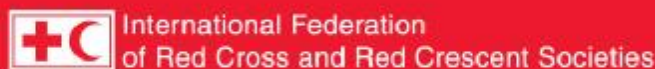


# DREF operation



## Kenya: Refugee influx into Mandera

DREF operation n° MDRKE013  
5 November 2010

The International Federation's Disaster Relief Emergency Fund (DREF) is a source of un-earmarked money created by the Federation in 1985 to ensure that immediate financial support is available for Red Cross and Red Crescent response to emergencies. The DREF is a vital part of the International Federation's disaster response system and increases the ability of national societies to respond to disasters.

**CHF 253,952 (USD 259,387 or EUR 184,773) has been allocated from the Federation's Disaster Relief Emergency Fund (DREF) to support the National Society in delivering immediate assistance to some 8,302 beneficiaries.**

**Summary:** Intensified fighting between the Somali Transitional Federal Government (TFG) Soldiers and Al Shabab militants has resulted in the death and displacement of many Somali civilians in the areas around Bula Hawo Town, Somalia which is close in proximity to Mandera town in Kenya. AfricaNews reports that approximately 30 people are feared dead from fighting that erupted on 17 October 2010. Some of the affected people



**Somali refugees in Mandera (photo by KRCS)**

have remained in Somalia but a large number have been forced to seek refuge elsewhere, with many of them crossing the border into Kenya through Mandera.

A preliminary assessment carried out by the Kenya Red Cross Society (KRCS) indicates that approximately 8,302 individuals have crossed into Kenya as at 1st November 2010. The majority are women and children. It is also reported that another group (figures yet to be ascertained) have been living in Madera town either in commercial lodgings or living with kinsmen.

The Kenya Red Cross Society is collaborating with United Nations High Commissioner for Refugees (UNHCR) and has completed the registration of 8,302 individuals. The National Society has also provided basic health care kits, dignity kits and water and sanitation supplies.

This operation is focussing on contributing to the provision of humanitarian assistance to Somali refugees in Mandera displaced as a result of civil strife in Somalia. It is expected to be implemented over three months, and will therefore be completed by 31 January 2011; a final report will be made available three months after the end of the operation (by 30 April 2011.)

[<click here for the DREF budget, here for contact details, or here to view the map of the affected area>](#)

## The situation

Somalia continues to suffer protracted conflict since the collapse of its central government structure in 1991. Numerous efforts by the international community including the United Nations and the African Union have yet to ensure political stability and peace within the country. The inauguration of the internationally recognized Somali Transitional Federal Government in 2004 was seen as a starting point on the country's road to recovery. This 'peace' was however short-lived as dissenting forces soon arose to challenge the legitimacy of the Transitional Federal Government (TFG).

Intensified fighting between Somali Transitional Federal Government (TFG) Soldiers and Al Shabab militants has resulted in the death and displacement of many Somali civilians in the areas around Bula Hawo Town, Somalia which is close in proximity to Mandera town in Kenya. AfricaNews reports that approximately 30 people are feared dead from fighting that erupted on 17 October 2010. Some of the affected people have remained in Somalia but a large number have been forced to seek refuge elsewhere, with many of them crossing the border into Kenya through Mandera.

On 1 November 2010, approximately 8,302 persons had arrived in Mandera. A majority of the displaced people are women and children. The refugee reception site, which is also a temporary settlement, is located in Border Point 1 location in Mandera Central Division of Mandera East District. The settlement is located approximately 200m from both the Ethiopian (Northern Border point) and Somalia (Eastern Border Point) borders with Kenya. This location has serious security implication, which is hampering humanitarian operations. It is reported that motor vehicles have been taken at gun point by militia groups in the past in that area.

### Shelter and relief

At the time of the assessment, there were some shelter units which appeared to have been put up without proper planning. The units are constructed using traditional materials, with polythene sheet lining at the top to protect the occupants from rainfall. These units are congested with most of them being less than 1 metre from each other. The congestion and the overcrowding within the small houses presents a threat of rapid transmission of infectious diseases. The settlement is not fenced, and therefore there is open flow of people and animals in and out of the settlement. It is also located in a poorly drained area which appears to be a depression that drains into River Daua.

To date, 780 households have received family kits and approximately 728 households still require these kits.

### Tracing and Protection

Tracing services have not been initiated to link family members and neither have Psycho-social support services been established for the refugees. Although the majority of the people in the settlement are women and children, cases of sexual exploitation and abuse have not been reported as yet.

### Health and Nutrition

Following reports of cases of diarrhoeal diseases in the settlement, the Ministry of Public Health and Sanitation sent two medical personnel (a clinical officer and a nurse) to provide health services in the settlement. 150 patients with cases of Diarrhoea, Respiratory Tract Infections (RTIs), Malaria and Pneumonia were treated. The team also conducted nutritional screening where at least 29 cases of acute malnutrition and 41 cases of moderate malnutrition were confirmed. The malnourished children were referred to the Mandera, District Hospital for treatment. However there is no follow up system to establish whether these children were presented to the hospital for further management. The only health facility is located five kilometres from the settlement. The team is also facing shortage of drugs and other medical supplies.

Although the refugees are interacting freely with the host community, a screening and vaccination programme has not yet been established, presenting a risk of importation of vaccine preventable diseases among other diseases.

## Water and Sanitation

Two bladder tanks with a combined capacity of 10,000 litres each connected to a tap-stand with 6 taps each have been installed at the settlement. The water is supplied by a water bowser twice a day. The amount of water available to the population is therefore 20,000 litres (the daily water demand is 62,625 litres during the acute emergency phase with each person accessing 7.5 litres per day). The water is sourced from the Mandera water supply system. Points of use water treatment solutions (Aqua tabs and PUR satchets) have been distributed.

Six latrines have been set up and are serving a population of 8,203 (this translates to one latrine available for use by a population of 1,367 persons against the recommended one latrine per 100 person in the acute emergency phase). Due to the poor settlement layout, the latrines are not easily accessible to the refugee population, and some are constructed on a dry waterway. There is evidence of open field defecation and there are no bathing facilities available. No hand washing facilities have been set-up and there are also no designated areas for solid waste management. Generally, the sanitation and hygiene conditions in the settlement are far below the set standards, and present a risk of outbreak of diseases. In addition, hygiene promotion activities have not yet commenced in the settlement.

## Coordination and partnerships

**Refugees using one of the six latrines and bladder tanks set up in the temporary settlement area. (Photo, KRCS)**

During emergencies, the KRCS holds regular briefings and updates with the Government, Red Cross Red Crescent Movement partners including Partner National Societies (PNS), The International Committee of the



Red Cross (ICRC) and the International Federation of the Red Cross and Red Crescent Societies, UN agencies and other stakeholders. The Kenya Red Cross will provide timely information bulletins on its website to ensure sensitization and advocacy on the plight of the affected population. The Federation's Eastern Africa regional office provides technical support.

The following organizations are currently providing different services to the refugees: The Ministry of Public Health and Sanitation provided two medical personnel (a clinical officer and a nurse) to provide health services following reports of cases of diarrhoeal diseases in the settlement. The UNHCR is taking the lead in the registration of refugees and approximately 8,302 individuals have so far been registered. The United Nations Children's Fund (UNICEF) provided medical supplies (including drugs and other supplies)

The Islamic Relief Worldwide has constructed six latrines and put up two bladder tanks within the settlement. The organization has also distributed 780 family kits to the affected population. The World Food Programme distributed a 10 day standard ration of food on 31 October 2010, totalling to 40,421MT. The organization had initially distributed 264 boxes of high energy biscuits.

## Red Cross and Red Crescent action

The KRCS continues to play a crucial role in the delivery of emergency assistance to the incoming refugees. The National Society conducted an assessment, which aimed at assessing the situation and identifying the needs of the refugees. The Society in collaboration with UNHCR has undertaken the registration of 8,302 refugees already in Mandera.

KRCS has entered into negotiations with UNHCR to be appointed the lead implementing humanitarian agency to provide health care services, water and sanitation and general administration for the refugees in a temporary settlement which is currently being set up.

The KRCS, Mandera Branch has distributed 30 blankets, 30 Jerry cans, 12 insecticide treated mosquito nets (ITNs) and six sanplats. The National Society also deployed three bladder tanks (two 10,000 litres and one 5,000 litres capacity), 40,000 Aqua tabs and 40,000 PUR sachets. The Society deployed one inter agency emergency health kit including a Malaria supplementary module, one cholera kit, 40 boxes of piriton syrup, reproductive health kits (Kit 1A, 1B, 2A and 2B) and mobile clinic tents. Six medical personnel and a multi disciplinary team from the headquarters and regions were also sent to the settlement to set up and commence the emergency intervention. The medical team has been using medical supplies availed by Kenya Red Cross Society through the UNHCR.

## The needs

**Beneficiary selection:** All refugees arriving from Somalia as a result of continued fighting will be provided with humanitarian assistance. A planning figure of 8,302 individuals will be used. However, special emphasis will be given to the most vulnerable in the group.

**Immediate needs:** Most refugees have fled with basic household items and are in need of emergency food assistance, shelter, access to clean water, sanitation facilities and basic health care. Hygiene promotion is also needed to supplement the prevention of diseases. Family reunification services for those who have lost their loved ones will help restore family structures.

**Gaps:** Assessments carried out by KRCS indicate that water provided does not meet the demands of the refugee population. There are no bathing facilities or hand washing facilities available for use at the settlement and there is also no designated area for solid waste management at the site. In addition, no hygiene or health promotion and disease prevention activities have been carried out at the settlement so far. The only health facility is located five kilometers from the settlement. The team is also facing shortage of drugs and other medical supplies both at the settlement and at the health facility. A screening and vaccination programme has also not been established as yet. Further, some 728 households are without family kits. Tracing and psycho social services have also not been initiated.

## The proposed operation

**Overall Goal:** To contribute to the provision of humanitarian assistance to refugee populations in Mandera displaced as a result of civil strife in Somalia.

Relief distributions (basic non-food items)
<b>Objective: To support 8,302 refugees in Mandera by providing necessary non food items as well as restoring their family links.</b>
<b>Planned activities:</b> <ul style="list-style-type: none"> <li>• Procure non food items for stock</li> <li>• Transport emergency items.</li> <li>• Distribution of non-food items to refugee population.</li> <li>• Conduct active tracing for missing persons.</li> </ul>

Emergency Health and Care
<b>Objective: To increase access to basic health care provision and disease prevention interventions to 8,302 refugees in Mandera.</b>
<b>Planned activities:</b> <ul style="list-style-type: none"> <li>• Design and Production of IEC materials</li> <li>• Conduct IEC campaigns on health promotion.</li> <li>• Provide Minimum Initial service package interventions.</li> <li>• Conduct Medical Outreaches</li> <li>• Provide psychosocial support (individual and group therapy).</li> <li>• Conduct blood donor mobilization in the host community.</li> </ul>

## Water, sanitation, and hygiene promotion

**Objective: To Increase access to clean safe water, improved sanitation facilities and promote hygiene to the refugee population in Mandera.**

**Planned activities:**

- Provide access to safe water through water trucking
- Provide water storage facilities
- Distribute point of use water treatment solutions (aqua tabs , PUR sachets)
- Provide improved sanitation facilities
- Conduct a refresher training for KRCS Volunteers on Participatory Hygiene and Transformation in Emergency (PHASTER)
- Conduct hygiene promotion activities.

**Objective: To enhance the capacity of KRCS to respond to the needs of the refugee population in Mandera.**

**Planned activities:**

- Communication and documentation
- Monitoring and Evaluation
- Dissemination of the Red Cross movement and International Humanitarian Law

### Capacity of National Society

The Kenya Red Cross Society has good response capacity and the ability to make rapid deployment for affected areas as well as put in place high readiness capacity for areas yet to be affected. With 63 branches, 8 regional offices and 70,000 volunteers, the National Society has capacities at regional levels to make an initial response, which can later on be reinforced by the headquarters both in human and material terms.

This capacity cuts across human, material, as well as planning and mobilization of response. The competency of the staff and volunteers cuts across relief, rehabilitation and development and ability to address all aspects of the disaster management cycle with proven track record. KRCS has a wide experience in managing similar emergency operations.

The KRCS has a fully functional North Eastern regional office in Garrisa and a branch office in Mandera that is currently engaged in the refugee response with technical support from the Head office. The National Society has already pre-positioned stock of emergency items in the region and the branch. It has at its disposal a large fleet base for deployment. Staff and volunteers to carry out the response are also on standby and some are currently engaged.

## How we work

*All International Federation assistance seeks to adhere to the [Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations \(NGO's\) in Disaster Relief](#) and is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering assistance to the most vulnerable.*

The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".

**Global Agenda Goals:**

- Reduce the numbers of deaths, injuries and impact from disasters.
- Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.
- Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.
- Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.

## Contact information

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

- **In Kenya:** Mr. Abbas Gullet, Secretary General, Kenya Red Cross Society, email: [gullet.abbas@kenyaredcross.org](mailto:gullet.abbas@kenyaredcross.org). Phone 254.20.60.35.93; 254.20.60.86.81/13 Fax:

254.20.60.35.89

- **In Kenya:** East Africa Regional Office; Alexander Matheou, Regional Representative, East Africa, Nairobi, phone: +254.20.283.5124; fax: 254.20.271.27.77; email: [alexander.matheou@ifrc.org](mailto:alexander.matheou@ifrc.org)
- **In Geneva:** Pablo Medina, Operations Advisor; phone: +41.22.730.43.81; fax: +41 22 733 0395; email: [pablo.medina@ifrc.org](mailto:pablo.medina@ifrc.org)

*For Performance and Accountability (planning, monitoring, evaluation and reporting (enquiries):*

- In **IFRC Africa Zone:** Terrie Takavarasha; Performance and Accountability Manager, Johannesburg; Email: [terrie.takavarasha@ifrc.org](mailto:terrie.takavarasha@ifrc.org); Phone: Tel: +27.11.303.9700; Fax: +27.11.884.3809; +27.11.884.0230

[<DREF budget and map below; click here to return to the title page>](#)

# International Federation of Red Cross and Red Crescent Societies

MDRKE013

05/11/2010

Budget Group	TOTAL BUDGET CHF
Shelter - Relief	6,000
	0
	0
	0
Construction - Materials	0
Clothing & Textiles	14,400
Food	0
Seeds & Plants	0
Water & Sanitation	73,543
Medical & First Aid	36,666
Teaching Materials	0
Ustensils & Tools	23,280
	9,600
<b>Total Supplies</b>	<b>163,489</b>
Land & Buildings	0
Vehicles	0
Computer & Telecom	0
Office/Household Furniture & Equipment	0
Medical Equipment	0
Other Machinery & Equipment	0
<b>Total Land, vehicles &amp; equipment</b>	<b>0</b>
Storage	6,000
Distribution & Monitoring	0
Transport & Vehicle Costs	10,400
<b>Total Transport &amp; Storage</b>	<b>16,400</b>
International Staff	0
	0
	7,920
	25,000
	0
Consultants	0
<b>Total Personnel</b>	<b>32,920</b>
Workshops & Training	5,989
<b>Total Workshops &amp; Training</b>	<b>5,989</b>
Travel	6,995
Information & Public Relation	6,660
Office Costs	600
Communications	400
Professional Fees	0
Financial Charges	0
Other General Expenses	5,000
<b>Total General Expenditure</b>	<b>19,655</b>
Cash Transfers to National Societies	0
Cash Transfers to 3rd parties	0
<b>Total Contributions &amp; Transfers</b>	<b>0</b>
Program Support	15,499
<b>Total Programme Support</b>	<b>15,499</b>
Services & Recoveries	0
Shared Services	0
<b>Total Services</b>	<b>0</b>
<b>TOTAL BUDGET</b>	<b>253,952</b>