

# **KENYA: NAIROBI BOMBING**

21 February 2000

*appeal no. 25/98;*

*situation report no. 6 (Final)*

*period covered: 12 August 1998 - 31 December 1999*

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*Fifteen months after the bomb explosion in Nairobi's business district the Kenya Red Cross Society (KRCS) and the International Federation have completed the planned initial assistance to survivors, and closed support project. The remaining funds will be used to provide vocational training to families who lost the income earner to enhance and stabilise their economic situation. A total of twenty donors responded to the appeal, providing a total of CHF 927,913 to assist the most badly affected by the blast. The KRCS and Federation will continue with longer-term assistance projects with USAID funding over the next two and a half years, with a special focus on educational and mental health support.*

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## ***The Disaster***

The bomb which exploded in Nairobi, Kenya on August 7, 1998, targeting the American Embassy, killed more than 200 people and injured over 5,500 others. Of these victims, 500 were hospitalised and 5,000 more were treated in various local hospitals and clinics before being released. More than 30 buildings were severely damaged and the five story building next to the American Embassy was completely destroyed, burying employees and visitors under tons of rubble. Fifteen months after the incident, the streets around the bomb blast site still clearly show the extent of the damage, and many of the victims continue to recover from the trauma.

## ***The Appeal***

To respond to the disaster and to support the Kenyan Red Cross Society (KRCS), the Federation launched a one-year appeal on 25 August 1998, seeking CHF 845,000 to support 1,000 victims, including families who had lost the breadwinner and those severely injured.

The combined emergency response of the Federation's Regional Delegation in Nairobi, the KRCS, and the International Committee of the Red Cross (ICRC) included First Aid, blood supplies, emergency items, tracing, transport and meals. The KRCS Red Cross Action Teams assisted

affected pedestrians, drivers and those who were using the public traffic system at the time, as well as helping to remove debris and extricate survivors and bodies from the rubble. Over 500 volunteers donated blood.

While 202 Kenyans and 12 American citizens died in the blast, others were so severely injured that their physical recovery took months and many will be left with permanent disabilities such as visual impairment or the loss of a limb.

## ***The Operation***

Following the initial emergency relief and response operation, an assistance project was designed with the following objectives:

- providing social and psychological assistance to those survivors who required psychological counselling and debriefing;
- ensuring that orphans received school fees, and that affected families were provided with food parcels;
- providing injured persons with medical assistance, and reinforcing and restoring the emergency response capacity of the KRCS;
- Re-training KRCS Action Teams based on experiences learned, with an emphasis on urban relief and rescue.

By October 1998, five major project proposals had been presented to ECHO, the Norwegian, Danish, and Italian Embassies, and the Canadian High Commissioner. The social and psychological assistance programme started on 12 October 1998 with the nomination of one social co-ordinator, the employment of two social workers and the assignment of one social welfare delegate to assist the KRCS in the implementation of the project.

The table below provides a summary of activities carried out:

<b>Activities</b>	<b>Target</b>	<b>Assisted Beneficiaries</b>	<b>Comment/Clarification</b>
Vocational training for disabled	80	20 visually impaired women	another agency had received funds to assist 100 persons with disabilities
Income generating activities	25	training and loans to 20 women	
Vocational training to families who had lost the income earner	80	84	KRCS identified the needs to assist families who lost the breadwinner
Psychological support and counselling for the immediate families and relatives of those who died in the blast, foster families and orphans	253 families	186 families received regular counselling service	KRCS social workers made contact with families in Nairobi and the rural area and provided counselling service

treatment to victims of the bomb blast		women 6 patients who needed orthopaedic treatment, 2 severely affected street children	treatment for all injured people. The few clients turned to KRCS and requested assistance
social support to families of the deceased, monthly food rations	202 families	186 have received food for 10 months	
school fees for orphans	40	49	an effective administration of funds allowed support to 9 more children.
social support to injured persons	70 families	70 have received food for 3 to 10 months	
providing psychological support and follow-up for KRCS volunteers and staff	500 volunteers and staff	debriefing was provided for 500 volunteers and staff	
training courses for counsellors	100 counsellors	-	provided through a USAID funded project
Upgrading of KRCS Action team Disaster Management Training Curriculum		not completed	attempts to finalise the curriculum did not meet the goal
Training of KRCS Action Teams	200 staff/ volunteers	178 dpp volunteers and staff were trained	

## *The Delegation*

The emergency operation involved all the personnel (delegates and local staff) of the Regional Delegation Nairobi, the Regional Logistics Centre, the Somalia Delegation, the German and Norwegian Red Cross Offices, and various units of the ICRC. All available delegates were involved in the rescue and contributed with their specific expertise to the success of the operation.

The Federation Secretariat sent a team to assess the needs and assist in the preparation of the appeal. Uganda Red Cross staff on loan assisted the Regional Delegation in the preparation of various programme proposals which were designed to assist the survivors in the recovery process.

As from mid-October 1998, the Federation assigned a social welfare delegate to assist the KRCS in the implementation of the programmes.

## *Participation of the KRCS*

Within minutes of the blast, KRCS staff and volunteers arrived at the site and played a critical role in the co-ordinated rescue operation, working hand in hand with national and international rescue teams and participating in the needs assessment and design of the appeal. The KRCS Health Department subsequently implemented the project and employed one social co-ordinator and two social workers to provide psycho-social services for the bomb blast survivors.

The KRCS Tracing Department took responsibility for maintaining records of the physical addresses of the survivors for the proposed programmes, and the KRCS disaster preparedness officer organised DP-courses for KRCS branches, assisted by the bilateral delegate of the American Red Cross and the Regional Disaster Preparedness delegate. The KRCS Information Officer,

assisted by the Regional Information Department, maintained contact with the local and international media and promoted support for the operation.

## *Co-operation with the Authorities and Other Agencies*

The Government of Kenya founded a National Disaster Fund to collect donations and provide financial assistance to the survivors of the bomb blast. A Committee was established to decide on the amount of assistance per family or individual, and the KRCS participated in this committee.

The National Council of NGOs organised weekly meetings, involving the KRCS and the Federation, as well as other local NGO's and national organisations. The relationships forged during these meetings are still maintained today as the KRCS continues to work in co-operation with the Adventist Development and Relief Agency (ADRA), the Kenya Society of the Blind (KSB), African Medical Research and Education Foundation (AMREF), United Disabled People of Kenya, Kenya Association of the Deaf, and United Kenya Physiotherapists, all of whom are stake holders in the USAID grants for bomb blast survivor programmes.

Despite the urge to compete for funding, the agencies coordinated efforts extremely well and efficiently. The continuous communication, exchange of information to follow-up the implementation progress, and availability of expertise enriched the entire support process and ensured a maximum use of resources.

## *Analysis of the Operation*

### *Needs Assessment*

The needs assessment was carried out by the Social Welfare Delegate and the Federation's Social Welfare Department within days of the blast, in co-operation with the KRCS. The assessment effectively identified the most urgent requirements for assistance. Further assessments and monitoring in the weeks following the blast indicated that the actual number of deceased had dropped from 256 to 214. The number of injured persons, the severity of their injuries, and the assistance required for their recovery was also revised. The assessment process continued during the entire implementation period, in collaboration with other agencies involved.

The KRCS had intended to provide supplementary food supplies for families who had lost the income earner, but later expanded their services to include the most needy injured survivors as well. Orthopaedic treatment for survivors was mostly covered through AMREF (with the support of the US government) which enabled the Red Cross to use available funds to meet other needs. The treatment of traumatised children was covered through Operation Recovery, and later through USAID funds. The KRCS's Crisis Mental Health Assistance Project is currently working with 6,000 families who were affected directly, or indirectly, by the blast. To date the agencies have handled a case load of more than 2,000 families and provided services for all of them.

### **Objectives and Plan of Action**

Considering the information available and the anticipated donor response, the objectives established to respond to the disaster were realistic and appropriate to meet the basic needs of the beneficiaries. The Plan of Action, however, was very optimistic and could not be fulfilled to its full extent.

**Beneficiary selection:** The KRCS concentrated the supplementary food and school fees activities on families who had lost the income earner. However, 5 months elapsed before the project was able to identify the physical addresses of all the families in order to provide the intended assistance. The number of beneficiaries was expanded to include both families of the deceased as well as families whose primary income earners had been severely injured objected that they had not been considered. The project for visually impaired women affected by the bomb blast was also subsequently

expanded to include visually impaired men who stressed the needs for similar assistance. A lack of funding however delayed the programme for male beneficiaries.

**Distribution of Food:** Food distribution was a monthly challenge due to uncertainty over how many families would collect their food rations. A number of problems also affected the distribution of food, including a lack of information and misunderstandings on distribution points, a delay in food delivery, complaints about the quality of the food (the beneficiaries expected export quality which was not available, but instead received average market quality), problems with food storage, and delays as a result of administrative procedures. Also, since some families lived in rural areas they had to send a family representative to the city to collect their ration, or were forced to wait until KRCS delivered rations up-country.

Procurement of supplies and equipment was undertaken by the Regional Logistics Centre.

**Provision of Counselling Services:** While families in Nairobi had easy access to the services, due to limited funds those located up-country were only visited by the social workers on one occasion.

**Training:** One awareness course related to newly visually impaired persons was initiated, with 42 people participating. Unfortunately, after the workshops most of the participants were not available to practise their newly gained expertise. However, 4 KRCS youth volunteers were included in the project and received continuous training for more than a year. According to their mentor, an American specialist for mobilisation and orientation training, they are now the best trained para-professionals in this field in Kenya.

**Role of the Federation:** The Federation assigned two representatives for a rapid assessment of the needs, then provided support to design projects, to launch the appeal, and to collect and transfer funds.

The KRCS was charged with providing services to survivors and training to staff and volunteers. The Federation's Social Welfare Delegate worked in close co-operation with the KRCS and assisted in the implementation of the programme as required.

While initial donor support was slow in arriving, over the successive months of the operation many donors responded to the appeal which enabled the project team to expand their services.

The Regional Delegation and Regional Logistics Centre provided essential assistance to administer and manage the project.

## *Contributions*

See Annex 1 for details of contributions and the final financial report.

## *Conclusion*

The bombing of the American Embassy was the first terrorist attack of its kind in Kenya. The KRCS established close contact with the survivors and provided essential social and psychological services. The KRCS received wide acknowledgement for the assistance and services provided, and remains the focal point for those who suffer from the long-term affects of the bomb blast. The National Society, with the assistance of the Federation, has succeeded in obtaining a grant of US\$ 3.5 million from USAID to continue their educational and mental health support project for the next 27 months.

The "Crisis Mental Health Assistance" project will enable the KRCS to obtain valuable and unique expertise on disaster mental health services. The disaster also provided an opportunity to strengthen

the KRCS's disaster response capacity, particularly for urban areas. Unfortunately the urban disaster response training could not be expanded further due to the limited expertise and funds available. The Kenya Government is in the process of establishing a National Disaster Plan and has invited the KRCS to actively participate in its development and implementation.

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