caregivers** were reached by child protection interventions. UNICEF supported **child protection services, including family tracing and reunification and case management support** reached **2,029 children** (1,045 boys, 984 girls). The majority of these children were identified through the support of Child Protection Volunteers who UNICEF, through the Directorate of Children Services (DCS), has continued to engage with and support since the onset of the COVID-19 pandemic.

Access to **community-based mental health and psychosocial support** was provided to **5,168 children and caregivers** (3,596 female, 1,572 male) and **806 individuals** (443 girls, 153 boys, 210 women) were **reached with GBV risk mitigation, prevention and response services** during the reporting period.

A five-day training session on child protection risks, protective behaviours and available protection services reached **1,006** (447 male, 559 female) **Community Protection Volunteers (CPVs)** from targeted drought affected counties.

Social Protection

During the reporting period, UNICEF facilitated unconditional Drought Cash Transfers directly benefiting **8,364 people or 1,394 households** (50.3% women). This included an additional 390 households who are the most

vulnerable children such as orphans and / or those living with disabilities and affected by the drought crisis in Garissa County, and 1,004 households from the existing UNICEF Cash Plus programme such as the Charitable Children's Institutions (CCIs) and the Out of School Children programme as the most vulnerable and affected population with the children in Garissa.

Starting from April for 3 months, additional monthly Cash Top-ups of KES 3,680 reached the 390 households who have been regularly receiving monthly 2,000 Kenya shillings from the National Safety Net Programme. An additional 1,004 households from the existing beneficiaries receive a Cash Transfer amounting 5,680 Kenya shillings for three months as the horizontal expansion to relief for affected vulnerable households.

Education

During the reporting period, UNICEF as a co-lead for the Education in Emergency Working Group (EiE WG), managed to mobilise education stakeholders to activate the national EiE WG and establish/activate county level EiE WGs with emergency focal points nominated.

The EiE WG developed a National Education Sector Drought Response Plan, which has two main objectives: to ensure children's continuity of learning in areas impacted by the drought and enhancing the resilience of the education system to continue delivering amid drought or future potential emergencies. The plan also highlights the importance of learners' and education personnel access to water and food as a pre-condition to retain learners and education personnel in schools and to continue using schools as a hub for supporting children's wellbeing and protection along with learning. UNICEF also, provided technical support to the Ministry of Education (MoE) to disseminate a survey to school headmasters in targeted drought affected counties to collect data about the impact of drought on education.

Knowing how critical school feeding is to retain learners in schools during drought, and following advocacy made by different stakeholders, the MoE has made a request to the national drought management authority requesting an approval to allocate funds for an expansion of the national school feeding programme currently covering schools in the ASALs. The request if approved will cover an additional 2,856 schools in the semi-arid land region benefiting an additional 1 million learners.

WASH

A total of **380,384 people comprising 62,968 men, 169,620 women, 47,796 school children** (23,420 boys and 24,375 girls) provided with access to safe water during the reporting period through the rehabilitation of **105 non-functional boreholes** in Wajir, Marsabit, Garissa, Isiolo, Samburu and Turkana counties. These boreholes also provide access to water for 29 government and community health facilities. The rehabilitation of the 884 non-functional boreholes in 11 target priority counties (identification still ongoing in 4 more counties) will provide access to safe water to over 1 million additional people and their livestock.

A total of **461,954 people, (226,357 men and 235,597 women)** were reached with **WASH supplies** (Jerry cans, buckets, soap and Aqua tabs) accompanied with **hygiene messages, household water treatment and safe storage** in Wajir, Marsabit, Garissa, Isiolo, Samburu and Turkana counties were reached during the reporting period.

In Wajir, Marsabit, Garissa, Isiolo, Samburu and Turkana counties, hygiene awareness was provided to **47,796 school going children (23,421 boys and 24,376 girls)** in 37 learning facilities and **5,000 school going adolescent girls received Menstrual Hygien Kits (MHM kits) along with MHM sensitization sessions.**

HIV/AIDS

UNICEF supported the orientation of **200 (137 males and 63 females) community health volunteers** in Galole and Bura sub counties of Tana river on community PMTCT, a strategy that ensured the HIV positive mothers in Tana river continued to receive HAART for prevention of mother to child transmission. UNICEF also supported the **virtual orientation of 50 (42 males and 8 females) health care workers on management/ARV** optimization for children living with HIV in the ASAL counties of Wajir, Tana river, Isiolo, Marsabit, Lamu and Mandera counties.

As a result of the virtual orientation, a total of **1,307 children living with HIV in target counties have been enrolled for support by the training health community workers (HCWs)** who begun dispensing the highly effective pediatric anti-retroviral drug (p-DTG 10mg). Also, a total of **600 children born to HIV positive mothers have been tested on time** using UNICEF procured life-saving infant diagnostic kits for HIV on time and immediately linked to appropriate care and a total of **1,322 pregnant and lactating women living with HIV have received antiretroviral therapy** in targeted drought affected counties.

Social and Behaviour Change (SBC) and Accountability to Affected Population

UNICEF Social and Behaviour Change Communication (SBC) unit has led other sectors in developing the integrated life saving messaging package to be used during the drought emergency in mobilizing and sensitizing communities on important knowledge, skills and attitudes. In target drought affected counties, SBC is enhancing capacities for setting up systems for Accountability to Affected Populations which will ensure that there is an equitable flow of life-saving information to all the vulnerable populations in need and will protect children and families from child rights and human rights violations through the two way reporting mechanism during and after the drought period.

Security Updates

During the reporting period UNICEF has provided critical analysis on programmatic impact of insecurity on ongoing drought emergency response that ensured that no significant interruptions occurred or adversely affected service delivery to affected populations. There has been heightened resource based conflicts in drought prone pastoral counties such as Samburu, Garissa, Tana River, Isiolo, Liakipia and Baringo and UNICEF has guided its implementing partners in ensuring that minimum standards are applied for safety of personnel and to ensure smooth delivery of supplies to target vulnerable populations.

Supply & Logistics

UNICEF Supply and logistics has continued to support the sectors in the prompt procurement, transportation, distribution and end user monitoring of drought emergency commodities. The total value of purchase orders placed during the reporting period towards this drought emergency response stands at **\$601,855 USD** to support the scale up of the response and based on available funds, UNICEF will procure more commodities especially RUTF for nutrition sector support.

External Media

UNICEF continues to highlight the situation of children and their families in Kenya and advocate for their support through external and internal media outlets. High profile UNICEF, Government, donor and media missions have been facilitated by UNICEF to the affected field locations. The following are some human interest stories relating to UNICEF response in Kenya:

Human interest stories

<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/combating-covid-19-vaccine-hesitancy-garissa>

<https://www.unicef.org/kenya/stories/call-help-open-line-protecting-children>

<https://www.unicef.org/kenya/stories/top-class-helping-adolescent-girls-return-school-turkana>

Next SitRep: 30 June 2022

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Annex A: Programme Results (01 April –31 May 2022)

Results Table :

Sector / Indicators	UNICEF Response		
	Targets	Total April - May Results	% Coverage of target
Health			
# of people who accessed to uninterrupted health services.	855,036	152,483	18%
# of pregnant women receiving at least 4 ANC visits.	25,651	2,250	9%
# of children, caregivers and communities' members are aware of behaviour change for drought-related disease prevention.	855,036	228,550	27%
Nutrition			
# of children under 5 with SAM admitted for treatment.	162,137	26,963	17%
# caregivers, families, and/or community members reached with key nutrition messages.	1,800,000	228,550	13%
Child Protection			
# of children covered by child protection services/prevented from violence, abuse, and exploitation.	59,551	2,029	3%
# of children and parents/caregivers accessing mental health and psychosocial support.	23,820	5,168	22%
# of women, girls and boys accessing GBV risk mitigation, prevention, or response interventions.	8,000	806	10%
WASH			
# of people accessing safe water at 7.5 litres, to at least 15 litres per person per day (SPHERE).	936,261	332,588	36%
# of children accessing appropriate hygiene awareness raising in learning facilities and safe spaces.	936,261	47,796	5%
# of people that participated in hygiene promotion sessions.	936,261	461,954	49%
Number of people in targeted drought affected counties benefitted of WASH NFI.	936,261	461,954	49%
Social Policy			
# of people in targeted drought affected counties receiving cash transfer.	52,722	8,364	16%
HIV/AIDS			
# of pregnant, lactating women, and adolescents living with HIV receiving ART.	1,200	1,322	110%

Annex B: Funding Status as of 31 May 2022²

With drought humanitarian needs still increasing in Kenya due to worsening drought situation, UNICEF intends to revise its 2022 HAC Appeal by June to reflect the additional resource requirements to meet the needs of the drought affected vulnerable children and families who need to be reached with essential services and life-saving supplies in Kenya's ASAL region. Continued, flexible contributions mean that UNICEF and partners can act quickly and respond strategically to where the needs are greatest. Also, leveraging the government of Kenya resources for drought emergency response will ensure that affected people can be reached government and partners.

Sector	2022 Requirements (April - December 2022)	Funds available			Funding Gaps		2022 Pipeline Funding
		Humanitarian Funding Received (April - December 2022)	Other resources used (April - December 2022)	Carry over from Sept 2021 - March 2022	\$	%	
Nutrition	21,128,019	513,000	0	1,500,347	19,114,672	90%	8,100,000
Health	12,370,970	190,000	171,207	350,150	11,659,613	94%	200,000
HIV/AIDS	425,390	0	31,000	0	394,390	93%	0
WASH	14,173,790	1,007,000	0	1,014,360	12,152,430	86%	9,892,264
Child Protection	4,292,650	190,000	316,777	249,100	3,536,773	82%	0
Education	4,985,972	0	1,663,200	0	3,322,772	67%	0
Social Protection	9,946,170	0	620,000	0	9,326,170	94%	0
C4D/SBC	468,000	0	0	0	468,000	100%	0
Total	67,790,961	1,900,000	2,802,184	3,113,957	59,974,820	88%	18,192,264

² Figures reported to FTS may differ for same period due to exchange rate fluctuation, recovery cost estimates, and in-process allocation of flexible funding.

UNICEF Kenya Monthly Drought Fact Sheet: May 2022



Situation in Numbers

- 1.4 M Children in need of humanitarian assistance
- 942,499 Children 6-59 months require urgent access to prevention and treatment for acute malnutrition
- 3.5M Number of food insecure Population - 20% of the population (Source: NDMA, April 2022)
- 159,653 Severe Acute Malnutrition (SAM) (Source: NDMA, SRA, Jan 2022)
- 855,036 People in need of life saving Health services

Highlights

- According to the National Drought Management Authority, Kenya is facing a severe drought situation due to the cumulative impacts of three consecutive failed rain seasons and a potential 4th failed season, with all Arid and Semi-Arid Lands (ASAL) counties having received below average rainfall.
- Consequently, over 3.5 million people were facing food insecurity in Kenya by December 2021, up from 3.1 million in February 2022 after the Short Rains Assessment. Drought Still worsening in most of the 23 ASAL counties with Seven (7) in ALARM state and 10 in ALERT counties and Six (6) NORMAL on IPC food security classification
- According to the integrated phase classification for acute malnutrition (IPC-AMN) conducted in February 2022 the nutrition situation is Critical (IPC AMN Phase 4) in Garissa, Wajir, Turkana, Laisamis and North Horr in Marsabit County and Tiati in Baringo County. Tana River, West Pokot Counties, were classified in serious phase (IPC AMN Phase 3).
- A nutrition SMART survey conducted in March 2022 in Mandera showed extremely critical nutrition situation with Global Acute Malnutrition (GAM) and Severe Acute Malnutrition (SAM) of 34.7 and 7.9 percent, respectively. The nutrition situation is on a deteriorating trend due to the three failed seasons and the poor performance of the long rains season.
- The main driver of acute malnutrition is the worsening food insecurity situation with reduced milk production and consumption across counties, increasing food prices, low food stocks and unfavorable terms of trade.

Source: NDMA, SRA 2021, FEWSNET, UNICEF

