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Emergency appeal final report

Kenya: Complex Emergency

 International Federation
of Red Cross and Red Crescent Societies

Final report

Emergency appeal n° MDRKE023 30 November, 2013

Period covered by this Final Report: June 2012 until June 2013.

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

Appeal coverage: 5% [<click here to go directly to the final financial report or here to view the contact details>](#)

Appeal history:

- This [Emergency Appeal](#) was initially launched on 11 June 2012 for CHF 20,419,397 for 12 months to assist 465,844 beneficiaries.
- 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 in West Kenya, Rift Valley and Coast.
- Operations updates n° 1 and n° 2 and a [6-months summary](#) update of the operation were issued on 3 March, 10 March and 8 April 2013 respectively to highlight the initial response and progress of the response operation.



Kenya Red Cross Society distributes food after the floods in the Tana Delta. Photo/ KRCS

Summary: The complex Emergency Appeal was launched in response to complex humanitarian conditions to support communities affected and displaced by disasters in Kenya, through a holistic and integrated community based approach. The emergency situations that needed urgent response from Kenya Red Cross National Society (KRCS) involved floods disasters displacing many communities, drought situations which created food insecurity, and conflict related displacement. Floods affected several parts of the country since the beginning of the rains in March 2012. Communities affected by drought during 2011 had not yet recovered and were experiencing food insecurity and high rates of acute malnutrition. The target beneficiaries were likely to slide into full-scale emergency mode by July 2012 due to erratic and unfavorable rainfall in those districts. Several areas were also experiencing armed inter-tribal clashes triggered by competition for natural resources and competing political interests associated with the implementation of the new Constitution of Kenya and upcoming elections.

This complex Emergency Appeal sought to assist these communities affected by disasters and at risks, through responding to the needs of beneficiaries affected by the drought, conflicts, floods, and other emergencies. The funds have also supported preparedness activities in Nairobi, Tana delta and western

regions of the country. Escalating conflicts has been one major concern, during the reporting period. The funds contributed towards this appeal, have enabled the society respond to needs arising from inter clan conflicts in Tana Delta, Wajir and Moyale districts, riots in Mombasa, and floods in Western Kenya.

Despite undertaking the emergency response in a highly volatile environment, the KRCS, with the support of IFRC and Partner National Societies (PNS), was able to provide emergency health care through daily medical outreach activities to 33,434 Internally Displaced Persons (IDPs) in 327 camps in Rift Valley, West Kenya, Coast region and Lower Eastern region. Further, KRCS provided standard Non-Food Items (NFIs) kits to the 7,956 displaced households in the established camps, and improved the access to safe water to 43,630 persons. Nutrition support was provided to particularly vulnerable children and individuals and special attention was given to persons with disabilities as well as individuals with protection needs.

KRCS also initiated the reconstruction of 430 houses out of the planned 808 houses for conflict affected and vulnerable households.

KRCS supported peace talks between two warring communities that resulted in the signing of a peace agreement, ultimately leading to the cessation of attacks and counter attacks between the two communities. The peace enabled the re-opening of schools and other essential medical facilities for the benefit of the communities.

Lessons learned:

- The Society reports positive results following its presence in various affected sites though limited funding to scope further the DRR initiatives.
- Availability of integrated health interventions has contributed to the overall improvement of health outcomes for the entire target community.
- The Society started with basic curative services but latter expanded its services to ante/natal care and nutritional support.
- The scaling up of the interventions was borne out of beneficiary needs identified through nutritional assessments as well gaps in services rendered.
- The low level of funding of the appeal, limited the possibilities for implementing all planned activities. In particular disaster preparedness and DRR activities could not be implemented in the high risk areas.

Finance status: The balance of CHF 23, 480 at the close of the operation will be transferred into IFRC Regional Operations Coordination activities in support of National Society emergency operations.

On behalf of KRCS, IFRC would like to extend thanks to the partners that contributed to the appeal, including the American Red Cross, the Japanese Red Cross, Swedish Red Cross and the Red Cross of Monaco. Contributions were also made from corporate partners in country such as the Safaricom Foundation and the Kenya Commercial Bank.

The situation

Kenya continued to experience emergencies linked to natural disasters such as drought, floods, ethno-political and resource based conflicts, and outbreaks of diseases, with humanitarian consequences on the affected population. The 2011 short-rains and 2012 long-rains seasons brought relief to protracted drought conditions, which contributed to reduce the number of food-insecure people in Kenya from 3.75 million at the beginning of the year to 2.1 million as of October¹. Between January and October 2012, there were reduced malnutrition levels in some arid and semi-arid areas in the counties of Turkana, Mandera, Moyale and Kajiado. During that time, the expected caseload of children under 5 years of age that suffered from acute malnutrition declined from 385,000 to 300,000 children. However, the situation in Wajir County and Mandera East did not improve; these counties accounted for 75,644 (25 percent) of expected caseloads.

When approaching the March 2013 elections, there was increased inter-communal violence in parts of Mandera. In addition, attacks on schools became an emerging issue (information confirmed by the Ministry of Education and the district steering group in Isiolo). There were still more than 80,000 people displaced by inter-communal violence in areas like Moyale, Tana Delta, Isiolo, Mandera and Wajir in October 2013. Between November 2012 and May 2013, varied incidents of floods and conflict in Isiolo, Moyale and Tana delta districts displaced communities and disrupted the attendance and learning in schools, affecting at least 6,000 pupils.

Partners were making sustained efforts to align with national policies and initiatives such as, Ending Drought Emergencies campaign, the newly passed IDP bill and policy, and the draft disaster risk management policy. The 2011-2013 Kenya Emergency Humanitarian Response Plan and multi-year strategy, and the Kenya Vision 2030 also provided an opportunity and mechanisms for stakeholders not only to plan responses to immediate acute needs, but also to integrate resilience in humanitarian programming. 2013 marks the end of the multi-year strategy and the transition to longer-term programming through the engagement of development frameworks.

Coordination and Partnerships

During the intervention, KRCS co-chaired the Rapid-Onset Disaster Committee with the Office of the President. Participants in the Committee included international NGOs, UN agencies and Government ministries. KRCS also participated in the Kenya Food Security Steering Group (KFSSG), the main forum for coordination of food security matters. During the operation, KRCS coordinated closely with the Ministry of Special Programmes, National Disaster Operations Centre (NDOC) in the Office of the President, Kenya Wild Life Service, the Kenya Police and other Government departments. The coordination meetings regarding the floods were held at the national level with government ministries.

KRCS also participated in all the coordination mechanism in place in the target areas (the Rift Valley, West Kenya, Coast and the lower and North Eastern regions), which included Inter-agency meetings chaired by the District Steering Group. The participation of KRCS in these forums enabled the National Society to coordinate and exchange information with other stakeholders operating within the areas for efficient response. In addition, the Society has been working jointly with the officials from the Ministry of Education in order to facilitate the return of children to the schools.

Other relief organizations that were operating within the target areas during the emergency intervention has included, United Nations Children's Fund (UNICEF), United Nations High Commissioner for Refugees (UNHCR), United Nations Office for the Coordination of Humanitarian Affairs (OCHA), International Organization for Migration (IOM), Action Against Hunger (ACF), CARE, Catholic Relief Services (CRS - USCC), Doctors Without Borders, , International Rescue Committee (IRC), Lutheran World Federation, Mercy Corps (MC), Oxfam, Save the Children, The Office of U.S. Foreign Disaster Assistance (OFDA), and World Vision International.

KRCS worked in close partnership and coordination with IFRC and International Committee of the Red Cross (ICRC) during the operation.

Red Cross and Red Crescent action

¹ Emergency Humanitarian Response Plan for Kenya 2013.

Following the displacements of communities and the rapid assessments conducted by the KRCS Disaster Response Teams in Branches in the affected counties, the KRCS carried out distributions of NFIs based on the immediate needs, conducted emergency health care services, water, sanitation and hygiene promotion activities. The stocks had been prepositioned in the branches as a preparedness measure, which enabled a rapid response to the different emergency situations.

KRCS supported the return process of the households to their areas of origin through undertaking household reconstruction activities as well as spearheading the peace talks through engaging the warring communities in talks aimed at encouraging peaceful coexistence. The reconstruction of 430 houses for conflict affected and vulnerable households were supported outside the appeal by other partners, including Safaricom.

6,857 Red Cross Messages (RCMs) were facilitated and distributed between family members. These activities were supported by ICRC. ICRC also supported DRR interventions in Mt. Elgon area.

Bilateral PNS support for activities linked to the appeal has included the Canadians Red Cross that supported DRR activities in West Pokot and Marakwet, and Norwegian Red Cross that supported activities in West Kenya.

Table 1: Items distributed in KRCS branches under the Complex Emergency Appeal.

Thematic area	Beneficiaries reached
Relief (NFI kits)	7,956 Households
Relief (Emergency food)	59,029 People
Emergency Health care	33,434 People
Water Sanitation and hygiene promotion	43,630 People

Table 2: Breakdown of displaced persons per location, gender and vulnerability/needs.

S/N	Location/Region	Vulnerability/Needs	Gender		Total Displaced	Remained in Camps
			Male	Female		
1	Rift Valley.	Relief supplies NFIs, Emergency Health and Clean water.	6,274	8,666	14,940	6735
2	West Kenya.	Food, NFIs, Emergency Health and Clean water.	6,733	9,689	16,422	5747
3	Coast.	Relief supplies NFIs, Emergency Health, Shelter and Water.	12,290	15,022	27,312	27,300
4	Lower Eastern	Relief supplies NFIs, Emergency Health, Shelter and Water.	3,651	3,957	7,608	1,902
5	North Eastern	Relief supply, Emergency Health care, NFIs, Water Sanitation and hygiene promotion.	11,373	12,825	24,198	6,049
Total			40,321	50,159	90,480	47,733

Achievements against outcomes

Overview

Through the support from the IFRC and PNS, the national society implemented activities responding towards the needs of displaced and affected populations in the set up IDP camps.

The Emergency appeal enabled KRCS to provide emergency health care through daily medical outreach activities to 33,434 internally displaced persons (IDPs) in 327 camps in Rift Valley, West Kenya, Coast region and Lower Eastern region. Further, KRCS provided NFI kits to the 7,956 displaced households in the established camps, and improved the access to safe water to 43,630 persons. Nutrition support was provided to particularly vulnerable children and individuals and special attention was given to persons with disabilities as well as individuals with protection needs.

KRCS supported the initiation of peace talks that resulted in the signing of a peace agreement between two warring communities on 25 January 2013, ultimately leading to the cessation of attacks and counter attacks

between the two communities. The peace enabled the re-opening of schools and other essential medical facilities for the benefit of the communities.

The lack of funding towards the appeal, resulted in prioritization of activities, thus some of the planned undertakings carried out, such as distributions of high energy biscuits to specially vulnerable individuals, rehabilitation of classrooms, early recovery activities for farmer communities, preparedness and risk reduction activities, and many of the watsan activities planned.

Relief	
Outcome: 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.	
Outputs (expected results)	Activities planned
<ul style="list-style-type: none"> The needs of displaced and affected populations are continuously assessed and addressed appropriately 	<ul style="list-style-type: none"> Conduct multi sectorial detailed assessments with involvement of relevant stakeholders for needs and gaps identification Shelter materials and Non Food Items distributed as per SPHERE standards to the displaced population Distribution of high energy biscuits especially to children under the age of 5, pregnant and Lactating women and the aged. Food is provided by Government) Rehabilitation of classrooms that were used in provision of temporary shelter Facilitating of relocation of school going children from affected schools to safer schools for continuous learning.
<ul style="list-style-type: none"> IDP camps are well managed in partnership and in consultation with community leaders and representatives 	<ul style="list-style-type: none"> Coordination of agencies providing humanitarian services in the camps Management of camps including establishment of representative committees including security committees Identification of cases requiring protection; mainly victims of gender based violence and other crimes, and provision of protection services Conduct tracing and family unification services in populations displaced by floods and civil unrest. Identification of populations with special needs including People Living with Disabilities, people with chronic illnesses, unaccompanied minors and the aged for assistance. Carry out initial households registration of the displaced persons and continuously update the registers

Impacts: The Emergency response activities in Kenya were preceded by a rapid assessment carried out by KRCS, across the five regions, who were first to respond to the crisis. Information was gathered using a KRCS standardized sudden onset disaster form which collected information pertinent to the needs of the affected communities. Data was gender disaggregated and highlighted the most vulnerable persons within the target community including the disabled, elderly among others.

The National Society conducted multi sectorial detailed assessments in the affected five (5) regions with involvement of relevant stakeholders in the regions. This was in a bid to identify the needs and gaps of implementation. Assessment findings highlighted that all affected households were either residing in IDP Camps or were integrated with relatives and friends in nearby villages. During the assessment the team observed that the communities were highly polarized following both the conflict and floods in 2012. A high level of trauma was also noted amongst the beneficiaries who had sustained serious injuries, lost their homes and/or family members and had to flee for their own lives. At least 118 persons lost their lives as a result of the conflict. The assessment recorded approximately 47,733 persons displaced by the conflict who had settled in different parts of the districts. A majority of the displaced were integrated with family and friends.

The Society distributed NFIs to 7,956 Households. In addition, re-location of school going children was facilitated in nine schools. Within the period, a total of 48 meetings were conducted in effort to contribute to effective management of the 327 IDP camps that had been established in the five target regions. The National Society also continued to conduct tracing services, household registration and identification of needs among the displaced persons in the five regions. A total of 156 cases requiring protection were identified, while 1,434 persons living with disabilities (PLWDs) were identified and supported.

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"> • Enhanced food production among farming communities affected by floods to contribute towards sustainable food security • Support the agricultural communities whose farmlands were destroyed, with certified fast maturing, high yield seeds and seedlings • Training of district officials and NGOs in household Economy Approach and its application to vulnerability and early recovery analysis • Updated livelihood baseline data and livelihoods profile for the affected areas in 	<ul style="list-style-type: none"> • 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). • Distribution of crop production inputs to the most vulnerable members of the farming community (Seeds: maize (DLC variety) 30 MT, Maize seeds (PH4 Variety) 4 MT², Millet 1 MT, Sorghum 2 MT, Cow peas 2 MT, Beans 7.2 MT, Kales 1MT and Rice 4.4MT). • Procurement of fertilizers to improve crops yields in the affected farms. • Training on basic agronomic practices to enhance crop yield. • Training on post-harvest management to reduce crop losses including storage. • Provision of 10,000 tree seedlings to be in Gwassi, Suba district. Seedlings will be sources from the Kenya Forestry

² Procurement of seeds will be done to support early recovery, restore livelihoods, increase community resilience and reduce dependency of food aid in the coming months. Two varieties will be procured for use in two climatic zones currently affected by the floods. The varieties include PH4 variety that is known to do well in the Rift Valley and the DLC that is early maturing and is recommended for the coastal belt.

Nyanza, Rift valley and coastal areas.	<p>Service.</p> <ul style="list-style-type: none"> • Technical support (DRR, risk profile, hazard mapping among others in areas affected by floods for the first time i.e. Gwassi).
<p>Long term interventions</p> <ul style="list-style-type: none"> • Food availability improved through increased production and adoption of improved farming practices 	<ul style="list-style-type: none"> • Provision of high quality seeds and farm implements to farmers in the Malindi, Magharini, Nyando, Gwassi and Homa Bay. • Collaboration with KARI in supply of 1,000,000 cuttings of drought resistant, disease free cassava to affected farmers in Magarini, Machakos and West Kenya Regions. • Facilitate adoption of improved farming practices among vulnerable groups through trainings in Malindi, Magharini, Nyando, Gwassi and Homa-Bay.

Impacts: KRCS implemented agricultural activities in the areas of Kau, Ozi and Charra. The project activities sought to provide the local community with sustainable livelihoods options as a strategy of positively influencing the eradication of conflict in the Tana Delta since unsustainable livelihood and the competition for limited resources was frequently cited as a reason for the eruption of conflict. Beneficiaries that returned to Chara location also asked for seeds in order to enable them to time their planting and harvest with the rainy seasons.

Under this component of the appeal, the KRCS procured 1,200 hand held hoes and 5 metric ton of cowpeas seeds as well as fertilizers to be distributed to 7,955 farmer households. Distributions were undertaken between March and May 2013, after having initially been ceased due to conflict reaching a total of 7,955 farmer households.

In collaboration with KARI, a total of 1,000 affected farmers were supported with cuttings of drought resistant, disease free cassava in Magarini, Machakos and West Kenya Regions and 33,434 beneficiaries facilitated for adoption of improved farming practices among vulnerable groups through trainings in Malindi, Magharini, Nyando, Gwassi and Homa-Bay.

Challenges: Some of the planned activities could not be implemented due to limited funding.

Disaster Risk Reduction	
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.	
Outputs (expected results)	Activities planned
<ul style="list-style-type: none"> • Flood and landslide affected communities are better prepared to predict, respond and recover to disasters 	<ul style="list-style-type: none"> • Train 180 volunteers and staff on Vulnerability Capacity Assessment (VCA) guidelines and tools. • Conduct VCA with communities in 6 targeted counties. • Develop community hazard maps for each of the mapped communities. • Develop community contingency plans and community based early warning systems • Develop mitigation micro projects in targeted communities based on VCA findings

	<ul style="list-style-type: none"> Public awareness and public education for DRR activities
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Impacts: This component of the appeal could not be carried out due to low funding levels of the appeal.

However, KRCS managed to secure some funding through bilateral support towards various DRR initiatives. Canadian Red Cross supported DRR activities in West Pokot and Marakwet, while Norwegian Red Cross supported activities in West Kenya. Additionally, KRCS with ICRC support implemented DRR interventions in Mt. Elgon area.

Emergency Health and Care

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.

Outputs (expected results)	Activities planned
<ul style="list-style-type: none"> Improved access to basic healthcare services among the populations affected and displaced by floods and communities affected by acute malnutrition in drought affected areas. 	<ul style="list-style-type: none"> Support the MoPHS in delivering health care 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"> Treatment of common ailments using standard MoPHS protocols and guidelines. Accelerated routine vaccination with emphasis to measles and polio vaccination (these have caused outbreaks in recent past). 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. Screening and management of Severe Acute Malnutrition in Partnership with the MoPHS and UNICEF in both flood affected and drought affected areas. Procurement and distribution of medical supplies to areas supporting medical outreaches as well as hospitals without supplies. Design and Produce assorted IEC materials to support health education by health promotion teams. Support Ministry of health in the implementation of high impact nutrition interventions particularly IMAM programmes, breastfeeding promotion, deworming, Vitamin A supplementation

	<p>and zinc supplementation for cases presenting with diarrhea. Support will mainly be in the form of community mobilization and outreach services.</p> <ul style="list-style-type: none"> • Provision of post trauma counseling and psycho-social support to survivors and their families and first responders (KRC volunteers).
<ul style="list-style-type: none"> • Increased awareness on disease prevention and control by affected communities. 	<ul style="list-style-type: none"> • Capacity enhancement for KRCS Volunteers and MoHCHEWs participating in health promotion activities, disease surveillance as well as mortality surveillance. • 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. • Conduct trainings of KRCS regional and selected branch staff on Basic Health care, Public Health in Emergencies and Leadership. • 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.
<ul style="list-style-type: none"> • 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. 	<ul style="list-style-type: none"> • 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. • Development of volunteers/CHWs kit with community health manuals and key health messages in line with community health strategy. • Recruit and support 10 Nutrition Officers to continually collect and compile relevant information to inform nutrition interventions. • 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. • 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).
<ul style="list-style-type: none"> • Improved preparedness and enhanced capacity to respond to epidemics. 	<ul style="list-style-type: none"> • Procure and preposition 5 IEHK and 5 supplementary modules and 3 malaria modules. • Procure emergency nutrition supplements for management of severe acute malnutrition. • 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. • Continuous monitoring, evaluation and development of

	operational updates.
<ul style="list-style-type: none"> Nutrition and health status constantly monitored 	<ul style="list-style-type: none"> Linking households with children in feeding programmes, pregnant, lactating women to livelihood projects and social protection programmes including cash transfers. 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. Participation in the District food security steering group meetings held on a monthly basis and support (refreshments for meetings, stationery) on need basis. Set up inter sectorial 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.

Impacts: The difficult security situation in the target areas consequently limited access to medical care when the beneficiaries were cut off from accessing medical care. Also, the medical staff could not safely reach the health facilities in the Tana Delta. During several months, the medical facilities in the affected area remain closed as a result of both the conflict and national nurse strike. KRCS therefore provided first aid services as first responders to villages following fresh attacks. This was sometimes a very difficult task for the KRCS medical staff and volunteers, due to the seriousness of the injuries. Patients that required specialized care were stabilized before transferred to established hospitals. For Tana Delta, personnel from the medical team had been operating twice a week (Monday and Friday) upon request of the Ministry of Health in order to meet the needs of beneficiaries residing near the areas.

Emergency health care was provided through emergency medical outreach activities at the site of beneficiary settlement (IDP camps) in the five targeted regions. Analysis of data collected from the outreach activities revealed that respiratory diseases were the most common ailment amongst the beneficiaries. Malaria, intestinal worms, skin diseases, diarrheal diseases and pneumonia respectively were also frequently diagnosed. That trend was sustained for the entire duration of the project.

Many villages were located along the Tana Delta River and mosquito infestation was observed during the operation. Another concern was the consumption of raw water from the Tana by beneficiaries. Poor storage and handling practices were observed amongst the target beneficiaries. Hygiene promotion activities as well as the distribution and demonstration of the use of water purification chemicals remained a high priority.

KRCS procured drugs and other medical consumables used in the implementation of the emergency health component of the project. 33,434 persons benefitted from medical outreach activities and the curative services that were provided. KRCS integrated psychosocial support into its health services, through its psychosocial support programme counselors, in order to support the healing of community members from trauma. High levels of trauma were noted amongst the beneficiaries immediately following the attacks and counter attacks. The psychosocial team employed various methods of counseling including group therapy, individual therapy as well as child therapy sessions. A total of 2,376 beneficiaries were provided with this psycho-support. Cases that were complex were referred for specialized care. Additionally, 29,906 persons were supported with nutrition interventions in Mandera (5,109), Turkana (5,856), Wajir (2,807), Garissa (3,271), Samburu (4,362), West Pokot (3,009), Moyale (2,766) and Tana River (2,726). In total 2,726 children identified in Tana River for malnutrition programming

A total of 20 KRCS staff were trained in disease prevention, surveillance and control as well as in public health in emergencies

Water, Sanitation and Hygiene Promotion

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

Outputs (expected results)	Activities planned
<ul style="list-style-type: none"> • Improved access to sustainable safe water 	<ul style="list-style-type: none"> • Distribute Point of Use Water Treatment Chemicals to households without portable water increase water safety targeting 350,000 people. • Chlorination of 500 water sources mainly boreholes and shallow wells that were contaminated by flood waters. • Rehabilitate 50 shallow wells and boreholes that were destroyed by floods. • Rehabilitate latrines in schools hosting displaced populations. • Drill and equip 9 borehole motorized water schemes in areas that received depressed rainfall and were not targeted by the drought operation • Disinfection of 500 pit latrines. • Construction of 500 emergency latrines in displacement camps. • Rehabilitate/pipeline extension targeting 10 existing water supply schemes to enhance water supply to target community. • Formulation and training of 69 water management committees to manage the constructed boreholes and /rehabilitated shallow well. • Training water point caretakers/ operators targeting 69 water points. • Construction of 35 school rain water harvesting systems, 5 in each of the target regions. • Deployment of mass water treatment plants to displaced communities without access to drinking water.

Outcome 5 (b): To promote hygiene and appropriate gender responsive sanitation for an estimated 280,760 floods affected persons.

<ul style="list-style-type: none"> • Improved health status of the population through behavior change and hygiene promotion. • Key hygiene messages disseminated effectively at household /community level and positive hygiene behavior adopted by 	<ul style="list-style-type: none"> • Train 200 volunteers/TOTs on PHAST and CLTS methodologies. • Cascade the PHAST trainings to the community level by training KRCS volunteers. • Conduct hygiene promotion and awareness campaigns in affected communities. • Produce and distribute generic hygiene promotional IEC
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<p>targeted households.</p> <ul style="list-style-type: none"> Sanitation access improved. 	<p>materials to support hygiene promotion activities.</p> <ul style="list-style-type: none"> Construction of 100 emergency latrines units in displacement camps. Rehabilitation of sanitation facilities in schools hosting Internally Displaced Persons. Construction of 1000 household latrines.
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Impacts: KRCS distributed Aqua tabs to 20,630 beneficiaries in Riketa, Dide Waride, Witu, Mpeketoni, Vipingoni as well as Kilelengwani, to enable the affected households to access safe water. Water purifying equipment, covered from outside the appeal, was later installed to enable safe water for the IDPs.

Most of the planned activities could not be implemented due to limited funding.

Community Preparedness and Response

Outcome 6: To strengthen community civil unrest resolution mechanisms in areas of potential civil unrest.

Outputs (expected results)	Activities planned
<ul style="list-style-type: none"> A more prepared community towards civil unrest and its related effects Reduced frequency and intensity of armed civil unrest Strengthened District Peace Committees and its constituent structures Enhanced capacities of the district peace committees in the affected areas to analyze civil unrests scenarios and generate responses Peaceful coexistence and sharing of the scarce resources Increased participation of women and youths in civil unrest resolution 	<ul style="list-style-type: none"> Roll out a civil unrest prevention strategy alongside other food security contingency and livelihoods recovery plans. Strengthening and empowering traditional civil unrest resolving mechanism. Conduct quick trainings on early warning and civil unrest analysis in hotspot areas. Organize and fund a joint meeting between district peace committees, water users associations, pasture management committees, cross border peace committees and district Task Forces. Capacity building for women and the youth through support for income generating activities in order to reduce poverty levels, and increase their roles in civil unrest resolution, management and prevention. Facilitate youth activities that encourage peace building such as sports and athletics.

Impacts: KRCS held regular peace meeting between the two communities in order to address grievances through dialogue. The communities perceived the initiation of development activities as a strategy for curbing conflict between the two communities.

KRCS supported a peace initiative under this component. The peace initiative commenced in January 2013 and resulted in the signing of the peace accord between the warring Pokomo and Orma communities. Ten members from both communities participated in the signing. KRCS facilitated dialogue between the two communities. The call for dialogue was made by community members who sought an end to the conflict within the area. Amongst the terms reached include the maintenance of peace by both communities, freedom

of movement between community territories and the surrender of arms. The activity was implemented in collaboration with the provincial administration as well as a peace committee comprising of community members (both men and women). The process has resulted in the reopening of schools and medical services in several areas.

Challenge: The relocation of beneficiaries to their areas of origin was difficult due to high levels of fear among the communities for renewed violence.

Logistics

Activities planned:

- KRCS will ensure a coordinated mobilization, reception, warehousing and dispatch of relief goods to the final distribution points.
- Transport relief supplies to final distribution points.
- Identify suitable warehouses for storage of relief items
- Maintain mobilization 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.

Impacts: Logistical support was provided as planned in primary and secondary transportation as well as warehousing in the field to enable rapid access to beneficiaries in targeted areas. Access to many of the conflict affected villages was very difficult and challenging, and oftentimes canoes and boats had to be used in flooded areas. During emergencies, these transport services were unavailable, and it remained a tremendous challenge to evacuate casualties, as was the case in Riketa and Kipao. On two occasions, KRCS provided evacuation by air for the injured persons.

Communications- Advocacy and Public Information

Activities planned:

- Produce bi weekly information bulletins and share with relevant stakeholders.
- Facilitate field trips to affected areas for both RC/RC media team and external media
- Monitor media coverage of floods and recovery activities.
- Produce IEC materials on disaster preparedness and response focusing on early actions and resilience.
- Share case studies and pictures
- Produce and air radio/TV spots, print adverts/supplements on KRCS interventions disseminating Lessons learnt and best practices but also as a beneficiary communication tool.
- Organise trainings with and for journalists to raise awareness on KRCS holistic response aiming at building more resilient communities to prevent the next disaster
- Develop beneficiary communication tools to empower people by giving them a voice to participate in

their own recovery

- Produce key advocacy and policy documents to share lessons learnt and best practices on early actions and building community resilience
- Organise events with key stakeholders for discussion and dissemination.

Impacts: The KRCS Public Relations Office aimed to coordinate awareness and publicity activities to sensitise the public and media on the situation on the ground and to share lessons learnt and best practices not only to respond to this emergency but to prevent the next one. KRCS ensured a regular flow of information, in particular through the publications of information bulletins on their website.

Contact information

For further information specifically related to this operation please contact:

- **Kenya:** Abbas Gullet, Secretary General, Kenya Red Cross Society, Phone 254.20.60.35.93; 254.20.60.86.81/13 Fax: 254.20.60.35.89; email: gullet.abbas@kenyaredcross.org
- **IFRC Regional Representation:** Finnjarle Rode, Regional Representative for East Africa; Nairobi; phone: +254 20 283 5000; email: finnjarle.rode@ifrc.org
- **IFRC Africa Zone:** Daniel Bolaños, Disaster Management Coordinator for Africa; Nairobi; phone: +254 (0)731 067 489; email: daniel.bolanos@ifrc.org
- **IFRC Geneva:** Christine South, Operations Quality Assurance Senior Officer; phone: +41.22.730.45 29; email: christine.south@ifrc.org
- **IFRC Zone Logistics Unit (ZLU):** Rishi Ramrakha, Head of zone logistics unit; Tel: +254 733 888 022/ Fax +254 20 271 2777; email: rishi.ramrakha@ifrc.org

For Resource Mobilization and Pledges:

- **In IFRC regional representation:** Diana Ongiti, Senior RM Officer; phone +254 20 2835 276; email: diana.ongiti@ifrc.org

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

- **In IFRC Zone:** Robert Ondrusek, PMER/QA Delegate, phone: +254 731 067277; email: robert.ondrusek@ifrc.org

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 (NGO's) 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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Saving lives, changing minds.



The 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.
-

Disaster Response Financial Report**MDRKE023 - Kenya - Complex Emergency**

Timeframe: 11 Jun 12 to 30 Jun 13

Appeal Launch Date: 11 Jun 12

Final Report

Selected Parameters

Reporting Timeframe	2012/6-2014/2	Programme	MDRKE023
Budget Timeframe	2012/6-2013/6	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

I. Funding

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
A. Budget						20,419,397	
B. Opening Balance							
Income							
Cash contributions							
<i>American Red Cross</i>		383,583				383,583	
<i>Japanese Red Cross Society</i>		253,771				253,771	
<i>Red Cross of Monaco</i>		12,042				12,042	
<i>Swedish Red Cross</i>		354,106				354,106	
C1. Cash contributions		1,003,502				1,003,502	
C. Total Income = SUM(C1..C4)		1,003,502				1,003,502	
D. Total Funding = B + C		1,003,502				1,003,502	

* Funding source data based on information provided by the donor

II. Movement of Funds

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
B. Opening Balance							
C. Income		1,003,502				1,003,502	
E. Expenditure		-980,022				-980,022	
F. Closing Balance = (B + C + E)		23,480				23,480	

Disaster Response Financial Report

MDRKE023 - Kenya - Complex Emergency

Timeframe: 11 Jun 12 to 30 Jun 13

Appeal Launch Date: 11 Jun 12

Final Report

Selected Parameters

Reporting Timeframe	2012/6-2014/2	Programme	MDRKE023
Budget Timeframe	2012/6-2013/6	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

III. Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability		
	A					B	A - B	
BUDGET (C)			20,419,397			20,419,397		
Relief items, Construction, Supplies								
Shelter - Transitional	5,882,353						5,882,353	
Clothing & Textiles	621,698						621,698	
Food	1,874,118						1,874,118	
Seeds & Plants	323,195						323,195	
Water, Sanitation & Hygiene	3,746,353						3,746,353	
Medical & First Aid	408,706						408,706	
Utensils & Tools	2,334,331						2,334,331	
Other Supplies & Services	156,040						156,040	
Total Relief items, Construction, Sup	15,346,794						15,346,794	
Land, vehicles & equipment								
Computers & Telecom	5,882						5,882	
Total Land, vehicles & equipment	5,882						5,882	
Logistics, Transport & Storage								
Storage	123,529						123,529	
Distribution & Monitoring	28,912						28,912	
Transport & Vehicles Costs	144,176						144,176	
Total Logistics, Transport & Storage	296,617						296,617	
Personnel								
National Society Staff	961,824						961,824	
Volunteers	133,608						133,608	
Total Personnel	1,095,432						1,095,432	
Consultants & Professional Fees								
Consultants	85,294						85,294	
Total Consultants & Professional Fees	85,294						85,294	
Workshops & Training								
Workshops & Training	430,827						430,827	
Total Workshops & Training	430,827						430,827	
General Expenditure								
Travel	12,706						12,706	
Information & Public Relations	94,912						94,912	
Office Costs	21,247						21,247	
Communications	24,588						24,588	
Financial Charges	17,414						17,414	
Other General Expenses	1,741,430						1,741,430	
Shared Office and Services Costs			6,630			6,630	-6,630	
Total General Expenditure	1,912,297		6,630			6,630	1,905,667	
Contributions & Transfers								
Cash Transfers National Societies			906,112			906,112	-906,112	
Total Contributions & Transfers			906,112			906,112	-906,112	
Indirect Costs								
Programme & Services Support Recover	1,246,254		59,328			59,328	1,186,926	
Total Indirect Costs	1,246,254		59,328			59,328	1,186,926	
Pledge Specific Costs								
Pledge Earmarking Fee			6,852			6,852	-6,852	
Pledge Reporting Fees			1,100			1,100	-1,100	

Disaster Response Financial Report**MDRKE023 - Kenya - Complex Emergency**

Timeframe: 11 Jun 12 to 30 Jun 13

Appeal Launch Date: 11 Jun 12

Final Report

Selected Parameters

Reporting Timeframe	2012/6-2014/2	Programme	MDRKE023
Budget Timeframe	2012/6-2013/6	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

III. Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability		
	A					B	A - B	
BUDGET (C)			20,419,397			20,419,397		
Total Pledge Specific Costs			7,952			7,952	-7,952	
TOTAL EXPENDITURE (D)	20,419,397		980,022			980,022	19,439,375	
VARIANCE (C - D)			19,439,375			19,439,375		

Disaster Response Financial Report**MDRKE023 - Kenya - Complex Emergency**

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Appeal Launch Date: 11 Jun 12

Final Report

Selected Parameters

Reporting Timeframe	2012/6-2014/2	Programme	MDRKE023
Budget Timeframe	2012/6-2013/6	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

IV. Breakdown by subsector

Business Line / Sub-sector	Budget	Opening Balance	Income	Funding	Expenditure	Closing Balance	Deferred Income
BL2 - Grow RC/RC services for vulnerable people							
Disaster response	20,419,397		1,003,502	1,003,502	980,022	23,480	
Subtotal BL2	20,419,397		1,003,502	1,003,502	980,022	23,480	
GRAND TOTAL	20,419,397		1,003,502	1,003,502	980,022	23,480	