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Disaster relief emergency fund (DREF) Kenya: Polio Outbreak

 International Federation
of Red Cross and Red Crescent Societies

DREF operation n° MDRKE019
GLIDE n° EP-2011-000174-KEN
23 November 2011

The International Federation of Red Cross and Red Crescent (IFRC) 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 emergency response. 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 314,019 has been allocated from the IFRC's Disaster Relief Emergency Fund (DREF) to support the Kenya Red Cross Society in conducting polio campaigns in 58 targeted districts to reach 2,122,964 children aged under five years as a contribution to the eradication of Polio in Kenya, following an outbreak in Nyanza Province. Unearmarked funds to repay DREF are encouraged.

Summary: Following confirmation of 2 Polio cases in Rongo District, Nyanza Province in September 2011, the Ministry of Public Health and Sanitation (MoPHS) with support of partners announced a 4 phase polio mop up campaign. The first and the second phases of the campaign were conducted from 24 to 28 September and 22 to 26 October respectively, targeting 32 districts in Nyanza Province. A total of 1,185,038 children under the age of five were vaccinated, corresponding to 129% of the MoH target.



A child being vaccinated by a health care worker during Round 1 and 2 vaccination. Photo: KRCS

However, the Ministry of Public Health and Sanitation indicates that 5,131,161 children aged under five years are at risk of Polio in six provinces based on past epidemiologic trends and patterns. It thus plans to conduct rounds 3 and 4 beginning November 2011. In support, DREF funds will be used to conduct social mobilization, sensitization and briefing of volunteers as well as pre-registration of children in order to immunize 2,122,964 under-five children (42% of the total at risk) in 58 targeted districts.

This operation is expected to be implemented over 2 months, and will therefore be completed by end January 2012; 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; here for a map of the affected area>](#)

The situation

Polio (poliomyelitis) is an acute, faecal-oral, contagious and infectious viral infection that can cause paralysis. Abortive and asymptomatic forms of polio don't go past the intestines and thus do not cause any paralysis in patients and can easily be managed. The Paralytic (symptomatic) form enters the bloodstream

At operational level, the Kenya RC through this DREF appeal plans to provide a total 3,542 volunteers, 209 coaches and 28 district focal persons to support social mobilization efforts. Public health managers, regional health officers, branch coordinators and health project officers, shall participate in regular planning and review meetings in the course of the campaigns at provincial, district and divisional levels with the Ministry of Public Health and Sanitation (chair) and other partners supporting the campaigns.

Red Cross and Red Crescent action

Kenya Red Cross staff and volunteers in partnership with the MoPHS and Ministry of Medical Services (MoMS) have been and will continue responding to the outbreak through various means as described below.

- Social Mobilization/advocacy interventions (health education/campaigns and awareness with emphasis on vaccination of the under fives in 209 divisions of 58 districts in Coast, Eastern, North Eastern, Rift Valley, Western and Nyanza provinces.
- Capacity building and sensitization of volunteers and coaches for effective implementation of the mass polio campaign.
- Pre-registration of all targeted children to ensure optimum vaccination of children thus acquiring necessary herd immunity for polio within the population. This shall be done 5 days prior to the actual start of vaccination.
- Logistical support to the campaign including support in transportation of staff and supplies, crowd management, record keeping and other clerical work at the vaccination post as delegated by the post in charge.
- House-to-house follow-up and referral (to health facility) of the non-vaccinated children after the campaign.



KRCS volunteer conducting social mobilization using a megaphone during Round 1 and 2 vaccinations. Photo: KRCS

The needs

The Ministry of Public Health and Sanitation indicates that 5,131,161 under five year old children are at risk of Polio in six provinces based on past epidemiologic trends/patterns of spread. Priority needs for KRCS include social mobilizing, sensitization and briefing of volunteers as well as pre registration of children. This is aimed at enhancing effective polio campaign in 58 targeted districts to reach 2,122,964 under five children.

The proposed operation

The overall aim of this operation is to provide emergency assistance to vulnerable communities as a contribution to the eradication of Polio in Kenya, hence reducing morbidity, mortality and disability attributable to Polio epidemics. The involvement of Kenya RC in Polio Mop up campaign will involve three phases

- Volunteer training and orientation; this will be done jointly with MoPHS and vaccination teams.
- Social mobilization involving door to door campaigns, organized social gatherings including schools, churches and markets; this will be done prior to the immunisation start-up. Registration of all children aged below five years in all households visited in the target districts will be done.
- Post campaign Follow-ups; the volunteers will re-visit all the households to ensure that the registered children were immunized. Those not immunized will be referred to the nearest health facilities for the polio vaccines.
- Capacity building: a training will be organized for volunteers, staff and MoPHS field staff on social mobilization in emergencies, investigation and management of epidemics. An inventory of the trained people will be kept so that they can be deployed to respond incase of future health emergencies

KRCS volunteers from 28 of KRCS branches, team led by MoPHS health officers from the respective divisions shall carry out social mobilization/community awareness campaigns in the 58 targeted districts. Various Social Mobilization strategies shall be used. These include:

- **House-to-house visits:** Volunteers shall be allocated households and conduct visits. These households shall be proximal to the volunteers' areas of residence. During the visits, the volunteers shall educate the residents about basics of Polio transmission and prevention as well as share information on venues and dates for the campaign.
- **Sensitization through public meetings and forums:** Some of the public avenues that shall be used to pass on information include schools, Chiefs *Barazas* and market days. These shall be mapped and information passed on to the public through these avenues.
- **Media campaign:** The media is targeted as one of the avenues to reach out to the public with key messages of the campaign. KRCS shall partner with the government in airing media spots to encourage children aged under five to be vaccinated.
- **IEC materials:** Over 10,000 posters bearing relevant information on Polio will be delivered to the affected districts to create demand for uptake of polio vaccination services.

Emergency health	
Outcome 1: 2,122,964 children aged under five in target at-risk areas are immunized.	
Outputs (expected results)	Activities planned:
<ul style="list-style-type: none"> • 3,542 KRCS volunteers have the capacity to conduct polio campaigns. • Social mobilization activities completed in all target areas of 58 districts. • 100% of 2,122,964 children aged under five are in target areas are registered for immunization • Immunization verification completed in all 58 districts. 	<ul style="list-style-type: none"> • Training and orientation of 3,542 volunteers on polio immunization campaign, including code of conduct, key messages to be delivered and procedures to be followed. • Social mobilization through schools, house to house, organized community gatherings (<i>Barazas</i>), and existing social gatherings including churches, mosques and markets. • Community Education on importance of immunization, vaccine safety and encouraging parents to have children immunized. • Registration of approximately 2,122,964 children aged under five • Conducting follow-ups for immunization verification
Logistics	
Outcome 2: Timely and effective support is provided to the polio campaign team to ensure optimum immunization coverage	
Outputs (expected results)	Activities planned:
Adequate logistical support for effective movement of vaccination teams and supplies is ensured	<ul style="list-style-type: none"> • Provide back-up to MoPHS in transportation of supplies, staff and volunteers and their supervisors during the social mobilization and immunization activities.

	<ul style="list-style-type: none"> • Provide communication system back up in remote areas through use of vehicle installed HF radio system in areas with poor communication infrastructure.
Capacity Building	
Outcome 3: KRCS has the necessary skills to conduct effective social mobilization to ensure effective management of disease outbreaks.	
Outputs (expected results)	Activities planned:
<ul style="list-style-type: none"> • Increased capacity of KRCS volunteers in responding to Polio Outbreak and similar health emergencies. 	<ul style="list-style-type: none"> • Conduct trainings for volunteers, staff and MoPHS field staff on social mobilization in emergencies, investigation and management of epidemics • Set up and maintain and inventory of trained staff and volunteers for future involvement in outbreak management

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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IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

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.

DREF OPERATION

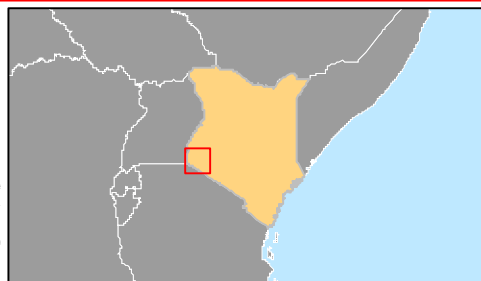
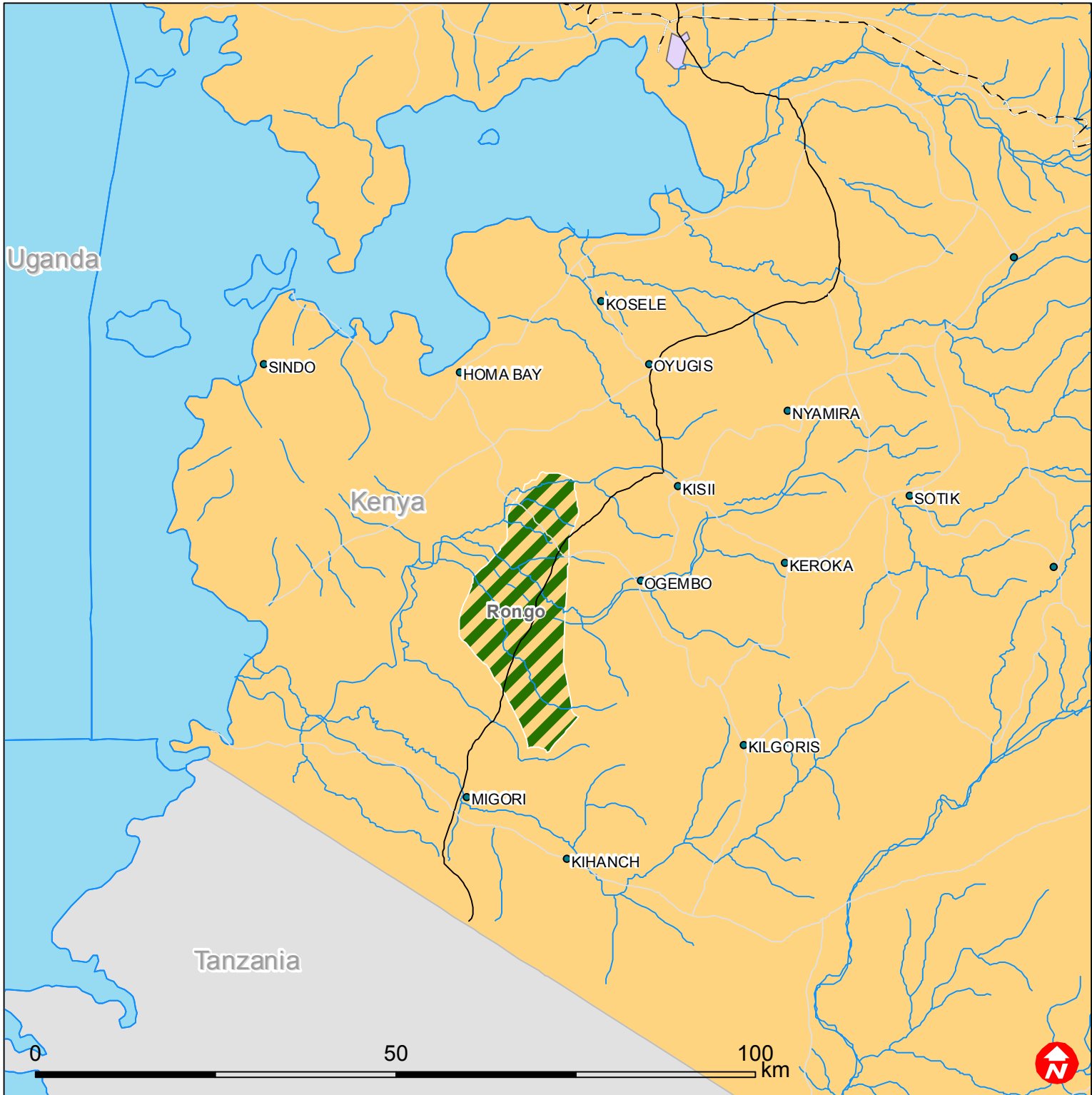
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Kenya: Polio (MDRKE019)

Budget Group	DREF Grant Budget CHF
Shelter - Relief	
Shelter - Transitional	
Construction - Housing	
Construction - Facilities	
Construction - Materials	
Clothing & Textiles	
Food	
Seeds & Plants	
Water, Sanitation & Hygiene	
Medical & First Aid	
Teaching Materials	
Utensils & Tools	
Other Supplies & Services	
Emergency Response Units	
Cash Disbursements	
Total RELIEF ITEMS, CONSTRUCTION AND SUPPLIES	0
Land & Buildings	
Vehicles Purchase	
Computer & Telecom Equipment	
Office/Household Furniture & Equipment	
Medical Equipment	
Other Machinery & Equipment	
Total LAND, VEHICLES AND EQUIPMENT	0
Storage, Warehousing	
Distribution & Monitoring	
Transport & Vehicle Costs	45,295
Logistics Services	
Total LOGISTICS, TRANSPORT AND STORAGE	45,295
International Staff	
National Staff	
National Society Staff	22,609
Volunteers	153,798
Total PERSONNEL	176,407
Consultants	
Professional Fees	
Total CONSULTANTS & PROFESSIONAL FEES	0
Workshops & Training	65,187
Total WORKSHOP & TRAINING	65,187
Travel	
Information & Public Relations	2,999
Office Costs	
Communications	4,966
Financial Charges	
Other General Expenses	
Shared Support Services	
Total GENERAL EXPENDITURES	7,965
Programme and Supplementary Services Recovery	19,165
Total INDIRECT COSTS	19,165
TOTAL BUDGET	314,019



Kenya: Polio



 Affected district