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# Emergency appeal operation update

## Kenya: Complex Emergency (Floods, Drought and Civil unrest)

 International Federation  
of Red Cross and Red Crescent Societies

### Emergency appeal n° MDRKE023

#### Operation update n°2

10 March, 2013

Period covered by this update:  
June to July, 2012

Appeal target (current): CHF  
20,419,397

Appeal coverage: 5%; [<click here to go directly to the updated donor response report, or here to link to contact details >](#)

#### Appeal History:

- This [Emergency appeal](#) was launched on 11 June 2012 for CHF 20,419,397 for 12 months to assist 465,844 beneficiaries.
- An operations update n°1 was issued on 31 March 2013.
- A DREF ([MDRKE022](#)) of CHF 314,208 was allocated in May 2012 from the IFRC DREF to support provision of immediate support to 20,892 persons displaced by floods.



Distribution of Non Food Item (NFI) kits to displaced persons in Tana Delta district. Photo/KRCS

**Summary:** During the period under review, Kenya Red Cross (KRCS) continued to provide emergency response support to persons displaced by inter-clan conflicts in the Tana Delta District. The environment within which the national society was providing support was highly volatile as retaliatory attacks between the two warring clans were ongoing. In the midst of this, the physical capacity of staff responding to the drawn-out conflicts was tested and the National Society incurred high logistical costs in an effort to provide the affected persons with the best emergency medical care. Despite these challenges, KRCS, through the support of partner national societies, was able to provide emergency health care to the internally displaced persons through daily medical outreach activities as well as provide the affected persons with both food and non-food items during the emergency phase of the response operation. This supported was provided to those newly displaced and those located at established IDP camps. To date, support for the appeal has been received from the Swedish, Japanese, American and Monaco Red Cross Societies. In country funds have been received from corporate partners such as Safaricom Foundation and the Kenya Commercial bank.

## The situation

The Inter-clan conflicts between Pokomo farmers and Orma herdsmen in the Tana Delta and the Borana and Gabra communities in Moyale districts have complex historical roots. The conflicts between these communities are seasonal. The recent conflicts were prolonged as a result of retaliatory attacks between the clans; with the conflicts resulting in unusually high fatalities and human displacements. The electioneering period in Kenya has also been noted to be a cause of clashes in hotspot areas.

The Kenya Red Cross Society responded to the needs of those displaced by the above mentioned inter clan conflicts in Moyale and Tana Delta districts in the period under review. Data collected by the Society through assessments in the affected areas indicated the following;

**Tana Delta:** On 14 August 2012 it was reported that herdsmen from Orma community drove their livestock through the Pokomo Community farms in Kau village, in claim that animal migratory corridors had been converted into farms. As the Pokomo community members resisted, 3 people were killed and 7 persons injured in the clashes that erupted. In addition, 198 heads of cattle belonging to Orma community were killed and unknown number seriously wounded or maimed. 110 houses in Kau village were burnt down, displacing the owners and an additional 214 families from Kau and neighboring villages due to fears of attacks. On 22 August 2012, in a retaliatory attack, it was reported that 52 people were killed (42 brutally murdered and 10 burnt beyond recognition) in Riketa Village, in a dawn attack carried out by fighters believed to be from Pokomo community. A total of 16 people are reported to have sustained serious injuries and were treated in Witu Health Centre, Mpeketoni sub district hospital and 6 were referred to Malindi district hospital by the KRCS team. 78 houses were burnt down in Riketa Village (inhabited by Orma) leaving the owners homeless. An additional 383 households from Riketa, Onido and Nairobi areas are reported to have fled the area due to fear. The displaced families settled in Dide Waride village as Integrated IDPs i.e. living with relatives and friends.

**Moyale:** Inter-ethnic clashes between the Gabras and the Borana of Moyale district commenced in late 2011. The clashes affected 7 locations in Moyale, namely; Hellu, Odda, Butiye, Somare, Manyatta, Lami and Kinisa. A total of 17 villages from the seven locations were affected with displaced population into Sessi, Manyatta and some crossed over into Ethiopia. Assessments by KRCS indicated that an estimated total population of 9,553 households (57,318 people) was either directly or indirectly affected. KRCS staff and volunteers embarked on detailed assessment of the situation to assess the magnitude of impact manifested by the clashes with the collaboration of the warring communities to establish the factual information as regards the impacts of the disaster.

The assessments revealed that a total of 48 people lost their lives over the last 4 months with 34 and 14 people from Garba and Borana ethnic tribe respectively. However, it is suspected that there are more deaths that are not accounted for especially from the Gabra community. Approximately 1,251 people were reported missing by their respective families with reports indicating that they may have crossed over to Ethiopia or escaped to neighboring villages. A total of 580 houses were burnt down and over 300 houses looted of all the belongings (furniture, clothes, utensils) after their owners fled from them. A total of 1,075 livestock (105 cattle, 35 camels, 835 shoats, 100 donkeys and unknown number of chicken) were lost or looted during the skirmishes. A total 20 pieces of water storage tanks (10,000 litres) were vandalized at different community water points. Funan Nyatta primary school (8 classrooms) was razed to the ground which disrupted learning activities in the area. Three rooms in Arosa dispensary was burnt together with the existing medical dugs and equipments while Hellu and Mansille dispensary were looted of all the drugs and other medical equipments stolen but not burnt.

The displaced families from Garba community could not access Moyale district hospital based on its location in the midst of the Borana community whom they were embroiled in battle with. The destruction of medical facilities created a crisis in that the affected population had no access to medical care during the crisis and after since the shortage of drugs would take time to resolve. However, ICRC and KRCS supplied drugs consignments to support the operation. The displaced population faced water and food shortages. Apart from few private primary schools in the district, none of the public schools (primary, secondary and collages) are operational. Students and pupils have fled their areas thus not even available to attend school.

## Coordination and partnerships

KRCS is working jointly with the Ministry of Education officials to trace and return to school children registered to undertake the National Primary School Education examinations that are undertaken in November. Only 47 schools out of a total of 53 schools were operational following the outbreak of conflict in the area. KRCS through its tracing activities located and returned a total of 201 pupils registered to sit the National Primary School Education examinations, to examination centers in Tana Delta from various destinations including Hola, Lamu, Marereni, Mamburui, Malindi, Kilifi and Mombasa. This intervention enabled the school going children prepare and sit for the KCPE examinations despite the disruption to learning resulting from the conflict. The children were integrated in centers within the district. It is surprising to report that Tana Delta recorded a better performance compared to the previous years. Tana Delta was the first district in the county. The National Society continued to receive in kind donations from various stakeholders and/or organizations.

## Red Cross and Red Crescent action

The National Society response to the disasters was guided by the Red Cross Code of Conduct which advocates for non discrimination during provision of support to the vulnerable emphasizing the need to prioritize support on the basis of need.

In the Tana Delta district, KRCS staff and volunteers responded to the casualties reported from both the warring communities as soon as the conflict erupted. The areas to respond were guided only by the need on the ground thereby ensuring that the most vulnerable beneficiaries received the assistance that they required. Response activities were guided by the emerging needs on the ground as well as feedback received from the target beneficiaries given sudden onset of the disasters. For instance, when communities brought up the issue of displaced children set to sit there national exams, KRCS responded by employing tracing skills that resulted in the location and relocation of at least 201 candidates; supported further by a short term school feeding activity for the duration of the exams. KRCS's response in many cases was proportional to the need identified on the ground and could be accessed by all beneficiaries targeted regardless of age or gender.

The National Society collected relevant and accurate information through rapid and inter agency assessments including media monitoring and information briefs from collaborating agencies including National Disaster Operation Centre (NDOC) and District and Provincial Administrations in the affected areas. The information gathered was useful in the implementation of an effective intervention which catered to the emerging needs of the target beneficiary. The Emergency Operations Centre (E.O.C) monitored the unfolding crises across the country ensuring up to date information.

The NS public relations department was instrumental in creating awareness on KRCS response to various emergencies through regular updates to media houses, one-on-one television interviews and news items in both print media and in-house publications on emerging issues. Utilization of social media platforms has enabled the society gather real time information from the public on current/ ongoing disasters and its response interventions.

## Progress towards objectives

Relief	
<b>Outcome 1: To assist 16,119 households displaced by floods in the Rift Valley, West Kenya, Coast and the lower Eastern regions and 1,258 displaced by civil unrest and clashes in Baringo, acquire temporary shelter, food (High Energy Biscuits-BP%) and Non Food Items.</b>	
Outputs (expected results)	Activities planned
<ul style="list-style-type: none"> <li>The needs of displaced and affected populations are continuously assessed and addressed appropriately</li> </ul>	<ul style="list-style-type: none"> <li>Conduct multi sectoral detailed assessments with involvement of relevant stakeholders for needs and gaps identification</li> <li>Shelter materials and Non Food Items distributed as per Sphere standards to the displaced population</li> <li>Distribution of high energy biscuits especially to children under the</li> </ul>

	<p>age of 5, pregnant and Lactating women and the aged. Food is provided by Government)</p> <ul style="list-style-type: none"> <li>• Rehabilitation of classrooms that were used in provision of temporary shelter</li> <li>• Facilitating of relocation of school going children from affected schools to safer schools for continuous learning</li> </ul>
<ul style="list-style-type: none"> <li>• IDP camps are well managed in partnership and in consultation with community leaders and representatives</li> </ul>	<ul style="list-style-type: none"> <li>• Coordination of agencies providing humanitarian services in the camps</li> <li>• Management of camps including establishment of representative committees including security committee</li> <li>• Identification of cases requiring protection; mainly victims of gender based violence and other crimes, and provision of protection services</li> <li>• Conduct tracing and family unification services in populations displaced by floods and civil unrest.</li> <li>• Identification of populations with special needs including People Living with Disabilities, people with chronic illnesses, unaccompanied minors and the aged for assistance.</li> <li>• Carry out initial households registration of the displaced persons and continuously update the registers</li> </ul>

**Progress:** Distribution of NFI kits continued in Tana Delta during the reporting period due to the large number of displacements that occurred during the period under review. The displaced persons were provided with non-food items comprising of Tarpaulins, mosquito nets, jerry cans, blankets, mats, soap and kitchen sets reaching a total of 5,952 persons.

Additional non food items were also procured and these included 2,842 tarpaulins, 2,842 kitchen sets, 8,024 Jerry cans, 8,024 mosquito nets and 5,684 blankets.

**Table 1: Summary of non food items distributed**

Name of camp	Households reached	blankets	Mosquito nets	Tarpaulins	Kitchen sets	Soap	Jerry cans	Aqua tabs
Riketa/ Didewaride	278	556	556	278	278	556	556	0
Kau/Kilelengwani	324	648	648	324	324	648	648	0
Chamwanamuma	94	188	188	94	94	188	188	0
Witu D.O. camp	120	240	240	120	120	240	240	600
Vipingoni Primary	56	112	112	56	56	112	112	280
Kilelengwani/Dide Waride	120	240	240	120	120	240	240	600
<b>Total</b>	<b>992</b>	<b>1,984</b>	<b>1,984</b>	<b>992</b>	<b>992</b>	<b>1,864</b>	<b>1,984</b>	<b>1,480</b>

## Early Recovery

**Outcome 2 : To contribute to the rehabilitation of disrupted livelihoods of the most food-insecure population groups through essential crop interventions, rehabilitation of damaged irrigation infrastructure and productive assets by assisting 16,119 displaced households towards early recovery from effects of floods as well as drought in areas that didn't receive rainfall**

Outputs (expected results)	Activities planned
<ul style="list-style-type: none"> <li>• Enhanced food production among farming communities affected by floods to contribute towards sustainable food security</li> <li>• Support the agricultural communities whose farmlands were destroyed, with certified fast maturing, high yield</li> </ul>	<ul style="list-style-type: none"> <li>• Conduct a detailed assessments of the situation and the needs in the affected areas (to cover immediate, transition and long term programmes including exploring possibilities of implementing livelihood projects like cash transfers).</li> <li>• Distribution of crop production inputs to the most vulnerable members of the farming community (Seeds: <i>maize (DLC variety) 30MT, Maize seeds (PH4 Variety) 4 MTs, Millet 1MT, Sorghum 2 MT, Cow peas 2 MT, Beans 7.2 MT, Kales 1MT and Rice 4.4MT</i>).</li> <li>• Procurement of fertilizers to improve crops yields in the affected farms.</li> <li>• Training on basic agronomic practices to enhance crop yield</li> </ul>

<ul style="list-style-type: none"> <li>seeds and seedlings</li> <li>• Training of district officials and NGOs in household Economy Approach and its application to vulnerability and early recovery analysis</li> <li>• Updated livelihood baseline data and livelihoods profile for the affected areas in Nyanza, Rift valley and coastal areas.</li> </ul>	<ul style="list-style-type: none"> <li>• Training on post harvest management to reduce crop losses including storage</li> <li>• Provision of 10,000 tree seedlings to be in Gwasssi, Suba district. Seedlings will be sources from the Kenya Forestry Service</li> <li>• Technical support( DRR, risk profile, hazard mapping among others in areas affected by floods for the first time i.e. Gwasssi</li> </ul>
<p><b>Long term interventions</b></p> <ul style="list-style-type: none"> <li>• Food availability improved through increased production and adoption of improved farming practices</li> </ul>	<ul style="list-style-type: none"> <li>• Provision of high quality seeds and farm implements to farmers in the Malindi, Magharini, Nyando, Gwasssi and Homa-Bay</li> <li>• Collaboration with KARI in supply of 1,000,000 cuttings of drought resistant, disease free cassava to affected farmers in Magharini, Machakos and West Kenya Regions.</li> <li>• Facilitate adoption of improved farming practices among vulnerable groups through trainings in Malindi, Magharini, Nyando, Gwasssi and Homa-Bay</li> </ul>

**Progress:** To be provided in the next update

<b>Disaster Risk Reduction</b>	
<b>Outcome 3: Floods and landslide risk is reduced for targeted communities in the Marakwet, Mt.Elgon, West Pokot, Nandi North counties in the Rift Valley, and Nyatike and Suba districts in Nyanza.</b>	
<b>Outputs (expected results)</b>	<b>Activities planned</b>
<ul style="list-style-type: none"> <li>• Flood and landslide affected communities are better prepared to predict, respond and recover to disasters.</li> </ul>	<ul style="list-style-type: none"> <li>• Train 180 volunteers and staff on Vulnerability Capacity Assessment (VCA) guidelines and tools.</li> <li>• Conduct VCA with communities in 6 targeted counties.</li> <li>• Develop community hazard maps for each of the mapped communities.</li> <li>• Develop community contingency plans and community based early warning systems</li> <li>• Develop mitigation micro projects in targeted communities based on VCA findings</li> <li>• Public awareness and public education for DRR activities</li> </ul>

**Progress:** To be provided in the next update

<b>Emergency Health and Care</b>	
<b>Outcome 4 : To contribute to reduction of morbidities and excess mortality among 140,335 floods affected persons and 185,174 persons affected by acute malnutrition in drought and civil unrest affected areas by strengthening community health structure and systems and implementing high Impact interventions.</b>	
<b>Outputs (expected results)</b>	<b>Activities planned</b>
<ul style="list-style-type: none"> <li>• Improved access to basic healthcare services among the populations affected and displaced by floods and communities affected by acute malnutrition in drought affected areas.</li> </ul>	<ul style="list-style-type: none"> <li>• Support the MoPHS in delivering healthcare to communities affected by floods as well as areas affected by drought conditions through medical outreach and high impact nutrition interventions. Focus to include: <ul style="list-style-type: none"> <li>- Treatment of common ailments using standard MoPHS protocols and guidelines.</li> <li>- Accelerated routine vaccination with emphasis to measles and polio vaccination (these have caused outbreaks in recent past).</li> <li>- Provide reproductive health services including ante natal care, skill assisted deliveries, family planning, HIV prevention, services to survivors of sexual and gender based violence including advocacy.</li> <li>- Screening and management of Severe Acute Malnutrition in Partnership with the MoPHS and UNICEF in both flood affected and drought affected areas</li> <li>- Procurement and distribution of medical supplies to areas</li> </ul> </li> </ul>

	<p>supporting medical outreaches as well as hospitals without supplies</p> <ul style="list-style-type: none"> <li>• Design and Produce assorted IEC materials to support health education by health promotion teams.</li> <li>• Support Ministry of health in the implementation of high impact nutrition interventions particularly IMAM programmes, breastfeeding promotion, de worming, Vitamin A supplementation and zinc supplementation for cases presenting with diarrhea. Support will mainly be in the form of community mobilization and outreach services</li> <li>• Provision of post trauma counseling and psycho-social support to survivors and their families and first responders (KRC volunteers).</li> </ul>
<ul style="list-style-type: none"> <li>• Increased awareness on disease prevention and control by affected communities.</li> </ul>	<ul style="list-style-type: none"> <li>• Capacity enhancement for KRCS Volunteers and MoHCHEWs participating in health promotion activities, disease surveillance as well as mortality surveillance.</li> <li>• Increased disease surveillance from the clinical data supported by community based surveillance. Emphasis to be laid on Acute Watery Diarrhea, Acute Flaccid Paralysis and Measles. Mortality surveillance to be conducted by KRCS volunteers.</li> <li>• Conduct trainings of KRCS regional and selected branch staff on Basic Health care, Public Health in Emergencies and Leadership</li> <li>• Carry out active case finding of children with acute malnutrition and complications especially in drought stricken areas and refer to nearby facilities for stabilization and follow up</li> </ul>
<ul style="list-style-type: none"> <li>• Reduced risk of development of emergencies including outbreaks of water and vector borne diseases and severe acute malnutrition as a result of enhanced surveillance at the Community level.</li> </ul>	<ul style="list-style-type: none"> <li>• Carry out health promotion activities targeting behavior change, health seeking behavior and disease prevention campaigns focusing on diseases with epidemic potential including cholera prevention, prevention of Vector borne diseases including malaria.</li> <li>• Development of volunteers/CHWs kit with community health manuals and key health messages in line with community health strategy.</li> <li>• Recruit and support 10 Nutrition Officers to continually collect and compile relevant information to inform nutrition interventions</li> <li>• Continue to support school feeding in early childhood development Centre's for management of acute malnutrition in counties categorized to be in crisis and alert stages.</li> <li>• Training of nutrition focal persons ( TOT) on infant and young child nutrition, emergency nutrition and nutrition surveillance ( including how to collect, analyze and report nutrition information)</li> </ul>
<ul style="list-style-type: none"> <li>• Improved preparedness and enhanced capacity to respond to Epidemics.</li> </ul>	<ul style="list-style-type: none"> <li>• Procure and preposition 5 IEHK and 5 supplementary modules and 3 malaria modules.</li> <li>• Procure emergency nutrition supplements for management of severe acute malnutrition.</li> <li>• Conduct a stakeholder mapping to determine the presence of other actors and their contribution to the health and nutrition sector to avoid duplication of activities and enhance coordination</li> <li>• Continuous monitoring, evaluation and development of operational updates.</li> </ul>
<ul style="list-style-type: none"> <li>• Nutrition and health status constantly monitored</li> </ul>	<ul style="list-style-type: none"> <li>• Linking households with children in feeding programmes, pregnant, lactating women to livelihood projects and social protection programmes including cash transfers</li> <li>• Monitoring the coping mechanisms of communities and reporting on the same on a bi weekly basis to branch, region and HQ for timely analysis and feedback on recommendations</li> <li>• Participation in the District food security steering group meetings held on a monthly basis and support (refreshments for meetings, stationery) on need basis.</li> <li>• Set up inter sectoral working group committees that link WASH, health, agriculture, livelihoods and nutrition programme focal persons that will help in drawing up joint action plans required to advance improvements in health and nutritional status of beneficiaries</li> </ul>

**Progress:** KRCS procured additional medicines and other medical consumables for use in the emergency health interventions and sustained emergency medical outreaches in the areas affected in Tana delta region. KRCS Emergency Medical Services (EMS) ambulances were used in all the cases to stabilize and ferry critically ill patients. The ambulance service has drastically improved the emergency health care provided to patients in even the remote areas.

**Water, sanitation, and hygiene promotion**

<b>Outcome 5 (a): Improve access to clean, safe and sustainable water facilities for floods affected populations in the Rift Valley, Coast, West Kenya and Lower Eastern regions, civil unrest affected persons in Baringo and Moyale and populations living in north and north east areas that received depressed rainfall</b>	
<b>Outputs (expected results)</b>	<b>Activities planned</b>
<ul style="list-style-type: none"> <li>Improved access to sustainable safe water</li> </ul>	<ul style="list-style-type: none"> <li>Distribute Point of Use Water Treatment Chemicals to households without portable water increase water safety targeting 350,000 people.</li> <li>Chlorination of 500 water sources mainly boreholes and shallow wells that were contaminated by flood waters</li> <li>Rehabilitate 50 shallow wells and boreholes that were destroyed by floods</li> <li>Rehabilitate latrines in schools hosting displaced populations</li> <li>Drill and equip 9 borehole motorized water schemes in areas that received depressed rainfall and were not targeted by the drought operation</li> <li>Disinfection of 500 pit latrines</li> <li>Construction of 500 emergency latrines in displacement camps</li> <li>Rehabilitate/pipeline extension targeting 10 existing water supply schemes to enhance water supply to target community</li> <li>Formulation and training of 69 water management committees to manage the constructed boreholes and /rehabilitated shallow well.</li> <li>Training water point caretakers/ operators targeting 69 water points</li> <li>Construction of 35 school rain water harvesting systems, 5 in each of the target regions.</li> <li>Deployment of mass water treatment plants to displaced communities without access to drinking water.</li> </ul>
<b>Outcome 5 (b): To promote hygiene and appropriate gender responsive sanitation for an estimated 280,760 floods affected persons.</b>	
<ul style="list-style-type: none"> <li>Improved health status of the population through behavior change and hygiene promotion activities.</li> <li>Key hygiene messages disseminated effectively at household/community level and positive hygiene behavior adopted by targeted households</li> <li>Sanitation access improved</li> </ul>	<ul style="list-style-type: none"> <li>Train 200 volunteers/TOTs on PHAST and CLTS methodologies</li> <li>Cascade the PHAST trainings to the community level by training KRCS volunteers</li> <li>Conduct hygiene promotion and awareness campaigns in affected communities.</li> <li>Produce and distribute generic hygiene promotional IEC materials to support hygiene promotion activities.</li> <li>Construction of 100 emergency latrines units in displacement camps.</li> <li>Rehabilitation of sanitation facilities in schools hosting Internally Displaced Persons</li> <li>Construction of 1000 household latrines</li> </ul>

**Progress:** To be provided in the next update

**Logistics**

Logistical support will be provided both in primary and secondary transportation as well as warehousing in the field that would enable rapid access to beneficiaries in targeted areas. KRCS will ensure a coordinated mobilization, reception, warehousing and dispatch of relief goods to the final distribution points.

## Planned Activities

- Transport relief supplies to final distribution points.
- Identify suitable warehouses for storage of relief items
- Maintain mobilisation table
- Reinforce regional logistics capacity in warehousing and transportation
- Procurement of NFIs, seeds, fertilizers, medical supplies and water and sanitation material supplies both locally and internationally

**Progress:** KRCS carried out procurement of items and equipment required for the intervention through its standardized procurement systems. Bidding for tenders was competitive and overseen by a committee. The supply chain department established and regularly updated a mobilization table. The transportation of relief items was undertaken by the society's logistics department thereby ensuring an effective response.

## Communication-Advocacy and Public Information

KRCS developed news stories that were shared with media houses in order to highlight the status of the various crises reported within this report. The department was also at the forefront in providing media houses with relevant information about the disasters and KRCS's responses across the country. Feature stories, case studies as well as information pieces were developed and posted on the KRCS website thereby ensuring that adequate information was available to stakeholders needing to access the information. Social media used during the reporting period provided an interactive forum between the national society and the general public; giving information and receiving feedback in real time. This element of communication was particularly helpful as the national society benefitted from information from the general public which widened the scope of the response.

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## Contact information

**For further information specifically related to this operation please contact:**

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## How we work

All IFRC assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGOs) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.

The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

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1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.