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Emergency appeal Kenya: Drought

 International Federation
of Red Cross and Red Crescent Societies

Appeal MDRKE044

150,000 people to be assisted

Appeal launched April 2019

Glide n° DR-2019-000024-
KEN

385,000 Swiss francs DREF allocated

Appeal ends September 2019

8 million Swiss francs current funding
requirements

This Emergency Appeal seeks a total of some **8 million** Swiss francs to enable the International Federation of Red Cross and Red Crescent (IFRC) to support the **Kenya Red Cross Society (KRCS)** to deliver assistance and support to some **150,000 people for 6 months**, with a focus on the following areas and strategies for implementation: **Livelihoods and basic needs, Water Sanitation and Hygiene (WASH), Health, Protection, Gender and Inclusion (PGI) and Community Engagement and Accountability (CEA)**. The planned response reflects the current situation and information available at this time of the operation.

The disaster and the Red Cross Red Crescent response to date

January 2019: National Drought Management Authority (NDMA) bulletin issued, stating that nine (9) counties are at the stressed food insecurity phase (IPC2)

March 2019: IFRC launches a Disaster Relief Emergency Fund ([DREF](#)) operation, to support 10,000 families with a one off cash transfer

March 2019: The Short Rains Assessment report released in March indicates a worsening food security situation, with some counties having moved to a Crisis phase (IPC3)

April 2019: IFRC launches an Emergency Appeal, expanding the scope of the operation in terms of areas of intervention and people to be assisted.



Photo: Drought situation in northern part of Kenya/photo KRCS

The operational strategy

Needs assessment and targeted communities

The effects of below average 2018 October–November–December (OND) short rains season continue to be experienced in many parts of the country. The short and erratic rainfall compounds pre-existing fragile coping capacity, the food security situation has deteriorated in many counties of the country. The National Disaster Management Authority (NDMA) bulletins for January 2019 indicates that **16 counties (West Pokot, Tharaka Nithi, Samburu, Nyeri (Kieni), Marsabit, Mandera, Lamu, Laikipia, Kitui, Kilifi, Isiolo, Garissa, Embu, Baringo, Turkana and Wajir)** are currently experiencing increasing Stressed food insecurity (IPC2) with the situation worsening as a result of ongoing effects of the drought. Wajir County is the worst affected in the country with Turkana, Marsabit, Baringo, Samburu and Garissa also experiencing significant deterioration in the food security. Some communities in these affected counties are already in crisis (IPC 3) with the situation projected to further deteriorate. This operation is primarily informed by the 2018 Short Rains Season Assessment (SRA) report which indicated that 800,000 people were in Crisis IPC 3 and require immediate food assistance. A subsequent assessment done in March 2019 by NDMA indicated that 843,900 people are in IPC 3 and a further 267,600 people are in IPC 2 bringing the total food insecure population to 1,111,500 people.

Cessation of the short rains, which were generally below-average in many areas, resulted in a warning of a decline in food, water and pasture in a number of counties. Diminished forage resources have triggered migration and concentration of livestock in particular dry season grazing areas. Diminishing resources increases competition for the resources, which is a major trigger of resource-based conflicts if not managed early enough. The nutrition situation remains critical in Turkana, Samburu and Mandera counties as well as East Pokot and North Horr sub-counties¹ while Wajir, Tana River, West Pokot, Garissa and Laisamis counties are at serious level². An estimated 541,309 people (including children under 5 and pregnant and lactating mothers) require treatment for malnutrition with more increase observed in severe acute malnutrition (SAM) caseloads which recently rose from 85,105 to 113,941.

The March-April-May 2019 period has experienced delayed rains onset in many parts of the country, attributed to the Tropical Cyclone in Southern Africa. A possibility of further tropical cyclones developing in the South-West Indian Ocean Basin will continue delay further the onset over the eastern sector of the country. As a result of this, dry conditions are expected to persist in the eastern part of the country. The rains are also expected to be poorly distributed both in time and space which is likely to have negative impact on the agricultural sector leading to food insecurity. As these areas are already experiencing increased food insecurity, the expected poor rainfall performance will result in less than full recovery for many of these areas and thus food insecurity is likely to persist through to July 2019. Thus, KRCS proposes to carry out cash and food interventions through this period.

As the drought situation worsens, the health, nutritional and psychosocial status of the affected population is negatively impacted especially for families already in IPC phase 3 (SRA, 2018). There is also a risk of increased disease outbreaks due to scarce availability of clean drinking water. Counties at risk of cholera outbreaks (including Tana River, Garissa, Wajir, Turkana, Mandera, Marsabit and Narok) as well those with active outbreaks (including Kajiado) are likely to experience new outbreaks as water scarcity forces communities to resort to poor quality water.

¹ (Phase 4; Global Acute Malnutrition (GAM) Weight for Height Z-Score (WHZ) 15.0 - 29.9 percent) - KFSSG Short Rains Assessment Findings

² (Phase 3; Global Acute Malnutrition (GAM) Weight for Height Z-Score (WHZ) 10.0 -14.9 percent) - KFSSG Short Rains Assessment Findings

The drought has brought shifts in livelihoods and traditional gender roles and undermined existing coping capacities. Food insecurity increases the risk of sexual and gender-based violence (SGBV) and adoption of negative coping strategies including transactional sex and early marriage. More women are sacrificing food intake and eating less in order for children to eat. Persons with disabilities are at risk of not getting access to services due to exaggerated inequalities and discrimination.

In the eight affected counties, pans and dams recharged to far less than their expected recharge based on data and observations from previous years attributed mainly to the poor performance of the OND 2018 rains season. Drying of open water sources has been reported in many of the Arid and Semi-Arid Lands (ASAL) counties including Turkana, Marsabit, Wajir, Garissa, and Samburu which increases pressure on permanent sources, such as boreholes, leading to longer waiting times and the risk of breakdown. There is a decrease in water availability in the pastoral livelihood zones due to poor or no-recharge of water bodies. More than 70 per cent of the pans and seasonal rivers are reported to be dry in some parts of the country (Turkana, Garissa, Wajir, and Marsabit counties). Broken water sources continue to be reported, most notably in the drought severe areas of Isiolo and in the marginal mixed farming and pastoral zones. Distances to water points have continued to increase as normal water sources dry up. This has resulted in increased queues and waiting times at water sources.

KRCS will concentrate its interventions in the worst drought hit sub counties which are currently not supported by any agency. The decision on the specific sub-counties to be supported will be reached through discussion with the County Steering Group (CSG). Households will be selected through a community-based targeting approach to identify the most vulnerable for cash transfers. These will include widows or divorced women heads of households with children under 5 years; pregnant or lactating mothers with children under 5 years; widows or divorced women headed families with no source of income; families with severely malnourished children or child (under 5 years); households headed by people with disabilities with no source of income; and children-headed households.

Coordination and partnerships

The IFRC, through the East Africa Country Cluster Support Team (CCST), provides resource mobilization and technical support to KRCS in implementation of emergency response operations as well as long-term programming. The KRCS works and collaborates with various partner National Societies (pNSs) present in Kenya including; American Red Cross, British Red Cross, Danish Red Cross, Finnish Red Cross, Italian Red Cross and Norwegian Red Cross Societies. The International Committee of the Red Cross (ICRC) has a regional delegation also hosted in Nairobi, which serves as a hub for operations in eastern and central African countries.

KRCS has received support from the British Red Cross to roll-out cash preparedness activities in areas already affected or at risk of being affected by drought. Through the program, KRCS aims to undertake orientation for its staff and volunteers to be involved in the drought response, assessment, mobilization, targeting as well as registration of beneficiaries. A total of 25,000 most vulnerable households will be registered under the programme. The registered households will be targeted through cash transfers to be supported through this Emergency Appeal. Danish Red Cross is also supporting roll-out of early warning early action responses in Turkana county. Through the support, KRCS aims to roll out a cash transfers to 850 households for 3 months.

KRCS works with the National Disaster Operations Centre (NDOC) in coordinating humanitarian emergencies, the NDMA in drought management, and as co-chairs of Kenya Cash Working Group. In terms of emergencies coordination and management, eight coordination hubs across the country were established as part of contingency measures prior to the general elections and continue to serve as centres for coordination meetings, logistics, storage and distribution. Other state actors include Hunger Safety Net Programme (HSNP) that coordinates cash transfer for most vulnerable households in four counties as well as the Ministry of Health (MoH) at national and county level (responsible for implementation of nutrition interventions targeting malnourished children, pregnant and lactating women and the elderly). Other Government Ministries like Ministry of Water, Ministry of Agriculture, among others, also support in the drought assessments.

The below table highlights the various areas where Red Cross Red Crescent Movement and external partners are planning to provide support to KRCS in the drought operation:

Partner	Support to be provided to KRCS in response
IFRC	Launch of an Emergency Appeal, following an initial allocation from the DREF which enabled KRCS to reach an initial 10,000 households using cash-based interventions.
British Red Cross	Providing support in capacity building of cash focal points to conduct targeting, registration and verification of beneficiaries who will be reached through the DREF/Emergency Appeal.
Danish Red Cross	Cash transfers for three months as well as a one-off food distribution in areas without market infrastructure. This support is complementing the DREF operation.
WFP	Supporting in-kind food distribution through the Protracted Relief and Recovery Operation (PRRO), targeting 85,250 households in Garissa (50,250HHs) and Tana River (35,000HHs) counties as part of a longer-term project.

In view of the various ongoing interventions, KRCS will work with other partners at county and at national level to ensure there is no duplication of efforts. KRCS will present its programme plans through the Country Steering Group (CSG) for consideration and allocation of geographical areas in coordination with other partners. Continuous updates and information sharing will be carried out throughout the programme implementation period. KRCS will also take part in coordination meetings at national level including the Cash Technical Working Group, the Kenya Food Security Steering Group, among others to ensure all responses are coordinated.

Proposed Areas for intervention

Overall Operational objective: Contributing to reduced negative impacts of drought on vulnerable communities through provision of unconditional and unrestricted cash transfers, health services and clean drinking water.

The choice of unconditional and unrestricted cash grants is driven by the Hunger Safety Net program (HSNP) of the Kenyan Government, to which all humanitarian partners are aligned.

KRCS will implement response actions guided by the national sector specific action plans and continue to inform its plans based on information availed from forecasts by the Kenya Meteorological Department (KMD), Kenya Food Security Steering Group (KFSSG) Long and Short Rains Impact Assessments, the NDMA Bulletins, nutrition sector SMART Survey reports and subsequent action plans and the health sector action plan.

KRCS will:

- continue to coordinate with the two levels of government and non-state actors and through this, update the Red Cross Red Crescent Movement partners on the progress being made in curbing the effects of drought.
- participate in nutrition SMART surveys, as well as other assessment that may be undertaken during the operation period.
- Monitor the drought situation through joint rapid assessments, in areas showing rapid deterioration of the drought emergency.

The focus of the operation is on Livelihoods and Basic Needs, WASH and Health.

Community Engagement and Accountability (CEA) will be integrated throughout the response process to ensure active and meaningful participation of the affected communities. The communities will be engaged at all levels of

the response using the existing KRCS tools and CEA approaches to capture the community feedback and continuous analysis to allow timely addressing of gaps and ensure efficiency during the interventions. Prior to this, KRCS volunteers will be provided one day orientation on CEA during the project orientation session. The two-way communication channels will be used to inform and determine community selection for assistance.

The use of the CEA approaches will also be important in sensitizing the affected communities regarding the operation, thus a provision of information and two-way engagement with the affected population is a key consideration during the drought response operation.

The KRCS interventions, therefore, can be adjusted according to the expectations, needs and concerns of affected communities. Community engagement tools and mechanisms will be incorporated in the response and will be closely linked with planning, monitoring and the evaluation processes in order to build an environment of transparency and accountability to the communities. Communication channels to be used during the operation will be determined after assessment and discussions with the target communities. It is important to note that KRCS has an institutional complaints and feedback toll free line (0800 720 577) that supports its engagement with communities. This will also be used for this operation.

Areas of Focus



Livelihoods and basic needs

People targeted: 150,000

Male:74,250

Female:75,750

Requirements (CHF): 5,170,000

Proposed intervention

Needs Assessment:

In Kenya, most areas which have started experiencing food insecurity are in the Arid and Semi-arid (ASAL) areas. In these areas, communities practice mainly agro-pastoralism and pastoralism thus, they depend on meat and milk for nutrition and income. Actions to prevent a deterioration in the food security in the country are a key priority in these areas. While the number of food insecure people is 900,000 people, KRCS aims to support 150,000 people identified as the most vulnerable households currently not benefitting from any of the ongoing government programmes. The communities will be consulted on criteria for selection of households for support. A feasibility study for cash intervention will be carried out to inform transfer modalities, appropriate targeting and monitoring of intended use.

Population to be assisted: KRCS plans to support 25,000 households through direct cash transfers in Garissa, Turkana, Marsabit, Samburu, Tana River, Isiolo, Wajir, and Mandera Counties. The targeted households include the 10,000 households already reached with through a 1-month cash transfer allocation funded through the DREF operation. The same 10,000 households supported with one-month cash transfer will receive another three months transfer and additional 15,000 households being supported with 4 months' cash transfer. This will ensure that each of the 25,000 HHs receives 4 disbursements during the operation period.

The intervention will apply geographical targeting approach based on the Government Agencies bulletin/updates on the drought and food security situation. These will be identified through engagements with the CSG with specific geographical areas from County, Sub County, Ward, Location, Sub Location and villages. At the village level, Community Based Targeting (CBT) Approach will be used to identify the specific households that will be registered. Communities will be mobilized through all existing local structures like schools, religious institutions, women groups, associations of persons with disabilities and the office of the local administration. The communities will be engaged to review the proposed targeting/selection criteria.

For in-kind food, KRCS will provide 70% food ration to each target households. This will be reviewed on ongoing basis and will be scaled up should the food insecurity situation continue to worsen.

Selection Criteria

Families headed by vulnerable groups like women, the elderly or children and or person with disability or chronically ill family members as the bread winners will be prioritized. Since there are other interventions ongoing in limited scale in the targeted counties, the communities who are participating in any other/similar activity including the Government Hunger Safety Net Program and those with stable source of income or remittances from relatives will not be included in this programme. The families meeting multiple inclusion criteria will be prioritized for assistance. However, to be eligible for the assistance the beneficiaries must be in drought stricken areas.

Various vulnerabilities will be incorporated in the selection criteria to ensure the most vulnerable are targeted to benefit from the intervention. The community meeting will arrange at various locally identified sites near the villages targeted to avoid long travel distances by communities. The project teams will work with any local association for the vulnerable groups during targeting and registration.

KRCS has community accountability framework with four pillars: transparency, participation, feedback mechanisms and community led monitoring and evaluation, which guides its staff and volunteers towards greater accountability to the communities we work with. The National Society has set up a 24-hour hotline and a toll-free line that operates from 8.00am to 5.00pm from Monday to Friday every week and it's available to the public and all the communities to provide any feedback or complain. The communities will be sensitized about the toll free line and encouraged to call to share any feedback or complaints regarding their interaction with the KRCS. The call log will be maintained by the accountability officer with the type of feedback received and feedback given. Complaints are aimed to be resolved in the quickest time possible. This will increase the mutual trust between the community and the KRCS.

This operation will be implemented in partnership with the county governments through the County Steering Groups to coordinate its activities and avoid duplication of efforts. The National Drought Management Authority (NDMA) will be a key partner where the Government social register for Hunger Safety Net Program (HSNP) will be used to determine households already covered through the HSNP and target those not covered under any safety nets.

Livelihoods and basic needs Outcome 1: Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods

Livelihoods and basic needs Output 1.1: Basic needs assistance for livelihoods security including food is provided to the most affected communities

Activities planned

- Conduct inception meetings with local stakeholders including county steering group and community
- Selection and orientation of cash focal persons (including community-based volunteers) in counties affected and those at risk of being affected by drought
- Mobilization and community-based identification, targeting and registration of the most vulnerable households using agreed targeting criteria with clear community communication plan
- Verification and validation of the targeted households in consultation with the Government Safety net programs especially Hunger Safety Net Program (HSNP) to avoid duplication
- Cash disbursement (Cash intervention based on E-Cash and restricted cash) to the most vulnerable communities already facing the effects of drought
- Carry out post distribution monitoring

- Mobilize, target and register beneficiaries through selected community committee
- Distribution of food to affected families including the protection ration for households which have malnourished children and pregnant and lactating women

Livelihoods and basic needs Output 1.3: Household livelihoods security is enhanced through food production and income generating activities

Activities planned

- Sensitize beneficiary regions on interventions and beneficiary selection.
- Procurement and distribution of early maturing and drought tolerant crops.
- Distribution of grass seeds for fodder. Facilitate periodic disease surveillance, treatment, and vaccination of livestock sensitization on commercial destocking.



Health

People targeted: 150,000

Male: 74,250

Female: 75,750

Requirements (CHF): 1,030,000

Proposed intervention

Needs analysis: Since January 2019, Cholera outbreaks have been reported in three counties of Nairobi, Narok, Machakos, Garissa and Kajiado Counties. The outbreaks have been associated with contamination of water sources related to with the drought situation. Waterborne diseases may increase if the situation continues to prevail and interventions targeted at early detection and response the epidemic shall be employed.

With the decline in food security in the households, nutritional status is anticipated to decline further, and interventions aimed at improvement on nutritional wellbeing will be employed with support of the MOH. In addition, the integrated outreaches will be undertaken to meet the health needs of the population in the hard to reach areas as the populations move in search for pasture and water. To promote psychosocial wellbeing, psychosocial support services shall be integrated to prevent distress and suffering developing into something more severe help people cope better and become reconciled to everyday life.

Health Outcome 1: The immediate risks to the health of affected populations are reduced

Health Output 1.1: The health situation and immediate risks are assessed using agreed guidelines

Activities planned

- Conduct health assessment to map out the areas with risk of the spread of the disease including nutrition rapid assessments in flagged areas to further inform response
- Support review of county contingency plans (health and nutrition sector) and Coordination meetings to review response actions at sub county, county and national levels

Health Output 1.2: Target population is provided with rapid medical management of injuries and diseases

Activities Planned

- Preposition health and nutrition supplies in the regional hubs (including RUTF, MUAC tapes, RH kits, Dignity kits, IEHK kits and assorted pharmaceutical supplies).
 - Comprehensive KRCS surge team activation in readiness for deployment – the team is composed nurses, clinical officers, Public health officers, pharmacist, doctors, and nutritionist that will support county governments in cases where disease outbreaks are reported.

Health Output 1.3: Community-based disease prevention and health promotion is provided to the target population

Activities Planned

- Train 140 (20*7 Counties) volunteers on communicable disease surveillance in coordination with MoH and County disease surveillance coordinators
- Health education and hygiene promotion undertaken to prevent, and control disease spread
- Conduct sensitization of First Responders on Gender and Disability inclusion in Humanitarian Action
- Sensitize HCW/ Facility staff on Snake bite Envenoming guidelines

Health Output 1.4: Psychosocial support provided to the target population

Activities Planned

- Safe Spaces for vulnerable groups including child protection. Disease surveillance, prevention and control in the event of outbreaks
- Conduct debriefing sessions for the response teams
- Support Mental Health and PSS TWGs meetings

Health Output 1.5: Acute Malnutrition is addressed in the target population.

Activities Planned

- Sensitization of county teams (MoH and KRCS staff) on Maternal Infant and Young Child Nutrition in Emergencies and monitoring of the Breast Milk Substitutes Act for violations -
- Conduct active case finding and refer all cases of acute malnutrition to health facilities for appropriate management
- Recommended commodity for supplementary feeding (Children < 5 years malnourished) (1.5kg bags) for three months
- Recommended commodity for supplementary feeding (pregnant and lactating women) (1.5kg bags) for three months

Health Output 1.6: Minimum initial maternal and neonatal health services provided to target population

Activities planned

- Ensure there is access to EMONC (Emergency Obstetric and neonatal Care) services and access of mothers to health services including Ante Natal Care (ANC), Post Natal Care (PNC) and Family Planning (FP) Services



Water, sanitation and hygiene

People targeted: 150,000

Male: 74,250

Female: 75,750

Requirements (CHF): 383,000

Proposed intervention

Needs Analysis: Access to safe drinking water will be important for sustenance of life and averting of disease outbreaks at a time when communities are at their most vulnerable. Proposed wash interventions will include rehabilitation and improvement of community water supply systems, hygiene promotion and distribution of point of use water treatment chemicals. In areas where available water sources during the driest periods are not chemically fit for human consumption, we propose pre-paid token based conditional cash transfer with prepaid water meters being installed in designated hubs. Each trucker will set up a hub which KRCS will equip with a prepaid water meter. The targeted households will each be given a token which will be pre-loaded. The trucker will then be paid for volume of water dispersed. This will allow real time monitoring of house hold water use in each targeted area while payment to the truckers will be based on volume of water sold.

Water, Sanitation and Hygiene Outcome 1: Immediate reduction in risk of waterborne and water related diseases in the targeted communities

Water, Sanitation and Hygiene Output 1.1: Hygiene promotion activities which meet SPHERE standards in terms of the identification and use of hygiene items provided to target population

Activities Planned

- Train hygiene promoters on hygiene promotion as Trainer of Trainees for participatory hygiene and sanitation transformation emergency response (PHASTER) methodologies
- Sensitize Community Health promoter/volunteers on hygiene & sanitation promotion.
- Conduct thematic hygiene promotion campaigns targeting; institutions, communal areas in the target areas

Water, Sanitation and Hygiene Output 1.2: Hygiene related goods (NFIs) which meet SPHERE standards are provided to the target population

Activities Planned

- Procurement of Point of Use water treatment chemicals for household water treatment
- Distribute Train and Sensitize communities on the use of water treatment chemicals and monitor their utilization
- Monitor treatment and storage of water through household surveys and water quality tests, including continuous assessments.

Water, Sanitation and Hygiene Outcome 2: Improved access to safe water by communities

Water, Sanitation and Hygiene Output 2.1: Community managed water sources giving access to safe water is provided to target population

Activities Planned

- Assessment and appraisal of water systems
- Feasibility studies and detailed design of critical water facilities
- Rehabilitate/Build/ key water supply schemes in strategic acute drought hit areas and training of the water management representatives
- Support community access to water through pre-paid tokens from water vendors using pre-paid water metering at a cost of 45 CHF per household per month. Service providers will be selected from existing registered water vendors in the targeted areas.
- Construction of community water point
- Installation of prepaid water meter



Protection, Gender and Inclusion

People targeted: 150,000

Male: 74,250

Female: 75,750

Requirements (CHF): 82,000

Proposed intervention

Needs analysis: Some people are left out and miss humanitarian assistance because they are either ignored or discriminated upon based on their gender, age or disability, yet they feel the worst effect of any crisis. This intervention will design the targeting criteria based on vulnerabilities leveraging on diversity factors among others like age and gender. The intervention will seek to engage the at-risk groups so that they gain equitable access to the assistance.

Inclusion and Protection Outcome 1: Communities identify the needs of the most vulnerable and particularly disadvantaged and marginalised groups, as a result of inequality, discrimination and other non-respect of their human rights and address their distinct needs

Inclusion and Protection Output 1.1: NS programmes improve equitable access to basic services, considering different needs based on gender and other diversity factors.

Activities Planned

- Assessment and analysis of vulnerabilities, capacities and protection risks based on gender, age and disability.
- Training field teams in protection, gender and inclusion issues.
- Setting up referrals to protection services.
- Awareness-raising to prevent violence and negative coping strategies.

Strategies for Implementation

Requirements (CHF): 1,335,000

S1.1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competences and capacities to plan and perform

Output S1.1.4: National Societies have effective and motivated volunteers who are protected

Activities Planned

- Ensure that volunteers are insured
- Carry out community review meeting
- Print and distribute IEC materials on the KRCS toll-free line
- Radio spots

Based on the demand for the technical and coordination support required to deliver in this operation, the following programme support functions will be put in place to ensure an effective and efficient technical coordination: **human resources, logistics and supply chain; information technology support (IT); communications; security; planning, monitoring, evaluation, and reporting (PMER); partnerships and resource development; and finance and administration.** More details are in the Emergency Plan of Action.

Operational support services

Human Resources

A total of 240 RC volunteers will be engaged for a period of up to 6 months to undertake various activities for the success of this operation. In addition to volunteers, 55 management and technical staff of health, WASH, cash based intervention, finance and CEA will manage the operation. The number includes surge capacity that will be deployed on a need-basis and will consist of nutritionist, clinical officers, public health officers, nurses and counsellors. They will carry out targeted intervention which includes screening and treatment of acute malnutrition at community level.

Logistics and supply chain

Logistics support to the Emergency Appeal operation will include delivering a range of relief items in line with operational priorities and activities. These will include;

- Procurement of service providers for the CBI interventions including the RedRose system which KRCS will use to register and manage beneficiary information throughout the period.
- Procurement, transport and distribution of in-kind food distributions for areas where CBI is not feasible.
- Procurement of emergency water treatment chemicals
- Local transportation of water treatment chemicals, hygiene promotion materials and IEC materials in line with IFRC and KRCS guidelines.
- Transportation of teams to final distribution points and service delivery points to affected communities.

The operation will rely on KRCS' capacity to conduct logistics and supply chain management capacity to ensure smooth operation. Several regional hubs will be operationalized to support operations in counties. The procurement will also involve supplies required for rehabilitation of boreholes and other community water sources,

as well as fast moving spare parts. After procurement, the supplies will be transported to the regional hubs, where temporary storage will occur, and release will be done based on demand.

KRCS logistic and warehousing will avail light vehicles to support field operations especially movement of staff during community mobilization, targeting, registration of beneficiaries for cash transfer, food distribution (where cash is not feasible) and post distribution monitoring following all distribution (cash and in-kind).

Transportation of supplies will be supported by KRCS fleet of trucks and will also include use of the KRCS regional warehouses where deemed necessary to support in storage.

Information technologies (IT)

The KRCS ICT team will play an important role in supporting the operation, ensuring the necessary ICT support is available for the operations team.

ICT will support the registration of beneficiaries using the RedRose systems including collection of biometric data for selected beneficiaries. The system is expected to result in improvement and data management as well as enhanced accountability in KRCS CBI operations. ICT officers will thus lead in orientation of volunteers on the use of the RedRose system to allow for roll out of the registration and overall beneficiary data management.

Following up on previous discussion to expand network coverage, KRCS will continue to engage Safaricom to expand network coverage in areas to be covered under the CBI programme to ensure communities are able to access cash in the easiest and cost-efficient way possible.

KRCS will also rely on ICT support to ensure relevant communication equipment, including radio and satellite phones where relevant are functional to ensure efficient communication between teams in the field are able to communicate with each other, and relevant offices both at national, regional and county level. This will also contribute to enhanced security for the various response teams.

Planning, Monitoring, Evaluation, & Reporting (PMER)

The KRCS Monitoring, Evaluation, Accountability and Learning (MEA&L) unit will develop a Monitoring and Evaluation Plan, Logical Framework and Indicator Tracking Tool for use in the Drought Operation. The KRCS Headquarters and the County teams will conduct surveys, including markets assessments and beneficiaries needs assessments in the targeted Counties, through the Branch RCATs on mobile data platforms in order to analyze developing situations, community needs, preferred communication channels and stakeholder analysis. Additionally, the KRCS HQ and the County teams will conduct Post Distribution Monitoring, through the mobile data collection PDM tools in the KoBo, after the Cash Disbursements to the affected communities. The project team will also conduct supervisory visits to activity locations and compile monitoring reports for each stage of response. The Assessment, Encashment, CEA, Post Disbursement, and Project Performance reports will be received, analyzed by the Headquarters operations team to ensure standardized interventions and beneficiary accountability during the drought operation. An after-action review will be carried out at end of the operation in order to capture lessons learned from the drought response action with the aim of harnessing learning and improving future performance. At the end of the operation, KRCS will conduct final evaluation internally in selected project areas to assess the contribution of the project intervention against the set project objectives.

Community Engagement and Accountability (CEA)

CEA will be integrated throughout the response process to ensure active and meaningful participation of the affected communities. Trained RCATs will engage the communities at all levels of the response using the existing KRCS tools and CEA approaches to capture the community feedback and continuous analysis to allow timely addressing of gaps and ensure efficiency during the interventions. Prior to this, volunteers will be sensitized on CEA during the project orientation session. The use of the CEA approaches will also be important in sensitizing the affected communities regarding the operation, thus a provision of information and two-way engagement with the affected population is a key consideration during the drought response operation. The KRCS interventions, therefore, can be adjusted according to the expectations, needs and concerns of affected communities. Community engagement tools and mechanisms will be incorporated in the response and will be closely linked

with planning, monitoring and the evaluation processes in order to build an environment of transparency and accountability to the communities. Communication channels to be used during the operation will be determined after assessment and discussions with affected communities. It is important to note that KRCS has an institutional complaints and feedback toll free line (0800 720 577) that supports KRCS engagement with communities. This will also be used for this operation.

Security: Standard security protocols about general norms, cultural sensitivity and overall code of conduct will be put in place. The minimum-security requirements will be strictly maintained. All National Society and IFRC personnel actively involved in the operations will successfully complete prior to deployment the respective IFRC security e-learning courses (i.e. Stay Safe Personal Security, Security Management, or Volunteer Security).

International Federation of Red Cross and Red Crescent Societies

EMERGENCY APPEAL

APPEAL CODE – Kenya drought

Funding requirements - summary

LIVELIHOODS AND BASIC NEEDS	5,170,000
HEALTH	1,030,000
WATER, SANITATION AND HYGIENE	383,000
PROTECTION, GENDER AND INCLUSION	82,000
STRENGTHEN NATIONAL SOCIETIES	880,000
EFFECTIVE INTERNATIONAL DISASTER MANAGEMENT	235,000
INFLUENCE OTHERS AS LEADING STRATEGIC PARTNERS	220,000
TOTAL FUNDING REQUIREMENTS	8,000,000

Elhadj As Sy
Secretary General

For further information, specifically related to this operation please contact the below persons:

Kenya Red Cross Society:

- Dr. Abbas Gullet, Secretary General; email: gullet.abbas@redcross.or.ke, phone: +254 722740789

IFRC East Africa CCST Office:

- Andreas Sandin, Ag. Head of Cluster, email; andreas.sandin@ifrc.org, phone; +254 732 508 060
- Marshal Mukuware, Disaster Management Delegate, email: marshal.mukuware@ifrc.org, phone: +254780930280

IFRC Office for Africa Region:

- Khaled Masud, Regional Operations Coordinator; email: Khaled.masud@ifrc.org phone; +254 731 067 286
- Adesh Tripathee, Head of Africa DCPRR, email: adesh.tripathee@ifrc.org, phone: +254 731 067 489

In IFRC Geneva:

- Antoine Belair, Senior Officer - Operations Coordinator (Africa); phone: +41 79 708 3149; email: antoine.belair@ifrc.org

For IFRC Resource Mobilization and Pledges support:

- **IFRC Africa Regional Office for resource Mobilization and Pledge:** Franciscah Cherotich – Lilech, Acting Head of Partnership and Resource Development, Nairobi, email: franciscah.kilel@ifrc.org, phone: +254 712 867 699

For In-Kind donations and Mobilization table support:

- **IFRC Africa Regional Office for Logistics Unit:** RISHI Ramrakha, Head of Africa Regional Logistics Unit, email: rishi.ramrakha@ifrc.org; phone: +254 733 888 022

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

- **IFRC Africa Regional Office:** Illah Evance Ouma, Acting PMER Coordinator, email. illah.ouma@ifrc.org, phone: +254 780 771 139

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:



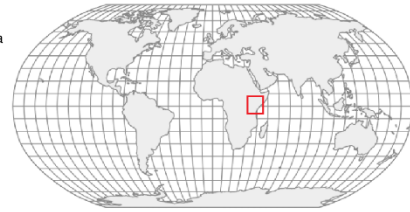
Save lives,
protect livelihoods,
and strengthen recovery
from disaster and crises.



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

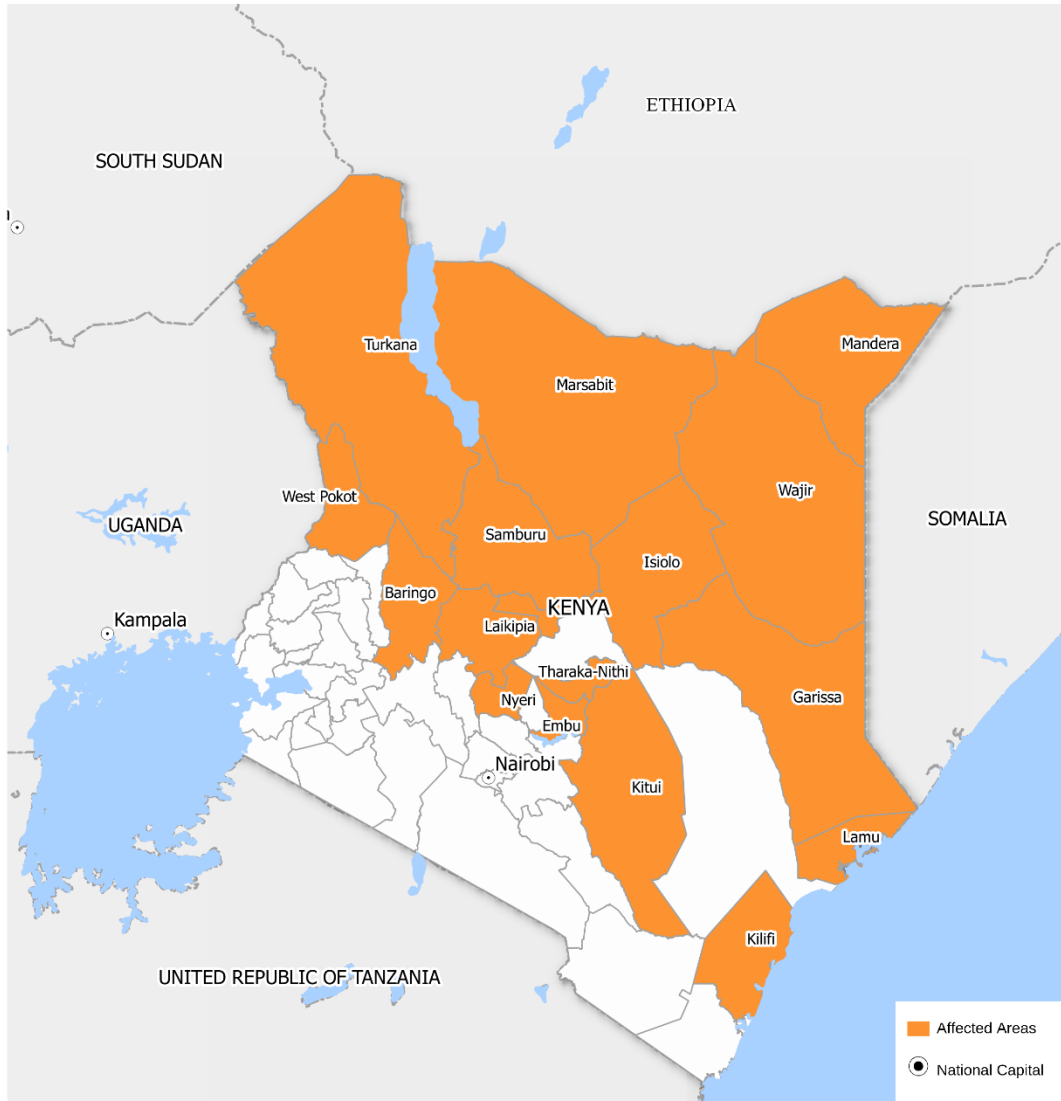


Promote **social inclusion**
and a culture of
non-violence and **peace.**



Kenya, Drought: Emergency Appeal

29 March 2019 • DR-2019-000024-KEN



The maps used do not imply the expression of any opinion on the part of the International Federation of the Red Cross And Red Crescent Societies or National Societies concerning the legal status of a territory or of its authorities.
 Map data sources: OCHA, GADM, IFRC.