



Humanitarian Action for Children

Through UNICEF technical and operational support, a Government Nutrition Officer measures and weighs one-yearold Sudeys at Medina Health Centre, Garissa County.

Kenva

HIGHLIGHTS¹

- The President of Kenya declared the ongoing severe drought a national disaster on September 9, 2021, Between September 2021 to August 2022, the number of people in need has more than doubled, from 2.1 to 4.35 million and around 884,464 children aged 6 to 59 months require treatment for wasting, of which 222,720 are suffering from severe wasting.
- Persistent drought, the socioeconomic impact of COVID-19 compounded by disease outbreaks have severely affected access to basic social services for children and over 550,817 refugees in Kenya.
- . UNICEF continues to work with the government, partners and UN agencies to deliver lifesaving and interventions to drought-affected populations, providing essential services to refugees, and cushioning vulnerable families in the urban informal settlements against the impact of COVID-19 through strengthening multi-sectoral linkages and maximizing integrated coverage meeting gaps in the response efforts of the government and partners.
- UNICEF Kenya is requesting approximately US\$126.9 million to support critical life-saving and protection interventions for the most vulnerable children in the Arid and Semi-Arid (ASAL) counties, refugee camps and urban informal settlements that are being targeted.

IN NEED 4.5 million million people^{2,3} children⁴



TO BE REACHED

1.6 million million

people⁵

children⁶

KEY PLANNED TARGETS



238,373

children with severe wasting admitted for treatment



1.1 million

people who accessed to uninterrupted health services



2 million

people accessing safe water as per agreed sector/cluster coordination standards and norms



129,896

children/caregivers accessing mental health and psychosocial support



FUNDING REQUIREMENTS

US\$ 127 million

2018

2022

HUMANITARIAN SITUATION AND NEEDS

The President of Kenya declared the ongoing drought a national disaster on September 9, 2021. Kenya faces a severe drought situation due to the cumulative impacts of four consecutive failed rain seasons with a strong probability of a fifth below-average rainy season during the October-December 2022 short rains. This has led to over 4.5 million people in the 23 Arid and Semi-Arid Land (ASAL) counties currently requiring urgent humanitarian assistance (up from 2.1 million in September 2021)⁸, of these approximately 2.6 million are children.

The Short Rains Assessment (SRA) conducted in February 2022 estimated that 656,657 children aged 6-59 months were expected to suffer from wasting, including 159,653 children with severe wasting. These numbers have increased and the Long Rains Assessment (August 2022) estimated over 884,464 children are currently facing wasting, out of which 229,000 suffer from severe wasting. The deteriorating situation is mainly attributed to the worsening food insecurity, decreased access to water, below average milk production and increased morbidity. Under the condition of the condition of

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. In some areas over 90 per cent of open water sources have dried up and the remaining are expected to last between 1–2 months. Increased morbidity is being reported across the affected counties with URTIs recording the highest caseloads along with diarrhoea and malaria having a significant negative impact on the nutrition status. ¹¹

As of October 2022, about 338,538 COVID-19 cases with 5,678 deaths were reported (1.7% of case fatality rate). COVID-19 caseload has declined and is focused just in 3 counties (Nairobi, Kiambu, and Kilifi). So far, a total of 9,733,399 (35.7%) out of 27,246,033, and 736,101 children (9.3%) 12-18 years were fully vaccinated against COVID-19. The total number of COVID-19 doses received in country is 22,226,273. The Ebola Virus Disease (EVD) outbreak in Uganda put Kenya on high alert. The Kenya Ministry of Health and partners have developed an EVD Contingency Plan and activated the National Taskforce and technical working groups. Surveillance has been heightened, sensitization of health workers has been ongoing, with trainings scheduled to begin mid-October. Partners (WHO, UNICEF KCO, CDC, USAID, IOM, MSF, KRCS) are already providing technical and limited financial support for implementation of preparedness actions. UNICEF KCO has equally developed a multi-sectoral EVD Contingency plan.

Kenya hosts 550,817 refugees and asylum seekers as of April 30, 2022, of which 234,084 (43 per cent) reside in the Dadaab refugee camp and 230,086 (41 per cent) in Kakuma refugee population.¹²

SECTOR NEEDS



781,320 people in need of nutrition assistance¹³



2.9 million

people in need of health assistance¹⁴



4.4 million

people lacking access to safe water¹⁵



519,591

children in need of protection services^{16,17}



1.5 million

children in need of access to school¹⁸





Nasri Garane and her 2-year-old son, Liban Ali at a water kiosk in Daley, Garissa, that is situated at a borehole that was renovated by the County Government of Garissa with support from UNICEF.

Garissa County is experiencing prolonged drought due to the failure of four rainy seasons, driven by climate change, UNICEF is supporting response efforts by the national and county government. Beneficiaries like Nasri Garane and her 2-year-old son, Liban Ali, are able to access safe and reliable water from the renovated borehole in Daley, Garissa, that supplies the community with safe water. It used to take them 2 hours every day, walking, to fetch water from the nearest river. This has now been reduced to 15 minutes once the borehole was repaired.

Read more about this story here

HUMANITARIAN STRATEGY

UNICEF will support the Government, in partnership with UN agencies, national and international NGOs in the delivery of life-saving, protective, and convergent interventions to drought-affected populations, providing essential services to refugees and cushioning vulnerable families in the urban informal settlements against the socioeconomic effects of COVID-19 through strengthening multi-sectoral linkages and maximizing integrated coverage to meet gaps in the response efforts of the Government and partners.

Through its child rights mandate and sector lead role, UNICEF will provide operational, technical and managerial support by developing strategic partnerships to provide critical nutrition, WASH, education, health, social protection, HIV/AIDS and child protection services.

UNICEF will continue to build capacity and advocate with the government and humanitarian actors (such as ECHO and Oxfam) for the most vulnerable communities to ensure the effectiveness of nutrition, health, cash transfer, education, and protection services.

Community volunteers will be supported to take services closer to affected communities by delivering integrated life-saving services at community level and providing referrals for specialized care. Support will be provided to enhance Government protocols on safe schools and improving learning outcomes in the drought context.

Gender analysis will inform the design of equitable, responsive, and inclusive programming. Targeted interventions to address particular vulnerabilities for girls, women and persons with disabilities will be supported, community participation in all stages of programme implementation will be ensured, and appropriate feedback mechanisms will be strengthened.

UNICEF will adhere to and support COVID-19 preventive guidelines and Government pandemic control protocols, particularly in schools, health facilities and community engagement activities. Multiple strategies and channels of communication, including FM radio, social media and community volunteers, will disseminate messages, create awareness, increase community participation, receive feedback and increase demand for basic social services.

All UNICEF partnership agreements will outline partner responsibility in preventing and reporting sexual exploitation and abuse (SEA) and community sensitization on the zero tolerance to SEA. UNICEF will raise awareness on identifying and reporting SEA through the toll-free national child and gender-based violence (GBV) helplines, monitor reported cases, and support mental health and psychosocial support and referrals for specialized care.

UNICEF will use its comparative advantage in supply and logistics to procure assorted life-saving commodities using economies of scale for the delivery of life-saving interventions to the most vulnerable and maintain the supply pipeline for critical supplies.

In close collaboration with UNDP and the United Nations Resident Coordinator, UNICEF will strengthen resilience and the humanitarian-peace-development nexus through technical and financial support to the development of the Disaster Risk Management legal framework and strengthening devolved governance structures.

2022 PROGRAMME TARGETS¹⁹



Nutrition

- 238,373 children 6-59 months with severe wasting admitted for treatment²⁰
- 1,800,000 primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling²¹



Health

- 1,103,630 people who accessed to uninterrupted health services
- 310 community health workers receiving support (skills and equipment) to deliver essential maternal, newborn and child health services



Water, sanitation and hygiene

- 2,000,000 people accessing safe water as per agreed sector/cluster coordination standards and norms
- 2,000,000 people that participated in hygiene promotion sessions²²



Child protection, GBViE and PSEA

- 129,896 children and parents/caregivers accessing mental health and psychosocial support²³
- 48,000 women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions
- 50,000 people who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers



Education

- 700,871 children accessing formal or non-formal education, including early learning
- 442,914 children receiving individual learning materials



HIV and AIDS

 10,687 children, adolescents, pregnant and lactating women living with HIV receiving antiretroviral therapy



Social protection

 8,923 households benefitting from new or additional social transfers from governments with UNICEF technical assistance support



Cross-sectoral (HCT, SBC, RCCE and AAP)

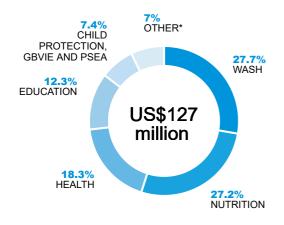
 130,000 people reached through messaging on prevention and access to services

FUNDING REQUIREMENTS IN 2022

Due to L3 declaration and based on updated evidence on needs, UNICEF Kenya has increased the appeal to US\$ 126.9 million to support critical life-saving and protective interventions for the most vulnerable girls, boys, women and men in the arid and semi-arid (ASAL) counties, refugee camps and urban informal settlements affected by drought, disease outbreaks and residual impact of COVID-19. The appeal was revised to align with the 2022 IA Kenya Flash Appeal and UNICEF's Regional Call to Action for HoA Drought. The increased targets in some sectors have mainly changed due increase of beneficiaries and recent gravity of the drought situation.

Funding to this HAC appeal will support urgent life-saving Nutrition, WASH, and Health/HIV interventions, which account for 60% of the total ask. The funding will also support other important programmatic interventions such as Humanitarian Cash Transfers and HIV/AIDs prevention activities. Sufficient funding will also support COVID-19 responses, strengthening of the resilience of communities to shocks, and providing operational, technical, and managerial support essential for the smooth implementation of multi-sectoral programmes, primarily in the 23 ASAL counties where drought-related impacts are most severe and where urgent, immediate life-saving assistance is mostly needed.

Without sufficient funding, UNICEF will be unable to support delivery of life-saving interventions to reduce human suffering and loss of lives, especially in the drought-affected ASAL counties. Women and children will be unable to access health, nutrition and WASH services, which remain the most critical. UNICEF will also be unable to support Government efforts in COVID-19 response.



Appeal sector	Revised 2022 HAC requirement (US\$) ²⁴		
Nutrition	34,526,513		
Health	23,176,230		
WASH	35,200,000		
Child protection, GBViE and PSEA	9,363,514		
Education	15,600,000		
Social protection ²⁵	6,000,000		
HIV and AIDS	638,085		
Cross-sectoral ²⁶	2,468,000		
Total	126,972,342		

^{*}This includes costs from other sectors/interventions : Social protection (4.7%), Cross-sectoral (1.9%), HIV and AIDS (<1%).

Appeal sector	Original 2022 HAC requirement (US\$)	Revised 2022 HAC requirement (US\$) ²⁴	Funds available (US\$)	Funding gap (US\$)	2022 funding gap (%)
Nutrition	9,000,000	34,526,513	24,655,193	9,871,320	28.6%
Health	5,000,000	23,176,230	1,327,357	21,848,873	94.3%
WASH	7,000,000	35,200,000	3,634,360	31,565,640	89.7%
Child protection, GBViE and PSEA	2,500,000	9,363,514	1,145,877	8,217,637	87.8%
Education	3,963,841	15,600,000	2,651,123	12,948,877	83.0%
Social protection ²⁵	1,500,000	6,000,000	1,720,000	4,280,000	71.3%
HIV and AIDS	396,852	638,085	65,000	573,085	89.8%
Cross-sectoral ²⁶	1,500,000	2,468,000	243,534	2,224,466	90.1%
Total	30,860,693	126,972,342	35,442,444	91,529,898	72.1%

ENDNOTES

- 1. UNICEF's public health and socioeconomic COVID-19 response, including programme targets and funding requirements, is integrated into the standalone country, multi-country and regional Humanitarian Action for Children appeals. All interventions related to accelerating equitable access to COVID-19 tests, treatments and vaccines fall under the Access to COVID-19 Tools Accelerator (ACT-A) global appeal.
- 2. OCHA, Kenya Flash Appeal at a glance (April October 2022), May 2022, available at: https://reliefweb.int/report/kenya/kenya-flash-appeal-glance-april-october-2022
- 3. The total people in need figure has been aligned to the inter-agency drought flash appeal revision November 2022 and covers the humanitarian needs for diverse crises, including the drought impact, the COVID-19 pandemic, and the refugee influx. The people in need figure has been reduced compared to the previous HAC appeal, as the updated needs assessments suggest a prioritization of humanitarian needs from the whole country to 15 targeted counties with the highest needs, including 5 priority ones primarily due to the severity of the nutrition crisis. In addition, the revised funding requirements significantly increased due to the ongoing international financial and geopolitical crises, which have triggered the increase of local prices and consequently increased the operational costs (especially transport and logistics) of humanitarian interventions and the costs per beneficiary.
- 4. Ibid. Children in need was calculated as 48 per cent of the total people in need, based on official Kenyan demographic data which is used for all calculations related to humanitarian response.
- 5. People to be reached is based on the highest WASH programme target 2,000,000 and removing the children which is 1,040,000. The IYCF target is 1,800,000 and assuming 2 caregivers for 1 child (less than 23 months) the IYCF target for children is 900,000 and the target for education is 700,871. So 1,040,000+900,000+700,871 gives an overall target 2,640,871
- 6. The IYCF target is 1,800,000 and assuming 2 caregivers for 1 child (less than 23 months) the IYCF target for children is 900,000 and the target for education is 700,871. So 900,000+700,871 gives an overall target 1,600,871
- 7. FEWS NET, May 2022
- 8. National Drought Management Authority, Long Rains Assessment (LRA) August 2022 report and Flash Appeal 2022 November revision
- 9. National Drought Management Authority, Long Rains Assessment (LRA) Augist 2022 report
- 10. National Drought Management Authority, Short Rains Assessment (SRA) 2022 report
- 11. National Drought Management Authority, Short Rains Assessment (SRA) 2022 report
- 12. UNHCR, Key Infographics, 30 April 2022
- 13. IPC Acute Food Insecurity and Wasting Analysis July 2022 and Projection for August October 2022, Issued in July 2022. Proposed number correspond to the estimation of total children (aged 6-59 months) with severe wasting and moderate wasting and cases of pregnant or lactating women suffering from wasting. This includes 668,800 ASAL (SAM 222,720 +MAM -661,744) + ASAL Pregnant and Lactating Women (PLW) 112,520 people in need of Nutritional support. Note that the FA did not include PLW's = 781,320.
- 14. Kenya Ministry of Health (MoH) and WHO 2022 disease prevalence data (as of 2022). Proposed number corresponds to UNICEF WASH
- 15. NDMA, Short Rains Assessment (2022), IPC Acute Food Insecurity Analysis March June (2022). Proposed number corresponds to UNICEF WASH PIN.
- 16. UNHCR refugee data, CPIMS data and National Drought Management Authority, Short Rains Assessment (2022). Proposed number corresponds to UNICEF Child Protection PIN (drought + refugees).
- 17. PiN 625,500 (Remains same since the overall sector need has been established jointly by sector partners based on needs); Sector Target 489,375 (Other CP partners and GoK to handle the balance not reached by UNICEF); UNICEF Target 129,896 & UNICEF CP Budget is \$ 9,363,514.
- 18. Ministry of Education School Enrollment data and Education Management Information System (as of 2022). This number corresponds to UNICEF Education PIN (drought + refugees + diseases outbreaks + COVID-19).
- 19. The indicators and targets are aligned to KCO Drought Response Plan.
- 20. UNICEF is handling 100% of severe wasting caseloads in the ASALs + Non ASALs + Refugee settlement areas.
- 21. Within this and the next targets, the proposed amount is containing multi-hazard beneficiaries (drought, refugees, disease outbreaks, and COVID-19).
- 22. The original indicator and target were deleted. The proposed indicator comes from CCC Indicator Guide and is used in the KCO Drought Response Plan and reported in the SitAn. The proposed target is aligned to the mentioned documents and considering adjustments in the context of L3 operations.
- The CP target of 129,896 subsumes the numbers listed under the other two indicators, to avoid double counting.
- 24. The funding requirement was changed due a) an increment of targeted beneficiaries and b) gravity of the drought situation in the last months in the context of L3 operations.
- 25. Despite a slight reduction in the social protection target, the social protection budget increased compared to the previous appeal due to a change on the implementation approach recommended by the Cash Working Group: the monthly cash transfer per household increased from 5,000 to 9,260 KES and the duration of the intervention from 3 to 6 months.
- 26. The cross-sectoral budget line increased by 65 per cent compared to the previous appeal, because it now includes the costs for technical assistance to support the rollout of accountability to affected populations and prevention of sexual exploitation and abuse at community level, as well as emergency coordination, in line with the L3 activation.