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Emergency Appeal Operation Update

Kenya: Drought



Emergency appeal no. MDRKE039 EPoA update n° 4	GLIDE n° DR-2016-000118- KEN
Date of Issue: 20 November 2017	Timeframe covered by this update: 23 November 2016 – 30 October 2017
Operation start date: 23 November 2016	Operation timeframe: 12 months (New time frame 15 months) 23 November 2016 – 23 November 2017 New end date: 28 February 2018
Operations Manager: Andreas Sandin , Emergency Operations Coordinator, EAIOI Country Cluster Support Team, overall responsible for compliances, monitoring and reporting	Contact person: Dr. Abbas Gullet , Secretary General; Kenya Red Cross Society
Overall operation budget: CHF 25,062,572	DREF amount initially allocated: CHF 297,808
N° of people being assisted: 1,033,300 people, (68,157 households)	
Red Cross Red Crescent Movement partners currently actively involved in the operation: Finnish Red Cross, British Red Cross, Danish Red Cross, Norwegian Red Cross, Netherlands Red Cross, Monaco Red Cross, Canadian Red Cross, Japanese Red Cross, and ICRC and IFRC.	
Other partner organizations actively involved in the operation: National and County Governments, World Food Programme, UNICEF, Food and Agriculture Organization, MSF, Norwegian Refugee Council, World Vision, Aga Khan Foundation, German Agro Action and Plan International, Safaricom Foundation, National Drought Management Authority, Kenya Ports Authority, KCB, Nation Media Group and members of the public across the country.	

Summary of the revision made to the Emergency Plan of Action

This update provides an overview on Kenya Red Cross Society actions for the response to date and **seek for a timeframe extension for an additional three months until 28 February 2018**. The second appeal revision which was done in March 2017 was to increase the budget to 25,062,572 Swiss Francs and target beneficiaries to 1,033,300. The emergency appeal is currently 26 percent funded (CHF 6,453,908).

The severity of the drought has continued to increase with number of people affected increasing to 3.4 Million as at August 2017 from 3 million in mid-March 2017. As a result, KRCS seeks to extend the end date from 23 November 2017 to 28 February 2018. This will allow implementation of cash transfer, livelihood, WASH and health activities in the following counties that continue to experience severe drought and shift to early recovery activities in counties that have received substantial rainfall.

Please refer to the [revised emergency appeal 2](#), [operation update 1](#), [operation update 2](#), and [operation update 3](#) for more information on the evolving drought situation in Kenya.

A. SITUATION ANALYSIS

Description of the disaster

The drought situation in the country has been on a worsening trend following consecutive seasons of poor rainfall performance during the March-April-May 2016, October-November-December 2016 and March-April-May 2017 rainfall seasons. The situation is especially severe in the pastoral areas as livestock productivity and prices continue to decline, constraining income and food availability (FEWSNET, September 2017). In addition, food prices have remained high further constraining access by poor households. The situation is compounded by the expected low harvest of the long rains' season due to poor performance of the long rains' season and the infestation of Fall Armyworm.

Malnutrition levels have continued to worsen especially in Turkana (East, South and North) and Marsabit (North Horr) where they are at extremely Critical level while they are at Critical levels in Baringo (East Pokot), Garissa, Mandera, Turkana (Turkana West), Samburu, West Pokot, and Marsabit (Laisamis).

According to the NDMA early warning bulletin (August 2017), seven counties are at Alarm phase (Wajir, Tana River, Kilifi, Kajiado, Isiolo and Garissa) while another 10 are at the Alert phase. In the 17 counties at Alarm and Alert Phase, the situation is on a worsening trend highlighting the need for continued interventions to prevent further deterioration. Approximately 3.4 million people are currently food insecure in the country.

Drought phase	Improving	Stable	Worsening
Normal	Turkana	Baringo, Kwale, Lamu, Taita Taveta, and West Pokot	Garissa, Isiolo, Kajiado, Kilifi, Marsabit, Tana River and Wajir
Alert	Laikipia		Embu, Kitui, Makueni, Meru(North) Narok, Nyeri, Samburu, Tharaka, and Nithi
Alarm			Garissa, Isiolo, Kajiado, Kilifi, Marsabit, Tana River, and Wajir

Major drought incidences occur in Kenya about every 10 years, and moderate drought incidences every three to four years. Historically, these extreme climatic events have caused significant loss of life, increase in morbidities related to inadequate nutrition and lack of access to adequate, clean and safe water, and increased severity of disease that have adversely affected the national economy.

Please refer to the revised [EPoA](#) for more details.

Overview of Host National Society

In November 2016, Kenya Red Cross Society (KRCS) and IFRC launched an emergency appeal seeking to assist people to deal with the effects of drought across several affected counties. Through this appeal (funded through multi-lateral, bi-lateral and local resourcing efforts to about 76 per cent appeal coverage), KRCS continues to implement drought interventions in counties affected by drought. The interventions focus on five

key areas as outlined in the [operation update 3](#) on nutrition outreaches, direct cash transfers, general food distribution, rehabilitation of key communal watering points and animal offtake and slaughter.

Through these interventions, KRCS has reached a total of 998,535 people. The table 2 below summarizes the population reached through the scaled-up activities in 1) Health and Nutrition 2) WASH and 3) Food Security and Livelihoods in the second revision of the appeal by intervention.

Around 122 percent of the target population have been reached through cash transfer, food distribution and de-stocking. Around 72 percent of the target population have been reached through WASH and health interventions.

Table 2

Intervention Area	Targeted Population	Reached Population	%
Cash transfers	360,000	251,682	70
<i>Food Distribution</i>	121,800	198,546	163
<i>De-Stocking</i>	60,000	214,194	357
Sub-Total	541,800	664,422	122
<i>Health interventions</i>	263,500	70,360	27
WASH,	225,000	282,287	125
Sub-Total	488,500	352,647	72
Total	1,030,000	1,017,069	99



Figure 1: Drought Response Operation activities; source:KRCS

Overview of Red Cross Red Crescent Movement in country

Participating National Societies (PNS) hosted by the KRCS include: the American Red Cross, the Austrian Red Cross, the British Red Cross, the Danish Red Cross, the Finnish Red Cross, the German Red Cross, the Japanese Red Cross and the Norwegian Red Cross. The International Committee of the Red Cross (ICRC) regional delegation is also hosted in Nairobi, which serves as a hub for operations in eastern and central African countries.

Movement Coordination

Through this appeal, the British Red Cross, the Danish Red Cross and the Finnish Red Cross Societies have been supporting KRCS bilaterally. The American Red Cross, the Australian Red Cross, the Austrian Red Cross, the British Red Cross, The Chinese Red Cross (Hong Kong Branch), the Japanese Red Cross, the Finnish Red Cross, the Luxemburg Red Cross, the Norwegian Red Cross, the Italian Red Cross, The German Red Cross, the Monaco Red Cross, the Singapore Red Cross, the Swedish Red Cross, the Canadian Red Cross, the Netherlands Red Cross, and Turkish Red Crescent Society; the Italian and Japanese Governments and Majlis Agama Islam dan Adat Istiadat Melayu Perlis (MAIP) have supported this operation through the IFRC. The International Committee of the Red Cross (ICRC) has also provided bilateral support to KRCS on cash transfer in Lamu and Tana delta.

Table 3: Activities supported by PNS through bilateral support

Partner	Areas of support
Finnish Red Cross	Targeted 1,000HHs with cash transfer in Ganze sub county in Kilifi county for four months. All beneficiaries have received all their four months of cash transfers. Kshs 6,000 (approximately CHF 60) was provided for each transfer. The project team conducted an after-action review meeting in April 2017 after project closure. Finnish Red Cross will support multilaterally cash transfer to 4,020 households in Turkana East sub county.
Danish Red Cross	Targeted 900HHs in North Horr and Laisamis sub county in Marsabit county for cash transfers. Payments have been taking place through 5 local vendors through electronic voucher payment system using Compulynx technology. The first payment covered 798 households, the second 829 households and the third, 830 households. Each household received Kshs 3,000 (approximately CHF 30). The fourth payment is ongoing. Danish Red Cross supports rehabilitation of three watering points in Isiolo.
International Committee of Red Cross (ICRC)	As a result of the drought situation, through the Ecosec project targets to support 6,024 HHs in Lamu and 2,263 HHs in Tana Delta which are food insecure households to improve their food consumption seeking to cover 40-50 percent of the essential household food needs for 03 months. Following a comprehensive food and market assessment in both counties support was provided through cash transfer (M-pesa). The cash transfer calculated for food basket differed in the mainland and islands and ranged from Kshs 5,782 - 3,666/= per household per month which is calculated between 40-50 percent. A total of 8,287 HHs have so far been reached through cash and 1,395 HHs (465 HHs in Assa and Kone in Tana Delta and 930HHs Boni forest in Lamu) through food aid in both target counties. In addition, the households received food and seeds and will receive agro-tools in July.
British Red Cross	Supports ongoing cash transfer operation for drought in West Pokot (1,200 HHs), Turkana south (1,200HHs), Kaloleni (1,300HHs) and Kwale (1,200 HHs). Each household receives monthly transfers of Kshs 3,000 through a SAFARICOM mobile money transfer application called MPESA. The above-mentioned operations are at different stages but all of them are likely to conclude in July 2017. BRC secured HIP funding of 3M EUROS from ECHO for drought emergency cash transfers. BRC implements this action in Marsabit county through Kenya Red Cross Society. This grant will also take over the households that were being supported by the appeal for continuity based on assessment and current drought in those counties.

Overview of non-Red Cross Red Crescent (RCRC) actors in country

Response actions were initiated and ongoing in some of the affected counties by the national and county governments and other non-RCRC partners as highlighted in the operation update 3. In addition, KRCS is engaging with corporate organizations in Kenya, and the general Kenyan public to support this appeal as part of its local resource mobilization strategy. The resources mobilized locally, and the resources received through bilateral support will be reported as part of the overall donor response to the appeal.

Needs analysis, beneficiary selection, risk assessment and scenario planning

Needs analysis

There is no change in the proposed strategy as was indicated in the [EPOA](#).

Beneficiary selection

KRCS will implement lifesaving interventions in the 14 counties classified to be in the Alarm phase. This is further reinforced by the indicative rates of acute malnutrition, reports of human starvation and increased reports of loss of livestock in these counties. The counties include, Mandera, Samburu, Isiolo, Marsabit, Turkana and Wajir. Baringo and Laikipia are currently facing conflicts triggered initially by migration related to search for pasture and water, including forced invasion of private ranches. The counties selected also include areas with limited humanitarian access, based on several parameters including poor road networks, banditry attacks, prevalence of inter-ethnic violence and external aggression by militants from neighbouring countries (which have been in protracted conflicts). Counties in this category include Mandera, Garissa, Wajir, Lamu, West Pokot, Turkana and Tana River. The third criteria are those with Extreme Vegetation Deficit (based on VCI as reported by NDMA) and includes, Kilifi, Kwale, Garissa and Lamu.

KRCS will ensure that the target population, affected will include households with severely or moderate acute malnourished children, households head with elderly, chronically ill persons, children, and single female, disabled person without income will be included in the operation. KRCS will enhance collaboration under this drought emergency operation through county and sub-county coordination forums to have clear targeting criteria before roll out. Baseline and targeting assessment will be conducted in the affected counties to select the most affected persons. This will be done through community meetings in collaboration with relief committees, local authority and KRCS. For health, hygiene intervention, the affected community will be selected during the CTP selection and this will be done through community meeting. Households who participate in Cash for Asset and Safety nets will be excluded in the operation.

Exclusion Criteria:

1. Him/Her or any one from his family should not be employed in the formal sector (govt job, private job where earning regular income)
2. Him/Her or any one from his family (dependents) should not be owning any business
3. Him/Her or any one from his family should not be recipient of Social Assistance Programme

Inclusion Criteria:

4. Widows or Divorced women headed families having children under-five years of age
5. Pregnant or lactating mothers with children under-five years of age
6. Widows or Divorced women headed families with no source of income
7. Families with severely malnourished children or child (under-five years)

The families meeting more inclusion criteria will be prioritized for assistance. However, to be eligible for the assistance the beneficiaries must meet all the exclusion criteria. The table below shows the counties selected based on the above criteria:

County	County Population projected from 2009 census	2017 SRA Report Proposed Beneficiaries requiring emergency assistance	GAM Rates based on MUAC. Also reference to IPC classification	% targeted	KRCS Target Beneficiaries (All Interventions)	WASH Sector	KRCS Target Beneficiaries for Cash Transfer (HH)		Direct Food Distribution
						Water supply Systems to Rehabilitate	Current beneficiaries (HH)	Proposed revised Number of HH	No. of HH including Meat from Animal offtake
Mandera	1,025,756	202,300	26.30%	60%	121,380	9	2,000	4,000	1,000
Samburu	283,780	123,700	25.80%	50%	61,850	6	2,000	3,750	1,000
Isiolo	155,465	83,900	32.00%	50%	33,560	9	1,943	3,800	1,500
Marsabit	315,936	139,700	19.90%	70%	97,790	10	3,900	7,500	2,000
Turkana	1,083,653	276,200	21.00%	60%	165,720	9	3,250	7,750	3,500
Wajir	661,941	146,100	19.00%	60%	87,660	5	2,000	3,800	1,000
Baringo	703,697	73,900	19.00%	75%	55,425	9	1,546	4,800	3,500
Garissa	623,060	123,400	25.70%	60%	74,040	10	2,000	3,800	1,000
Tana River	303,047	134,100	20.10%	70%	93,870	5	3,500	4,500	1,000
West Pokot	649,418	97,000	12.90%	50%	48,500	4	1,500	2,500	-
Kwale	820,199	207,100	6.30%	45%	93,195	3	1,200	2,500	3,800
Kilifi	1,399,975	200,500	10.90%	30%	60,150	3	2,300	2,300	500
Lamu	128,144	51,300	5.70%	30%	15,390	5	7,000	7,000	500
Laikipia	505,712	54,600		30%	16,380	3	-	2,000	-
TOTAL	8,659,783	1,913,800			1,033,300	90	34,139	60,000	20,300
Total Beneficiaries		Health & Nutrition Beneficiaries (14% of 1.9M beneficiaries identified in SRA report)			263,500	225,000		360,000	121,800

Risk Assessment

The areas targeted for drought response have been experiencing security challenges ranging from targeted ('terror') attacks, cattle rustling, inter clan tensions and clashes, resource based conflicts, amongst others.

The country has been experiencing a political crisis following the annulment of presidential election results by the Supreme Court which also ordered fresh elections within 60 days. Protests were experienced in parts of the country restricting access as most actors adopted a cautious approach. To mitigate against any negative impact that could have resulted due to these insecurity incidences, KRCS worked closely with the Government of Kenya and other agencies through the County Steering Groups (CSGs), and participates in meetings where security and other relevant issues are discussed.

Orienting staff and volunteers involved in the operation on safer access and code of conduct also helped in mitigating security risks, for instance, in Kilifi County where community members held protests against a local water supply company. General uncertainty has gripped the country and the risk of violent conflict persists. This is likely to also affect areas already affected by drought, further complicating the response activities.

The protests so far have not had a significant impact on KRCS activities. The IFRC in support to the KRCS approved the extension of the [DREF for the Election preparedness](#) that was launched in August 2017.

Scenario Planning

The food security situation has been on a deteriorating trend following cessation of the long rains season which was generally below average in most parts of the country. The situation is expected to worsen in pastoral areas with a significant increase in malnutrition rates particularly for children under-five and pregnant and lactating women through to October, due to sustained high food prices and low livestock productivity (FewsNet, September 2017). Counties affected by the deteriorating nutrition situation which had also been exacerbated by the nurses' strike include; Turkana (East, South and North) and Marsabit (North Horr) where they are extremely critical and are critical levels in Baringo (East Pokot), Garissa, Mandera, Turkana (Turkana West), Samburu, West Pokot, and Marsabit (Laisamis).

Seventeen (17) counties at Alarm and Alert phases are affected by ongoing food security challenges, with acute shortage of water and pasture which has resulted in poor livestock productivity. A total of 10 counties have MUAC rates exceeding 15 percent.

The **Table 4** below shows the malnutrition situation among children under-five in the country.

<i>Trend</i>	Improving	Stable	Worsening
Below long-term mean (LTM)	Baringo Killifi Kitui Nyeri (Kieni) Taita Taveta Turkana West Pokot	Wajir	Makueni Mandera
At / close to LTM		Lamu	Marsabit
Above LTM	Narok Samburu Tana River	Laikipia	Embu (Mbeere) Garissa Isiolo Kajiado Kwale Meru (North) Tharaka Nithi

Table 4: Children at risk of malnutrition MUAC (August 2017)

The ongoing food insecurity situation has also partly been exacerbated by the persistently high food prices in most parts of the country.

The October-November-December 2017 season (short rains), indicates that much of the country is likely to experience enhanced rainfall which will also be well distributed both in time and space especially during October and the peak month of November. However, the onset of the season may be late in parts of the south and north-west, while cessation may be early across the north. The following factors are exacerbating food insecurity:

Crop Diseases and Pests

Crop production has been significantly affected due to the outbreak of Fall Armyworm in parts of the high and medium potential areas of Kitui, Kwale, Makueni, Tharaka Nithi, Bungoma, Trans Nzoia and West Pokot (FewNet September 2017). The long rains harvest is expected to be below average by 20-30 percent due to poor rainfall performance and the fall army worm diseases. These, when coupled with head smut disease which attacked maize crop in 2016 in Nandi, Elgeyo Marakwet, Trans Nzoia, and Uasin Gishu counties, has continued to hurt national food security and exacerbate the effects of severe drought and rising food prices resulting in a worsening food security situation.

Conflict

The worst incidents reported were in Meru, where conflict in Igembe Central and Igembe North led to 14 deaths and the displacement of nearly 800 households in July 2017, and a further three deaths in Igembe Central in August. Five schools were worst affected following the conflict and about 2,200 households displaced. Incidences of conflict have been reducing since the month of August following conclusion of elections for all county positions. The situation has stabilized in Baringo, Isiolo and West Pokot. In Lamu County, tension is high in Lamu, as security operations against Al-Shabaab continue. Tension is also high in the border areas between Kitui and Tana River, between Laikipia and Samburu, and between communities in parts of Isiolo. The Kitui NDMA bulletin also notes that sand harvesting is expanding rapidly in the county and that its impact on water levels and soil erosion has the potential to contribute to conflict in future.

The ongoing political crisis on presidential elections also has the potential to trigger a national conflict along party and ethnic lines. As part of preparedness for the presidential elections rerun, KRCS has revised its preparedness plan. The plan is focused on 15 priority counties with a relatively high risk for election-related disturbances.

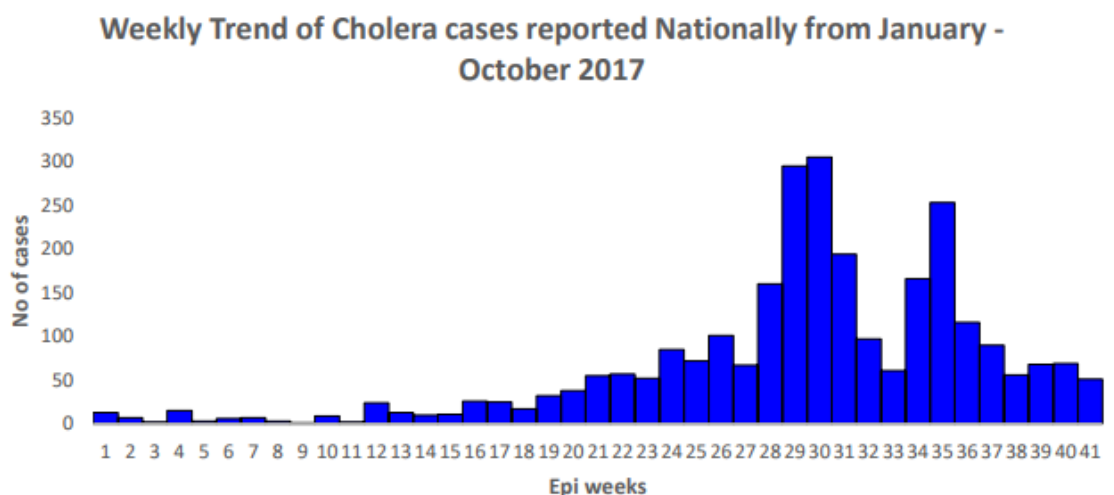
Disease Outbreaks

Recent disease outbreaks including Cholera, Measles, Malaria, Dengue Fever, and Kala-azar have affected a number of counties as outlined below:

a) Cholera

The country has been experiencing a cholera outbreak which has affected 18 counties since January 2017. Currently, the outbreak is active in three counties: Nairobi, Machakos, and Kajiado counties. KRCS deployed 20 surge team members (11 females and 9 males) to support with management of the outbreak in Nairobi County which has been one of the worst affected in the country. Three (3) CTCs have been set up in Mbagathi, Mukuru and Mama Lucy hospitals in Kayole. KRCS has been supporting response operations to cholera outbreaks in Dadaab and Kalobeyei. These outbreaks have been brought under control.

Figure 2 Epi-curve of the Cholera Outbreak since Jan 2017



b) Malaria

- ▶ A surge in malaria cases has been reported in Marsabit, Turkana, Baringo, Samburu and West Pokot counties. The outbreak was exacerbated by the nurses' strike which has affected operations in public hospitals across the country. Majority of those affected are children under the age of 5, and pregnant women. At least 52 deaths have been reported in the counties of Marsabit (26), Baringo (15) and Turkana (10).

KRCS deployed medical surge teams to Marsabit (Dukana and Illeret) and Baringo. Kalobeyei team continues to support response in Kalobeyei camp.



Figure 3: Malaria Outbreak Response

B. OPERATIONAL STRATEGY AND PLAN

The operation plan and strategy were informed by the analysis of secondary data sources for the ongoing drought situation as well as the analysis of existing activities in the appeal launched in November 2016 to date. Early warning information, drought assessment reports, preparedness and response plans comprising of the August 2016 national KFSSG LRA report, FEWSNET December 2016 food security outlook for Kenya¹, NDMA early warning bulletins including the latest one², nutrition sector situation update and response plan September 2016, FAO 'La Nina Early Warning – Early actions analysis for a potential La Nina in 2016-2017' report, county contingency plans, Kenya Red Cross contingency plan and Kenya Red Cross cash feasibility report were reviewed and tabulated as below (refer to table in Annex 2).

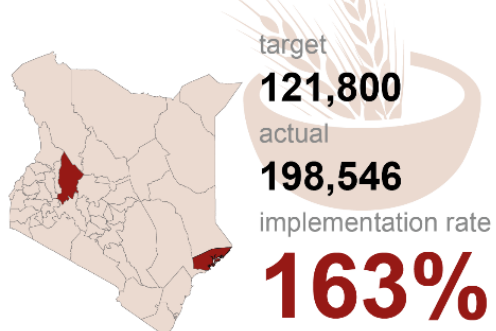
The population reached by KRCS in the drought operation is as shown in infographics and the summary table 5 below.

¹ <http://www.fews.net/east-africa/kenya>

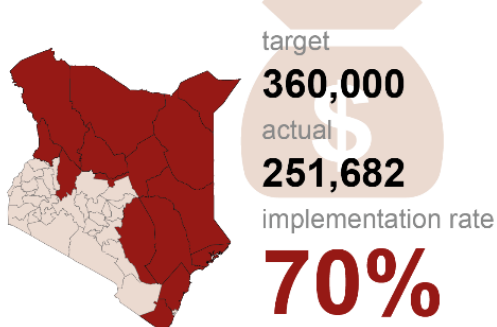
² <http://www.ndma.go.ke/index.php/resource-centre/send/57-drought-updates/1619-national-drought-early-warning-bulletin-january-2018>

Kenya Drought

Food Distribution

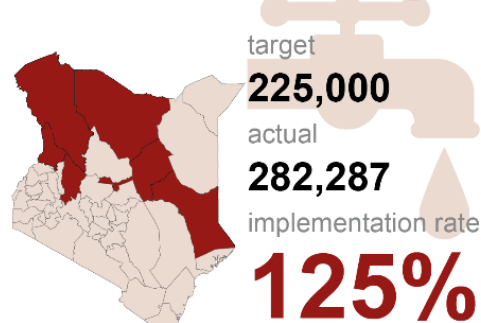


Cash Transfers

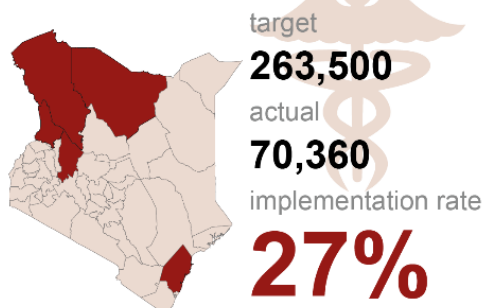


Targeted and reached population (number of persons) per area of intervention.

WASH



Health



De-Stocking

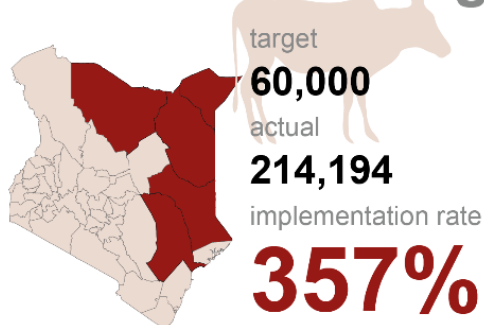


Table 5: population reached through different interventions

Areas of intervention	Beneficiaries Reached (HH)	Beneficiaries Reached (individuals)	Explanatory Notes
Cash Transfers	41,947 HH	251,682 persons (based on an average household size of 6)	These are households that are in the system and receiving cash on a monthly basis. Majority have received at least cash for one month and are continuing to receive based on our monthly calendar
Food Distribution	33,091 HH	198,546 people have been reached with food	These are households that have received food since November 2016 KRCS is currently procuring food for 1,600 households in Turkana East and 2,500 households in Turkana North
WASH Interventions	46 Community water points completed	282,287 people and approx. 285,500 animals	Out of the targeted 91 communal water points, 46 have already been completed and functioning again.
De-Stocking	35,699 HHs	214,194 people based on a family size of 6, and 1 cow shared by 6 households and 1 goat shared by 2 households	These are animals that have been purchased and slaughtered in 5 counties; Mandera, Wajir, Marsabit, Garissa and Tana River
Health interventions	70,360	70,360 persons who have received health services in our outreach clinics	These are people who have been reached through the ongoing medical outreaches in 13 counties

Overall objective

The overall objective is **to meet the immediate needs of 1,033,300 drought-affected persons in 14 priority counties by scaling up nutrition interventions and basic health services, access to water, hygiene and sanitation and food security.**

Proposed strategy

The proposed strategy remains the same as in the [EPoA](#)

Operational support services

The operational resources are unchanged from the [EPoA](#)

C. DETAILED OPERATIONAL PLAN

Health & Care			
Outcome 1: Reduced risks of drought related disease outbreaks and other negative consequences in key health outcomes	Outputs		% of achievement
	Output 1.1. Basic essential health care provided to the target population		60%
	Output 1.2: Minimum initial package for reproductive health services to target population is provided		60%
	Output 1.3: Psychosocial support provided to the target population		70%
	Output 1.4: Epidemic prevention measures is carried out		60%
Activities	Is implementation on time?		% progress (estimate)
	Yes (x)	No (x)	
1.1.1. Sensitize community health workers on epidemic preparedness and community level surveillance	X		60%
1.1.2. Conduct nutrition outreaches	X		60%
1.1.3. Train Red Cross Action Team members on health situation assessment and health messaging	X		100%
1.2.1. Facilitate referrals for emergency obstetric care	X		100%
1.2.2. Distribute reproductive health kits	X		100%
1.2.3. Procure reproductive health kits	X		100%
1.2.4. Conduct community awareness sessions on Gender-Based Violence (GBV) prevention, response and reporting mechanisms	X		100%
1.2.5. Map, establish and support GBV referral pathway	X		100%
1.2.6. Conduct debrief sessions with health teams	X		50%
1.3.1. Engage counsellors for psychosocial support	X		80%
1.3.2. Organize for safe spaces for children and other groups for counselling	X		50%
1.3.3. Train social workers on child protection in emergencies to provide psychosocial support to children and their families	X		20%
1.4.1. Intensify community based surveillance for possible outbreaks	X		10%
1.4.2. Procure essential supplies for outreaches and epidemic preparedness supplies	X		20%

1.4.3. Organize for temporary storage of medical supplies and equipment	X		100%
Progress towards outcome			
<p>1.1.1. Kenya Red Cross Society (KRCS) supported the Ministry of Health (MoH) in the targeted counties³ (disease surveillance officers, sub county public health officers, public health nurses, clinical officers and lab technologists) to conduct sensitization sessions on epidemic preparedness and community level surveillance that targeted community health volunteers (CHVs). The sessions included prompt reporting of any suspected disease occurrence for routine disease surveillance systems. These were delivered as part of the ongoing integrated health and nutrition outreaches. With the sensitization of the CHVs, it is expected that vital information relating to epidemic preparedness will help improve surveillance starting from the lowest and most basic levels, the community.</p>			
<p>1.1.2. 1.1.3. and 1.2.1. KRCS supported the MoH to conduct integrated medical and nutrition outreaches in the catchment sites the health facilities in each of the 13 targeted counties. As at reporting time, 398 outreaches had been completed in 13 counties with high malnutrition rates. The services offered included immunizations, deworming, treatment of minor illnesses, screening and management of malnutrition cases among the under-five. A total of 70,360 have been reached with the ongoing health outreaches. Similarly, public health sessions on hygiene and disability sensitization sessions on rights, needs and services were also delivered by the health care workers. Some key interventions have been informed by the outcome of the outreach services including supplementary feeding programmes for the under-five and pregnant and lactating mothers. With the outreaches expected to continue, more cases are expected to be managed while at the same time using the malnutrition data to inform appropriate health and nutritional interventions.</p>			
<p>1.2.2. and 1.2.3. Reproductive health kits were procured and distributed in Kilifi, Malindi, Isiolo, Eldoret, Garissa, Kisumu, Nairobi, and Turkana counties. In addition, 12 tents were procured for SGBV and Child protection.</p> <p>The teams targeted community elders- Kraal leaders in Turkana and elders in Baringo, Administrative leader and religious leaders- Imams in Kilifi. Three schools: Kainuk Girls Primary School, Koputiro Primary School and Philadelphia Primary Schools were reached through the school peace clubs. Community health volunteers were sensitized in Kainuk, Turkana for further sensitization to the community through household visits. Community Sensitization sessions focused on messages on GBV prevention and response as well as violence prevention looking at other forms of violence, reporting and referral mechanisms for medical, psychosocial support, legal and judicial services.</p>			
<p>1.2.4. and 1.2.5. With support from UNFPA, 190 community awareness sessions on GBV were conducted in the target counties reaching a total of 7,452 (4,889 females and 2,563 males). A total of 1,066 (611 females, 455 males) reached in Turkana, 115 (30m, 85f) in Kilifi, 225 (162 females, 63 males) in Marsabit and 6,046 (2,015 males and 4,031 females) in Baringo.</p>			
<p>1.2.7. and 1.3.1. With regard to the provision of psychosocial support services, KRCS has engaged five counsellors drawn internally to conduct counselling sessions targeting the school going children, adolescent girls and boys, pregnant and lactating mothers, people living with disabilities and the elderly. Issues discussed included mild levels of stress and non-achievement of physiological milestones among the under-five, depression, loneliness and anxiety among the elderly and desire for family planning hindered by cultural issues for pregnant and lactating women. Child sessions were conducted through play therapy, art therapy, and music.</p> <p>A total of 138 volunteers (Turkana -17, Marsabit - 20, Baringo - 20, Kilifi - 19, Marsabit - 20, Samburu- 20 and Tana River- 22) were trained in psychological support/first aid.</p> <p>A total of 3,018 people has been reached with psychosocial first aid; 1,108 people (1,942 Females and 1,076 males) were reached with PFA services by the trained volunteers. The services were integrated with other activities such as the medical outreaches.</p>			

³ Baringo, Turkana, West Pokot, Marsabit, Isiolo, Garissa, Samburu, Lamu, Kilifi, Kwale, Mandera, Wajir, Tana River,

To date 1,910 people have been reached in 38 sites within Baringo, Turkana, West Pokot, Marsabit, Isiolo, Garissa, Samburu, Lamu, Kilifi, Kwale, Mandera, Wajir and Tana River. The counselling teams have conducted 238 individual sessions and 48 group therapy sessions. These sessions are already contributing to positive individual well-being as confirmed in subsequent visits by the counsellors in areas where ongoing drought effects have been compounded with the raging community conflicts.

1.3.2.

KRCS provided play materials that include 4 skipping ropes, 16 hand-made foot balls, 10 crayons and 10 coloring pencils to support children in play sessions. This was done in Eldume IDP camp and Tangelbei and Yatya communities.

1.3.3 and 1.3.4

KRCS trained a team of 22 volunteers on basic counselling for follow up and sustainability of sessions.

1.4.2.

Procurement of more essential supplies for integrated outreaches planned for the next implementation phase.

1.4.3

Temporary storage has been allocated at KRCS Warehouses (located at the HQ and selected Regional offices) for all drought response items including medical supplies and equipment.

Livelihoods, Nutrition and Food security

Outcome 2: Improved food needs of the drought affected populations are met	Outputs		% of achievement
	Output 1.1: Cash transfers are provided to households to purchase food		75%
Activities	Is implementation on time?		% progress (estimate)
	Yes (x)	No (x)	
1.1.1 Send an alert for KRCS national disaster response team members	x		100%
1.1.2 Deploy qualified NDRT for a one and half month CT operation.	x		100%
1.1.3 Identify and contract payment service provider	x		100%
1.1.4 Print and distribute vouchers	x		100%
1.1.5 Identify and train suitable vendors	x		100%
1.1.6 Target and register beneficiaries	x		100%
1.1.7 Develop beneficiary communication plan and roll out	x		100%
1.1.8 Develop and implement appropriate complaints and feedback mechanisms	x		100%
1.1.9 Disburse cash using appropriate cash transfer delivery mechanism	x		100%
1.1.10 Conduct post distribution monitoring	x		90%
1.1.11 Conduct after action review exercise and document the CTP process using appropriate tools as provided in cash in emergencies toolkit (CIE).	x		50%

Progress towards outcomes**1.1.1 – 1.1.2.**

KRCS sent a request for application to the national disaster response team (NDRT) members through email notifying them of the intention to deploy NDRT members for drought response. The required qualifications included possession of relief /cash transfer skills, demonstrated competence in community based activities, coordination, communication and report writing. Application were received and decision on deployment was made based on the competency levels and past experiences with the emergency response.

With the review of applications completed, nine NDRT members/focal persons were deployed as cash focal persons to support drought response operations in Marsabit, Garissa, Wajir, Mandera, Kwale, Samburu, West Pokot and Turkana and Baringo counties. Their duties included participation in respective county steering group meetings, community mobilization, targeting, registration of beneficiaries, following up with the cash disbursements, monitoring encashment and participation in post distribution monitoring. Other duties included regular briefs to both CSG and HQs team on the ongoing operation. The teams have since participated in the encashment monitoring, post distribution monitoring as well as the just concluded real time evaluation.

1.1.3 KRCS has been using three main delivery mechanisms to reach the targeted communities namely; M-pesa, commercial bank agents for example Equity and E-Vouchers through Compulynx payment system. M-pesa remains the most efficient and effective mode of delivery of cash to the intended beneficiaries within the shortest time. This has only been possible in areas with reliable network coverage. KRCS has used M-pesa to deliver cash in Kilifi, Kwale, Tana River, Lamu, Samburu, Baringo, Turkana, West Pokot, Isiolo, Garissa, Wajir, Mandera, and Kitui counties. In Marsabit County however, KRCS used Electronic Cash Vouchers to deliver cash assistance to affected communities. This allowed communities to access cash from identified vendors who would then be reimbursed by KRCS.

In Turkana County KRCS used the HSNP platform (equity bank) to deliver payments to beneficiaries. However, KRCS switched to Mpesa following difficulties with access to cash by community members.

1.1.4 Electronic cards were procured and distributed to beneficiaries in Marsabit County. The electronic cards were used to deliver cash assistance to communities affected by drought. A number of traders were identified in each of the affected villages where communities received the cash and bought food items from the shops. KRCS also reverted to M-Pesa due to difficulties in use of the Point of Sale machines (PoS machines) by vendors and community members. The gadgets were not functioning well in areas with poor network access slowing the payment process.

1.1.5 A total of 11 vendors were identified through competitive bidding process in Marsabit County for Cash Transfer Programming. The vendors were the trained by KRCS team on the objectives of the CTP, principles of the Red Cross Movement and code of conduct, and operation of the point of sale machine. This payment technology has been provided by CompuLynx Company at a 10 percent the transfer value to ensure accountability during and after payments. A total of 3,800 drought affected families have since received their initial and second payments through the same platform.

1.1.6 Targeting and registration and verification of the final list of beneficiaries has been completed in Baringo, Marsabit, Kilifi, Isiolo, Garissa, Mandera, Wajir, Lamu, Kwale, Turkana, West Pokot, Tana Delta, Kitui (Mwingi) and Tana River counties. KRCS has received further support from ECHO that will be used to target 25,066 households in Marsabit, Samburu, Isiolo, Wajir, Garissa, West Pokot and Turkana counties. Inception meetings have been carried in each of these counties. Most of the beneficiaries who were supported under the appeal are now receiving support from ECHO funded programme. KRCS used community based targeting system to identify beneficiaries to be targeted by the programme in the different counties. This ensured that the programme received full community support and confidence since they understood the targeting criteria⁴

1.1.7 A beneficiary communication/community engagement and accountability plan has been developed and rolled out in all the CTP programmes. This has been widely shared and adapted for all the targeted counties where the CTP programme is implemented. The plan outlines key messages under each aspect to be communicated including KRCS mission and mandate, programme objectives, selection criteria, targeting process, geographical coverage, duration of assistance, conditionality and entitlements, communication channels,

⁴ The most vulnerable households not targeted under any other safety net project, Households, with orphans not targeted by any other programme, Households with critically ill persons who are, not targeted by any other programme, Most vulnerable households with elderly persons, Child headed households

transfer value, fraud and its consequences. This improved organizational accountability to target communities through increasing community understanding of programme components such as the implementation period, transfer value, frequency of transfers and complaints and feedback mechanisms.

KRCS has also established a complaint and feedback mechanism which include a toll-free telephone line, SMS, and committees among other mechanism. For the toll-free line, the mechanism aims at complementing the other complaints and feedback mechanism such as the use of beneficiary/community committees, the chiefs, and KRCS field volunteers and staff. This is now open to any community member who would wish to escalate their complaints to the headquarters. Dissemination and sharing of the line is ongoing among staff and volunteer networks with the public relations department also supporting in the sensitization of communities on the same. To date, 507 complaints and feedback have been received through the line. Complaints received has mainly been on non-receipt of beneficiary monthly entitlement due to errors in their payment details or problems with their M-Pesa lines. These are corrected and forwarded to finance for payment.

- 1.1.8** A total of 41,947HHs have been reached through Cash transfers supported through the drought Appeal. These are Kilifi (2,300HHs), Tana River (3,201HHs), (1,170HHs), Marsabit (4,700HHs), Garissa (3,628HHs), Wajir (2,923HHs), Mandera (3,574HHs), Isiolo (3,657HHs), Samburu (3,447HHs), Turkana (5018HHs), Kwale (1,195HHs) and Lamu (6,070HHs), West Pokot (1,198HHs) and Kitui (Mwingi) county where 361HHs were reached following a conflict between two communities in the area. In all the targeted counties, the decision to use cash to deliver aid was informed by the cash feasibility assessment findings. Transfer values varied⁵ in some counties with a value of Kshs.3, 000 being the agreed figure in majority of the targeted counties.
- 1.1.9** Post Distribution monitoring and real-time evaluation (RTE) was conducted in 12 counties (Kwale, Kilifi, Lamu, Tana River, Samburu, Isiolo, Marsabit, Turkana, Wajir, Garissa, Mandera and Baringo). Findings from the post distribution monitoring (PDM) and RTE were published in the [CaLP Website](#). A number of recommendations from the RTE have been applied in the currently ongoing drought response. This includes documentation of C&F, increasing programme scope to cover livelihood, and ensuring timely payments to beneficiaries.
- 1.1.10** After action reviews will be conducted at the end of the programme. Documentation of the CTP process is ongoing with support from the public relations and communications department. Video footages of the CTP process have been taken in Marsabit and Tana River Counties. The recordings will be uploaded on KRCS website highlighting the key steps in the CTP process and feedback from beneficiaries of the CTP process. Besides, case study documentation is ongoing for the cash based interventions in Marsabit and Turkana counties. Once completed, the evidence based case studies will be presented in cash learning fora and later published.

Outcome 1: Reduced food insecurity among the affected households	Outputs		% of achievement
	Output 1.1: Livelihoods are protected, and negative coping mechanisms reduced among affected pastoral communities/households		75%
Activities	Is implementation on time?		% progress (estimate)
	Yes (x)	No (x)	
1.1.1	Conduct inception meetings with local stakeholders including county steering group and community	x	100%
1.1.2	Identify payment mechanism	x	100%
1.1.3	Mobilize, target and register beneficiaries through selected community committee	x	100%
1.1.4	Purchase livestock, slaughter, inspect and distribute meat	x	60%

⁵ Transfer value was calculated at Kshs. 3,000 except for Kilifi (Ganze) which was Kshs. 6,000 and Lamu (Kshs.4,800 for mainland and Kshs.5,700 for Island)

1.1.5	Conduct after-action review with all stakeholders	X		30%
1.1.6	Procurement and distribution of seeds	X		60%

Progress towards outcomes

1.1.1 Inception meetings have been carried out in 13 counties where KRCS has been carrying out drought interventions. These were done through the CSG meetings at county level. During the inception meetings, KRCS highlighted the targeting criteria, transfer value, the project period and areas to be covered. The target areas and the transfer values were harmonized during the inception meetings. Through these meetings, KRCS together with other agencies developed joint plans of actions guided by the county government that include areas of operations thereby avoiding duplication of roles and double targeting of beneficiaries.

Inception meetings were also carried out for FAO de-stocking programme and ECHO CTP programmes that were launched as part of the drought response. The inception meetings increase information exchange hence improving coordination and help reduce overlap among agencies working in the counties.

1.1.2 Sixteen (16) vendors were identified through competitive bidding for destocking programmes in Tana River (2), Marsabit (11), Wajir (1), Mandera (1) and Garissa (1) counties. The vendors supported KRCS in buying weak livestock to help farmers salvage some capital from weak livestock affected by drought to protect farmers from heavy losses. More vendors have since been contracted for the destocking programmes under FAO in Turkana, Samburu, Marsabit, Tana River, Garissa and Wajir counties.

1.1.3 The actual de-stocking began in December 2016 in two initially targeted counties that have been experiencing huge livestock losses (Garissa and Tana River Counties). Community mobilization in these counties was carried out followed by initial meetings with stakeholders meant to give exact locations where the destocking exercise.

1.1.4 To cushion the community members from the effects of livestock losses and respond to increased food insecurity and malnutrition risks, KRCS intensified livestock off take interventions in which cattle and shoats with deteriorating body conditions were purchased for immediate local slaughter and distribution of the meat (upon certification as fit for consumption by a qualified meat inspector) with priority being given to families with malnourished children, under-fives, elderly and those living with disability. Through the destocking programme, a total of 54,343HHs (326,058 people) were reached through meat distribution. A total of 21,726 animals were slaughtered. Other interventions under the destocking programme include livestock vaccination, feed distribution and distribution of fodder seeds to support establishment of strategic fodder reserve for livestock.

A final report on the destocking programme is currently being drafted and will be shared once finalized documenting key lessons learnt, success stories and challenges encountered during the programme cycle.

1.1.5 After-action review (AAR) is planned at the end of the drought operation programme.

1.1.6 Quick maturing seeds were procured and distributed in Marsabit, Garissa, Kilifi, Makueni and Kwale counties. The seeds comprised of maize, butternut, water melon, green peas, green grams, cow peas, onions, and kales.

In Kitui county, KRCS and the county government of Kitui have partnered to distribute green grams seeds to support community livelihoods. The programme aims to reach 200,000 households in the county. Currently, the process of registration of eligible farmers is ongoing and is scheduled to end by mid-November 2017.

Water, sanitation, and hygiene promotion			
Outcome 1: Immediate reduction in risk of waterborne and water related diseases in the targeted communities	Outputs		% of achievement
		Output 1.1: Hygiene promotion activities which meet SPHERE standards in terms of the identification and use of hygiene items provided to target population	
	Output 1.2: Hygiene related goods (NFIs) which meet SPHERE standards are provided to the target population		70%
Activities	Is implementation on time?		% progress (estimate)
	Yes (x)	No (x)	
1.1.1. Train hygiene promoters on hygiene promotion as Trainer of Trainees for participatory hygiene and sanitation transformation methodologies	x		70%
1.1.2. Production and procurement of IEC materials to support behavior change communication (PHASTER toolkits).	x		70%
1.1.3. Recruit WASH officers	x		50%
1.2.1. Procurement of point of use water treatment chemicals for households	x		70%
1.2.2. Train and sensitize communities on the use of water treatment chemicals and monitor their utilization	x		70%
1.2.3. Procure storage containers; UPVC water tanks, bladder tanks to support water storage in hard hit areas		x	100%
1.2.4. Monitor treatment and storage of water through household surveys and water quality tests, including continuous assessments: partly covered by WSTF	x		60%
Progress towards outcomes			
1.1.1. 32 out of 50 planned Red Cross Action Team members have been trained on appropriate methodologies of conducting hygiene promotion in emergencies			
1.1.2. IEC materials have been procured to support behavior change communication.			
1.1.3. Two WASH officers have been recruited. KRCS is also using in-house human resource to support WASH promotion activities			
1.2.1. UNICEF donated 100,000 pieces of aqua tabs to be used for water treatment chemicals for households.			
1.2.2. Seven communities have been trained and sensitized on the use of water treatment chemicals and monitor their utilization			

- 1.2.3. Nine bladder tanks to support water storage were procured and distributed in Garissa and Wajir counties. UPVC, water tanks, bladder tanks were distributed in Garissa to support water storage in hard hit areas.
- 1.2.4. Monitoring of water treatment and storage of water through household surveys and water quality tests, is done bi-monthly.

Outcome 2: Sustainable reduction in risk of waterborne and water related diseases in target communities	Outputs		% of achievement
		Output 2.1: Community managed water sources giving access to safe water is provided to target population	
	Output 2.2: Hygiene promotion activities are provided to the entire affected population		66 %
Activities	Is implementation on time?		% progress (estimate)
	Yes (x)	No (x)	
2.1.1. Procure and distribute fast moving spare parts kit for target water systems	x		40%
2.1.2. Rehabilitate/equip key water supply schemes in strategic acute drought hit areas and training of water representatives	x		66%
2.1.3. Repair and deploy KRCS emergency response units	x		100%
2.1.4. Drilling of new boreholes	x		75%
2.1.5. De-silting of earth dams/pans	x		100%
2.1.6. Water trucking for one month	x		100%
2.2.1. Conduct thematic hygiene promotion campaigns targeting institutions, communal areas in the target areas	x		66%
2.2.2. Train teachers on SHEPP (School Hygiene, Education Promotion programme methodology	x		86%
2.2.3. Cascade SHEPP through formed school hygiene clubs	x		86%
Progress towards outcomes			
2.1.1. Two spare parts kits have been purchased for target water systems.			
2.1.2. Forty-six (46) water points have been rehabilitated in strategic acute drought hit areas and training of water representatives done respectively.			
2.1.3. KRCS has deployed the response teams.			
2.1.4. Six boreholes have been drilled and they are serving 2,500 households.			

2.1.5. Four de-silting of earth dams/pans.

2.1.6. Water trucking for one month was done in one county due to the lack of water to serve the community.

2.2.1. Forty-six (46) thematic hygiene promotion campaigns have been conducted in the sites where the boreholes were rehabilitated. The messaging targeted institutions and communal areas.

2.2.2. 20 schools have been trained on SHEPP

2.2.3. Following the SHEPP training which was done in 20 schools, KRCS has been able to reach 20 school in hygiene clubs.

Quality programming / Areas common to all sectors

Outcome 1: Continuous and detailed assessment and analysis is used to inform the design and implementation of the operation	Outputs		% of achievement
		Output 1.1 Initial needs assessment are conducted	
	Output 2.2 Target communities can provide feedback, complaints and influence decisions that affect them.		100%
Activities	Is implementation on time?		% progress (estimate)
	Yes (x)	No (x)	
1.1.1 Inception meeting with key stakeholders	x		100%
1.1.2 Participate in joint assessments	x		70%
1.1.3 Undertake joint rapid assessments where need be	x		70%
2.2.1 Strengthen the system for collecting and analyzing rumors and feedback, including through frontline volunteers and insights into media and social media.	x		100%
2.2.2. Review beneficiary communication (CEA), complaints and feedback reports including comprehensive beneficiary perceptions and satisfaction surveys as part of the monitoring strategy	x		100%
Progress towards outcomes			
1.1.1	Reported under Reduced food insecurity among the affected households 1.1.1		
1.1.2	KRCS has participated in joint assessments with other stakeholders in Garissa, Kilifi, Tana River, Kwale, Marsabit, Lamu, Turkana, Garissa, Isiolo, and Samburu counties. The results of these assessments have been used to inform programming options in these areas. Joint nutrition assessments have also been carried out in Turkana, Marsabit, Tana River, Kilifi and Lamu counties. The assessments have helped identify the		

most vulnerable children in need of support such as supplementary feeding programmes and case management of malnutrition cases. Findings from these assessments helped in enrolment of cases to the relevant nutrition programmes that include Supplementary feeding programmes and outpatient therapeutic programmes.

- 1.1.3 Joint rapid assessment was conducted in Baringo County where ethnic conflicts left over 4,000 households displaced. Following the assessments, KRCS has carried out a number of interventions that include distribution of non-food items (NFIs) to 821 households {comprising of blankets (1,841), mosquito nets (1,436), collapsible jerry cans (1,477), kitchen sets (812), and Tarpaulins (163)}, food to 11,000 households (comprising Maize flour, green grams, cooking oil, salt) and carried out medical outreaches in the affected. KRCS has also been leading dialogue and peace initiatives between the warring communities with the aim of bringing about sustainable peace in areas affected by the conflict. The situation has improved though cases of sporadic attacks continue to persist

The World Food Programme Vulnerability Assessment and Mapping and Food Security Outcome monitoring reports as well as the county specific short rains assessments, NDMA early warning bulletins provided some basic market information which informed the Cash Transfer programmes in Marsabit and Tana River counties.

Rapid assessment for Markets was completed. The Rapid Assessment of Markets study is currently ongoing in Marsabit, the findings of which will provide information on price trends, type and quality of commodities being stocked by both retailers and wholesalers, availability of key commodities and access of the physical markets.

2.2.1 and 2.2.2 Please refer to activity 1.1.8 under food security and livelihoods.

Outcome 2: Continuous and detailed assessment and analysis is used to inform the design and implementation of the operation	Outputs		% of achievement	
	Output 2.1: Management of the operation is informed by a comprehensive monitoring and evaluation system.		70%	
Activities	Is implementation on time?		% progress (estimate)	
	Yes (x)	No (x)		
2.1.1	Develop a monitoring and evaluation plan for this operation	x	100%	
2.1.2	Conduct an after-action review during and after the operation		x	30%
2.1.3	Conduct monthly internal coordination meetings with other involved departments such as health, nutrition, water and sanitation and food security, etc.	x		70%
2.1.4	Conduct an external evaluation for the drought response		x	30%
2.1.5	Review beneficiary communication, complaints and feedback reports	x		70%
Progress towards outcomes				
2.1.1	A monitoring and evaluation plan was developed, and the dissemination was conducted on the same to the team members. KRCS recently convened a planning and review meeting for all the cash focal persons in the 13 target counties in which the plans were disseminated and copies of the same shared.			

2.1.2 After Action Review has not been carried out for this operation. This is planned to be undertaken in at the end of the operation.

After Action Review for the Baringo Operation was carried out in the initial after-action review session will be for Baringo conflict response. Findings from the AAR pointed out a number of good practices implemented by KRCS which include;

- WASH interventions initiated in East Pokot apart from providing access to water resources for households also help reduce competition for such resources between communities hence offsetting a key trigger for conflicts in Baringo County.
- There is need for KRCS to develop conflict management and response SOPs to guide response to and management of conflicts.
- Community-based targeting (CBT) methodology was effective in identifying the most vulnerable households since most community members had better information about household needs and could identify deserving cases. However, CBT must be balanced with the possibility of influence by some non-deserving community members e.g. by committee members.
- Effective management of community complaints and feedbacks improves relations between KRCS and the community thus contributing to the overall success of the operation.
- Capacity building to volunteers improves the quality of response by creating a pool of volunteers who are able to offer diverse support during response operations.
- Constant monitoring of community perception is a critical component of ensuring the safety of response teams.

2.1.3 KRCS took part in coordination meetings both at county and at national levels.

At national level, KRCS has been actively involved in the food sector meetings aimed at ensuring sharing information on ongoing responses and coverage areas to ensure that responses do not duplicate what other agencies are doing. Other meetings included the Kenya Humanitarian Partnership Meetings (KHPT) organized by the UN, the monthly food security and nutrition working group (FSNWG) meetings, and Nutrition sector working group meetings

At county level, KRCS teams took part in County Steering Group (CSG) meetings which brought together all humanitarian and state agencies in each county together for coordination of emergency responses for each specific county. Areas targeted by the various KRCS programmes and each specific agency were agreed and allocated through the CSG taking into consideration the strengths and mandates of each agency.

KRCS has attended CSG meetings in Turkana, Kilifi, Marsabit, Lamu, Tana River, Garissa, Mandera, Wajir, Samburu, Kwale, Isiolo, and West Pokot counties where the drought situation has been on a deteriorating trend and Baringo county which is affected by both drought and conflict.

KRCS participated in the Water and Environmental Sanitation Coordination Meeting (WESCOORD) that was chaired by the principal Secretary, State Department of National Water Services. During the meeting the chair reiterated the government's commitment in supporting a number of drought mitigation programmes that include water tracking, boreholes rehabilitation and drilling. Members were informed that the government had spent one billion Kenya shillings in support of 23 counties worst hit by drought. Operational presence update map for April on the current drought response was also shared by the information management expert. Humanitarian agencies that presented their progress updates included UNICEF, KRCS, Nor Kenya, CRS, World Vision, Acted, Malteser International, Plan International, Food for the Hungry, Samaritan Purse and UNHCR. Key action points from the meeting included;

- Continued liaison with partners to support future workshops
- Filling of the 5Ws template by partners to capture activities
- Partners to subscribe to the new mailing list
- Application of funds by partners under the Flash Appeal and CERF

The KRCS also regularly takes part in the monthly Kenya Humanitarian Partners Technical meeting in which agencies provide updates on ongoing programmes including the drought response.

KRCS is co-chairing Cash Working Group at the National level and supporting with cash coordination at 6 selected counties (Isiolo, Samburu, Marsabit, Turkana, West Pokot, Wajir and Garissa). Through these forums, coordination among agencies is starting to improve through close collaboration and increased exchange of information which has reduced duplication. Some of the issues discussed in these forums include, harmonization of transfer values, coverage of beneficiaries once a particular partner's project comes to an end (differing project timelines) and creation of beneficiary data banks to be hosted by the social protection department (Government of Kenya).

2.1.4 An external evaluation for the operation will be carried out at the end of the operation.

2.1.5 Refer to 1.1.8 on outcome: Improved food needs of the drought affected populations are met

Target people and communities in the selected areas access timely, accurate and trusted information that enable them to access services, prevent diseases and take action about their safety, health and wellbeing and engage with the Red Crescent to influence and guide decisions (linked to output 2.2)	Outputs		% of achievement
	Output 3.1: Target households have access to life-saving information that helps them to access the most needed services (cash, shelter, and livelihood) and engage in recommended hygiene and nutrition practices (in consultation with health and WASH)		
Output 3.2: Target communities are able to provide feedback, complaints and influence decisions that affect them (linked to output 2.2)			100%
Activities	Is implementation on time?		% progress (estimate)
	Yes (x)	No (x)	
3.1.1. Develop CEA strategy, plan and tools	x		100%
3.1.2. Production and procurement of IEC materials to support behaviour change communication (PHASTER) toolkits – same as output 1.1.2 in WASH	x		70%
3.1.3. Establish dialogue platforms (call-in radio programmes), including at community level through the volunteers (KRCS has an established and funded system in place for this)	x		50%
3.2.1. Activate a local hotline (KRCS has an established and funded system in place for this)	x		100%
Progress towards outcomes			
3.1.1. Please refer to 1.1.7 under food security and livelihoods			
3.1.2. IEC materials were designed and procured for behavior change communication. Distribution is ongoing.			
3.1.3. KRCS is using existing mechanisms			
3.2.1. A local hotline is in use as reported under 1.1.8 under food security and livelihoods.			

D. Budget

Please refer to the financial report annexed.

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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 (NGO's) in Disaster Relief and the **Humanitarian Charter and Minimum Standards in Humanitarian 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.

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



Save lives,
protect livelihoods,
and strengthen recovery
from disaster and crises.



Enable **healthy**
and **safe** living.



Promote **social inclusion**
and a culture of
non-violence and **peace**.

Disaster Response Financial Report

MDRKE039 - Kenya - Drought

Timeframe: 23 Nov 16 to 23 Nov 17

Appeal Launch Date: 23 Nov 16

Interim Report

Selected Parameters

Reporting Timeframe	2016/11-2017/9	Programme	MDRKE039
Budget Timeframe	2016/11-2017/11	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		25,062,572				25,062,572	
B. Opening Balance							
Income							
Cash contributions							
<i>American Red Cross</i>		589,423				589,423	
<i>Australian Red Cross</i>		45,636				45,636	
<i>Austrian Red Cross (from Austrian Government*)</i>		1,117,976				1,117,976	
<i>British Red Cross</i>		253,482				253,482	
<i>China Red Cross, Hong Kong branch</i>		25,698				25,698	
<i>Finnish Red Cross</i>		284,790				284,790	
<i>German Red Cross</i>		107,376				107,376	
<i>Italian Government Bilateral Emergency Fund</i>		532,225				532,225	
<i>Italian Red Cross</i>		108,750				108,750	
<i>Japanese Government</i>		496,575				496,575	40
<i>Japanese Red Cross Society</i>		87,398				87,398	
<i>Luxembourg Red Cross</i>		34,325				34,325	
<i>Norwegian Red Cross</i>		139,422				139,422	
<i>Red Cross of Monaco</i>		21,459				21,459	
<i>Singapore Red Cross Society</i>		19,967				19,967	
<i>Swedish Red Cross</i>		234,353				234,353	
<i>Swedish Red Cross (from Radiohjälpen (Sveriges Television (SVT) Foundation*)</i>		106,316				106,316	
<i>The Canadian Red Cross Society (from Canadian Government*)</i>		75,014				75,014	
<i>The Netherlands Red Cross</i>		436,766				436,766	
<i>The Netherlands Red Cross (from Netherlands Government*)</i>		853,695				853,695	
<i>Turkish Red Crescent Society</i>		10,000				10,000	
C1. Cash contributions		5,580,646				5,580,646	40
C. Total Income = SUM(C1..C4)		5,580,646				5,580,646	40
D. Total Funding = B + C		5,580,646				5,580,646	40

* 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		5,580,646				5,580,646	40
E. Expenditure		-4,268,352				-4,268,352	
F. Closing Balance = (B + C + E)		1,312,294				1,312,294	40

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Split by funding source	Y	Project	*
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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)			25,062,572			25,062,572		
Relief items, Construction, Supplies								
Food	620,500						620,500	
Seeds & Plants	2,050,000						2,050,000	
Water, Sanitation & Hygiene	5,917,120						5,917,120	
Medical & First Aid	410,000						410,000	
Cash Disbursement	9,568,000						9,568,000	
Total Relief items, Construction, Sup	18,565,620						18,565,620	
Land, vehicles & equipment								
Computers & Telecom	23,600						23,600	
Office & Household Equipment	52,500						52,500	
Total Land, vehicles & equipment	76,100						76,100	
Logistics, Transport & Storage								
Storage	48,000						48,000	
Distribution & Monitoring	156,120						156,120	
Transport & Vehicles Costs	326,240						326,240	
Total Logistics, Transport & Storage	530,360						530,360	
Personnel								
National Staff	34,000		7,749			7,749	26,251	
National Society Staff	1,476,770						1,476,770	
Volunteers	378,370						378,370	
Total Personnel	1,889,140		7,749			7,749	1,881,391	
Consultants & Professional Fees								
Consultants	55,800						55,800	
Total Consultants & Professional Fees	55,800						55,800	
Workshops & Training								
Workshops & Training	108,450		31			31	108,419	
Total Workshops & Training	108,450		31			31	108,419	
General Expenditure								
Travel	10,000		333			333	9,667	
Information & Public Relations	118,435						118,435	
Communications	29,000		10			10	28,990	
Financial Charges	1,200		3			3	1,197	
Other General Expenses	2,133,690						2,133,690	
Shared Office and Services Costs	15,136		8,266			8,266	6,870	
Total General Expenditure	2,307,461		8,612			8,612	2,298,850	
Contributions & Transfers								
Cash Transfers National Societies			3,969,360			3,969,360	-3,969,360	
Total Contributions & Transfers			3,969,360			3,969,360	-3,969,360	
Indirect Costs								
Programme & Services Support Recover	1,529,641		259,074			259,074	1,270,567	
Total Indirect Costs	1,529,641		259,074			259,074	1,270,567	
Pledge Specific Costs								
Pledge Earmarking Fee			21,927			21,927	-21,927	
Pledge Reporting Fees			1,600			1,600	-1,600	
Total Pledge Specific Costs			23,527			23,527	-23,527	
TOTAL EXPENDITURE (D)	25,062,572		4,268,352			4,268,352	20,794,220	

Disaster Response Financial Report**MDRKE039 - Kenya - Drought**

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Subsector:	*		

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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)			25,062,572			25,062,572		
VARIANCE (C - D)			20,794,220			20,794,220		

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Subsector:	*		

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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 management	25,062,572		5,580,646	5,580,646	4,268,352	1,312,294	40
Subtotal BL2	25,062,572		5,580,646	5,580,646	4,268,352	1,312,294	40
GRAND TOTAL	25,062,572		5,580,646	5,580,646	4,268,352	1,312,294	40