Evacuation of the affected families in Garissa County

Appeal: MDRKE058  
Country: Kenya  
Hazard: Flood  
Type of DREF: Response

Crisis Category: Orange
Event Onset: Slow
DREF Allocation: CHF 749,939

Glide Number: -
People Affected: 281,880 people
People Targeted: 150,000 people

Operation Start Date: 2023-11-11
Operation Timeframe: 4 months
Operation End Date: 2024-03-31
DREF Published: 2023-11-15

Targeted Areas: Tana River, Garissa, Wajir, Mandera, Marsabit, Isiolo, Meru
What happened, where and when?

Kenya has been experiencing enhanced rains since September, with alarming level rainfall as a result of El Nino conditions and a positive Indian Ocean Dipole (IOD) which are currently present in Pacific Ocean and Indian Ocean respectively. The Kenya Meteorological Department (KMD) indicate the rains are expected to peak in November but may continue into January 2024.

From beginning of November, the first regions to experience significant and widespread floods were the Northeastern, eastern followed by the Coastal. The riverine and flash floods have so far caused more damage and displacement. As the floods materialized KRCs started their response actions immediately. But other regions are now also reporting flood events. KRCs carried out an aerial survey on 7 Nov and confirmed that several areas remained inaccessible due to the floods and damaged roads, particularly in Mandera County. The extend of floods spread to 8 regions, 22 counties with most affected areas being the Northeastern of the country.

While the impact of the rains has been building since early October, significant impact to which the KRC mobilized a national response started from 3 Nov with heavy rains, flash floods, and increasing river levels that have caused fatalities, displacement of thousands of people, damage of infrastructure, loss of livestock and property, and restricted access to roads in various regions of the country. The rains have washed away homes and rendered roads impassable leaving thousands homeless. The loss of lives, extensive damage to property, and disruptions in infrastructure underscore the urgency of the situation.
**Scope and Scale**

Areas of particular concern include Mandera, Garissa, Wajir, and Tana River, in northern Kenya, where communities have long displayed resilience in the face of water scarcity and hunger during droughts. Residents now grapple with the challenges posed by rising floodwaters. One of the hardest-hit areas is El Wak in Mandera, where many homes lie submerged. KRCS carried out an aerial evaluation of the situation on 7 November and the videos are available (https://x.com/jagan_chapagain/status/1721845637228933280?s=20). Several areas in the North East are cut off and remain inaccessible.

1) Impact up to 7 November:
8 regions and 22 counties are now reporting flood events with highest impact since end of October. Total number of households affected 56,376 (281,880) of which 24,301 households (121,505ppl) are displaced. It’s reported that there are 33 fatalities and 7 are missing. On average a minimum of 70% of affected families are displaced with houses flooded, destroyed or partially impacted. For the displaced, some camps have started to be set up. 7 camps have already been reported. Overall impact reported by the Emergency Operations Center by 7 November are as above. All figures below are expected to increase as more information becomes available and more floods forecasted. As of 07.11.2023, floods scale was as below:
- West Kenya number of households affected 353 (1,756), of which 254 households are displaced.
- Coast total number of households affected 2,914 (14,570) of which 711 households are displaced.
- Northeastern (Wajir, Garissa and Mandera) total households affected 47,333 (236,665ppl) of which 20,980 households are displaced.
- Upper Eastern total number of households affected 3,517 (17,585ppl) of which 568 households are displaced.
- Lower Eastern number of households affected 144 (720) of which 7 households are displaced.
- Central number of households affected 1,632 (8,160) of which 1,627 households are displaced.
- North Rift number of households affected 475 (2,380) of which 154 households are displaced.
- South Rift number of households affected 7 (35) of which none displaced.
- Aerial view during the rapid evaluation have also identified that floods affected also El Wak of Mandira country with the population of 7,500 households was totally submerged.

2) Vulnerabilities and other damages:
- Livestock, agriculture, infrastructure: 7,806 livestock deaths, 566 acreages destroyed, 26 boreholes flooded, 149 latrines destroyed, 15 items of infrastructure damaged or destroyed. Local health facilities, schools and other public offices have been submerged in water in most of the affected counties.
- In Northern Kenya, where communities have long displayed resilience in the face of water scarcity and hunger during droughts, residents now grapple with the challenges posed by rising floodwaters. Crops in large tracts of land have been submerged by the floods posing serious food shortages in the future. There is also seeing flooding in urban areas particularly informal settlements where there is uncontrolled building and lack of infrastructure to relieve flooding.

3) Forecast for the coming days/week:
The short-range 7-day forecast (https://meteo.go.ke/forecast/7-days-forecast) indicates continued rains in the Northeast and Central highlands. This will exacerbate the existing floods in Northeastern and Upper Eastern regions and risk of overflow of
water rivers. The rains in Central highlands will bring floods to Tana River basin and coastal areas. The monthly forecast indicates above average rainfall for the season with high probability of above normal rains to continue in the next days, reaching 100 to 120 mm rainfall in addition to a focus on Northeastern and Central Regions for which the probability of above rainfall was 85%. Based on the Tana River levels KRCS has issued a warning regarding the critical water levels in the Tana River. KRCS activated the EAP for Tana River early actions and is monitoring the information, making sure that they are able to limit the impact of floods and escalate urgently to the response.

On Wednesday, November 8, the Red Cross cautioned that the counties of Garissa, Tana River, and Kilifi to be facing an imminent risk of flooding, which poses a significant threat to the lives and livelihoods of the local population. Hence, KRCS is also responding to the affected population taking into account that the numbers are significantly rising as most parts of the country continue receiving above normal rains. KRCS has mobilized its teams on the ground in response to this unfolding humanitarian crisis. They are tirelessly working to meet the immediate needs of the affected population, including the provision of shelter, essential non-food items, and vital water, sanitation, and hygiene services. (https://x.com/IFRCAfrica/status/1722434663862456743?s=20)

### Previous Operations

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has a similar event affected the same area(s) in the last 3 years?</td>
<td>Yes</td>
</tr>
<tr>
<td>Did it affect the same population group?</td>
<td>No</td>
</tr>
<tr>
<td>Did the National Society respond?</td>
<td>Yes</td>
</tr>
<tr>
<td>Did the National Society request funding form DREF for that event(s)?</td>
<td>Yes</td>
</tr>
<tr>
<td>If yes, please specify which operation</td>
<td>MDRKE056</td>
</tr>
</tbody>
</table>

**If you have answered yes to all questions above, justify why the use of DREF for a recurrent event, or how this event should not be considered recurrent:**

- 

### Lessons learned:

Previous operations have contributed to numerous lessons as listed below. There is need to:

- Review the EAP thresholds and triggers so as to accommodate changing climatic trends in disaster response.
- Integrate both in-kind and Cash assistance during the response to support affected communities.
- Enhance continuous early warning and early action activities to communities such as supporting them with early maturing seeds and drought resistant seed varieties in-order to maximize on the rains during the bi-annual rain seasons. Need to have early action in relation to epidemics and the climatic outlook.
- Support communities with more long-lasting livelihood activities which will support them in diversifying their livelihood activities and which are more sustainable.
- Check on the use of cash for shelter as a modality during flood response to support communities who are displaced.

### Current National Society Actions

**Health**

So far KRCS has received support from Norwegian Red Cross to procure two IEHK kits (Interagency Emergency Health Kits). These will be used for emergency health needs and include both pharmaceutical and non-pharmaceuticals which will be able to cover health services to 2,000 patients for 3 months. UNFPA has also supported the response with RH-Reproductive health kits to be used by pregnant women during emergencies.

Health promotion activities are under way - mostly around supporting access to
essential health services and disease prevention targeting displaced populations. Volunteers are also providing MHPSS to the affected and also supported with First Aid to those injured. KCRCS will also deploy 3 health surge teams to offer curative health services to populations who have been cut off from accessing health facilities. KCRCS and MoH volunteers will be trained on disease prevention and risk communication as well as vector control interventions under the supervision of trained MoH supervisors.

As part of contingency plan KCRCS has been prepositioning of health kits to projected high impact areas.

KCRCS plans to offer curative health services to 10,000 people for a period of 3 months. Continuous psycho-social support will be offered to communities affected by rainfall.

Through the SRH / GBV project, the plan is to address the immediate and long-term needs of the affected population in relation to sexual reproductive health and gender-based violence (GBV) prevention and response services. The Kenya Red Cross Society (KCRCS) Health SRH - GBV Project will coordinate with relevant stakeholders (County health management teams, PNS, and UNFPA) to establish partnerships to ensure a comprehensive and cohesive response.

To begin, a rapid assessment will be conducted to determine the specific sexual reproductive health and GBV needs of the affected population. This assessment will also identify existing health facilities, including reproductive health clinics, in the affected areas to prioritize interventions and address any gaps.

Reproductive health services, such as antenatal and postnatal care, family planning services, and emergency obstetric care, will be made available in accessible and safe locations. Healthcare facilities supported by the SRH/GBV project will be equipped with necessary medical supplies and equipment to meet the reproductive health needs of the affected population. Additionally, reproductive health awareness campaigns will be conducted to educate communities on the importance of seeking appropriate care and services.

To prevent and address GBV, safe spaces will be established where survivors can access confidential and appropriate support services. This will be done in collaboration with the various GBV stakeholders within the affected areas. Healthcare providers and KCRCS volunteers will receive refresher trainings on GBV prevention, identification, and response. Referral pathways will be strengthened to ensure survivors receive comprehensive care and support from specialized service providers through the SRH/GBV project funded by the Finnish Red cross. Community sensitization programs will also be conducted to promote gender equality, women's empowerment, and the prevention of GBV.

Psychosocial support services, including counseling and mental health support, will be provided to survivors of GBV and affected individuals. Healthcare providers and KCRCS volunteers will have refresher trainings to provide psychosocial support to those in need.

Information, education, and communication (IEC) materials will be developed and distributed to affected populations, highlighting sexual reproductive health and GBV prevention and response. Various communication channels, such as radio, mobile clinics, and community meetings, will be utilized to disseminate this information effectively.

Monitoring and evaluation will be crucial to track the implementation of sexual reproductive health and GBV prevention and response activities. Regular
assessments and surveys will be conducted to measure the effectiveness of interventions, identify gaps, and inform programmatic adjustments.

Capacity building efforts will be undertaken to train healthcare providers, KRCs volunteers, and local organizations on sexual reproductive health and GBV prevention and response. This will ensure that the affected population receives appropriate care and support from knowledgeable and skilled individuals. Advocacy for the integration of these services in national and regional policies and frameworks will be pursued. Collaborations with relevant stakeholders will aim to strengthen policies and laws that protect the rights of GBV survivors and promote gender equality.

To support the implementation of sexual reproductive health and GBV prevention and response activities, resources will be mobilized through partnerships with MOH, donors, NGOs, and UN agencies. Internal resource management systems will be strengthened to ensure efficient utilization of available resources.

**Activation Of Contingency Plans**

KRCs have activated their seasonal floods response plan -Stocks are being replenished to the projected most affected areas. KRCs is a member of the national and county health sector coordination mechanism which has prepared national and county contingency plans for the sector. The health sector contingency plan prioritizes five key areas viz: enhance (1) Coordination of all health sector partners in the response, ensure (2) Continuity of access to essential health services, (3) Disease Surveillance and Response to outbreaks, (4) Advocacy, Social Mobilization and risk communication and community engagement (ACSM/RCCE), and finally (5) Logistics (Health commodities).

**Resource Mobilization**

KRCs has initiated support request with various domestic and bi- lateral partner national societies.

**National Society Readiness**

KRCs has a floods EAP approved in 2022 with ongoing activities on preparedness/readiness of the NS implemented currently in six counties of Tan River, Garissa, Kisumu, Busia, Homabay and Migori. The EAP priority actions will continue to focus on these counties, also part of the at risk counties. Both this DREF and EAP include the early actions but under this intervention it focused on early warning messages and support to the evacuation.

Through which KRCs have been supporting communities at risk to prepare for flood events. The IFRC Disaster Response Emergency Fund (DREF) has allocated CHF 192,698 for the implementation anticipatory actions to reduce and mitigate the impact of riverine floods in Kenya. This Early Action Protocol includes an allocation of CHF 139,580 to preposition stock and undertake annual readiness activities in order to implement early actions, if and when the trigger is reached. The early actions to be conducted have been pre agreed with the National Society and are described in the Early Action Protocol summary:


The EAPs trigger was met on 7th Nov due to river gauge level in Tana River exceeding the trigger and CHF 192,698 has been allocated to implementation anticipatory actions to reduce and mitigate the impact of riverine floods in the Tana River Basin. https://adore.ifrc.org/Download.aspx?FileId=758879

This will reduce the risk of floods impact for up to 150,000 people covering the following:

- Shelter: Targeting and registration; distribution of shelter NFIs
- Livelihoods and basic needs: Conduct rapid assessments to establish feasibility of CVA.
- Health: Activation of mobile health teams; provide psychosocial support to
<table>
<thead>
<tr>
<th>Water, Sanitation And Hygiene</th>
<th>Hygiene promotion activities are under way - mostly around disease prevention and particularly for those displaced. Provision of water treatment is underway in the displacement centers.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coordination</td>
<td>KRCS made a presentation to KHPT on 9 Nov and updated the Kenya Coordination platform on the current situation and response. Coordination meetings are being held with, county governments and relevant local actors for the floods first response impact and response. KRCS is coordinating with the in-country shelter cluster, led by the IOM and the government. In the health sector, KRCS is a member of the national health sector task force on El-Nino preparedness and response that constitute health and other government departments leads, KRCS, UN agencies (WHO, UNICEF and IOM) and other health partners. This is the coordination body that developed the national contingency plan and is also responsible to ensure that the county health teams as well as partners adhere to it.</td>
</tr>
<tr>
<td>Assessment</td>
<td>KRCS is currently conducting an assessment of those affected in North Eastern, Central, and West Kenya. KRCS has been conducting assessment to determine the impact of the affected population. This has been done in coordination with other stakeholders using the Kenya Inter-Agency Rapid Assessment tool. Aerial assessments have also been conducted in areas that have been cut-off following above average rainfall in North Eastern Region. Surveillance and monitoring of emerging flooding events is ongoing.</td>
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</table>
| Risk Reduction, Climate Adaptation And Recovery | KRCS has trained a total of 660 Red Cross action teams, Community Based Disaster Response teams, and CHVs. The pieces of training were integrated and done in preparedness for the predicted OND short rains.  

3 Boats have been deployed alongside an Aqua-rescue surge team to support evacuation of marooned communities in parts of Tana Delta, parts of Garissa and Lamu.  

Early Warning TERA Messages to communities living in 20 flood-high risk counties were sent. Continuous risk communication to population in the high-risk areas through mainstream medias, use of public address systems and community health volunteers are currently ongoing in the high-risk areas. KRCS has been conducting risk communication through radio spots, TV spots, and public addresses through community Barazas.  

KRCS has so far distributed two different types of early maturing seeds to 9,000HHs in Laikipia, Kitui, Makueni, Machakos, Kwale and Kilifi counties.  

KRCS have triggered Early Action Protocols for the Tana River Basin. This was based...
on KRCS monitoring forecast and river gauges. By November 4th, water levels at Garissa had surpassed 5-meter mark, bordering the highest mark of the river gauge while the levels at the next station (Hola) had also reached an alarming level. Additionally, rainfall forecast for the current week indicates Kenyan central highlands (source region of Tana) are expected to continue receiving heavy rainfall. The flood wave is expected to begin overtopping riverbanks along the lower Tana as the rains continue to be experienced over Central Highland areas of Kenya.

<table>
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<tr>
<th>Livelihoods And Basic Needs</th>
<th>KRCS have so far supported 555 families with food packs.</th>
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<tbody>
<tr>
<td>Shelter, Housing And Settlements</td>
<td>KRCS has supported camps for those displaced and marooned with food and Non-Food Items. KRCS have identified safe evacuation locations/spaces and started emergency shelter distributions for displaced populations using their disaster preparedness stocks. So far 1,382 households have been supported in North Eastern Region.</td>
</tr>
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</table>

### IFRC Network Actions Related To The Current Event

**Secretariat**

The International Federation of Red Cross and Red Crescent Societies (IFRC) has an in-country presence in Kenya, through its Africa Regional Office and the Nairobi Cluster Delegation, which are based in Nairobi. The IFRC Nairobi Cluster Delegation has been providing close technical support and guidance to the KRCS on the development of a request for a DREF allocation to support the ongoing efforts to aid those affected by the floods.

**Participating National Societies**

KRCS has updated ICRC on the unfolding situation through various coordination forums with various PNSs including Danish Red Cross, Finnish Red Cross, American Red Cross, Italian Red Cross and the Norwegian Red Cross. KRCS has been issuing updates to its partners on the unfolding situation in the country. There is no ongoing support from any of the in country PNS so far, however, KRCS is updating the in country PNS on emerging gaps.

### ICRC Actions Related To The Current Event

KRCS has updated ICRC on the unfolding situation through various coordination forums.

### Other Actors Actions Related To The Current Event

**Government has requested international assistance**

No

**National authorities**

Kenya Meteorological Department is providing daily, weekly and monthly forecasts to enhance early warning and response. County governments are responding at a local level.

GoK is working under the framework of the El Nino Contingency Plan 2023-2027 and El Nino Preparedness and Response Plan 2023 have been mobilized. There have been a series of meetings during September with the GoK and partners identifying responsible entities by cluster.

As part of the GoK response plan, the country is divided into eight coordination hubs
Kenya Red Cross has been coordinating its response activities with other actors including the National and County government line ministries and agencies as well as UN agencies and other NGOs. KRCS is designated operational in humanitarian work in the country especially managing displacement camps include camp set up. The other partners come with support and come with sectorial contribution based on their expertise and mandates. The national and county government have taken a lead role in coordinating the response planning and implementation. Regular coordination meetings on shelter cluster, etc are being conducted.

Kenya Red Cross Partner Team (KHPT) are supporting on coordination in readiness for the response. The government lead ministries are coordinating with counterparts under the IASC cluster system.

OCHA will support the roll out of a Kenya Inter-Agency Rapid Assessment tool.

**Needs (Gaps) Identified**

**Shelter Housing And Settlements**

KRCS report from joint assessments with county government and other stakeholders show that up to 25,301 households have been displaced. Affected population have lost houses and been displaced. They require immediate shelter and essential household items. The typology of houses is mixed from rural and informal settlement light weight to more established peri/urban housing forms.

**Protection, Gender And Inclusion**

Families have been displaced to evacuation centers outside of their normal homes and community settings. With the scope of the exposed communities in identified areas and further at-risk sub counties, the consideration of vulnerable groups including infants, older people, homeless and people with chronic health conditions is important. A particular interest for the early actions will be done to prevent them from further harm.

**Water, Sanitation And Hygiene**

The health risks are increasing due to lack of clean water and displacement. These include water borne disease such as acute watery diarrhea and cholera. There is an ongoing cholera outbreak response that overlaps with some of these areas. Road / infrastructure damage has led to reduced access to safe drinking water. For instance, KRCS WASH assessment conducted from February to May 2023 in various counties show that several counties are part of the at-risk areas. In general, the report revealed that there is:

- Poor water treatment practices and challenges to accessing safe water.
- Low latrine coverage across all the sub-counties and villages with reported cases of observed open defecation being a rampant practice mostly in Wajir town. Latrine coverage is at 43.6% in the county of Wajir.
- In Kisumu County, water quality sampling and analysis were done by Ministry of health in Kilo One Community Unit and Kachok areas. Water from boreholes and wells in these areas was reported to contain E. coli and coliforms above normal ranges and therefore not safe for human consumption.
- In Tana River, WASH assessment was conducted between 2nd -4th May 2023 in Madogo Bura Baraka, Bura Karatasi, Adele, Samira, Boji, Hatata, Kamukuji, Mororo Centre and California with support from KRCS, MOH and WRMA staffs. It is worth noting that despite Tana River having controlled the outbreak, there is a high risk of outbreak importation from the active outbreak in Garissa and Nairobi coupled with the poor access to adequate & safe water as shown by the assessment findings above.
Health

The health risks are increasing due to limited access to safe drinking water and increased breeding and exposure to vectors that transmit vector borne diseases. Kenya has in the recent months reported cholera and one county in the floods affected areas (Garissa) is reporting cholera as at the time of writing this application. Measles outbreak is also active in seven out of the 47 counties (Lamu, Turkana, Isiolo, Embu, Marsabit, Mandera and Mombasa). Surveillance is being increased and assessments are still underway to confirm the impact of the floods.

Road/infrastructure damage has led to reduced access to health facilities. Assessments are still underway to confirm the numbers affected and the consequential reduced service.

Following the initial multi agency rapid assessments conducted in the affected counties, KRCS jointly with MoH and other partners will conduct detailed assessment to advise specific sites interventions.

The ongoing floods in Kenya have resulted in the displacement of thousands of people and have caused significant damage to infrastructure and property. This includes roads to and from health facilities, and households. In this challenging context, there are urgent needs and gaps in terms of sexual and reproductive health (SRH) and gender-based violence (GBV) prevention and response.

One of the key needs is to provide access to SRH services for the affected population. The floods have disrupted health facilities and made it difficult for people to access health services. In particular, women, girls and children may face challenges accessing reproductive health and immunization services, including contraception, maternal health care, emergency obstetric care and vaccination/ Immunization services offered in child welfare clinics. There is a need to scale up mobile health services through integrated medical outreaches that can reach people in remote and hard-to-reach flood-affected areas, as well as to ensure the availability of essential medicines and supplies.

Another key need is to prevent and respond to GBV in the flood-affected areas. Evidence from previous disasters show that GBV rates tend to increase during and after disasters, as a result of increased stress, economic vulnerability, and disrupted social norms. There is a need to strengthen GBV prevention and response mechanisms, including increasing access to safe spaces for women and girls, providing psychosocial support, and ensuring that survivors of GBV have access to medical care and legal support.

There is also a need to address the psychosocial needs of the flood-affected population, including children and youth. Displacement, loss of property and loved ones, and disruption of daily routines can lead to significant psychological distress and trauma. There is a need to scale up mental health and psychosocial support services, including through outreach activities, community-based interventions, and provision of individual and group counseling.

Finally, there is a need to strengthen coordination among humanitarian actors to ensure a coherent and effective response to the floods. The Kenya Red Cross Society and other organizations have been working to provide relief and assistance to the affected population. However, there is a need to ensure that all actors are working together and that interventions are tailored to meet the specific needs of women, children, and other vulnerable groups. This requires strong leadership, effective communication, and a commitment to working in a participatory and gender-sensitive manner.

Livelihoods And Basic Needs

The affected population are in need of immediate food assistance and cash support. KRCS report from a joint assessment with county governments show that up to 1,768 livestock have been lost and stored foodstuff has been washed away. In this drought situation, the reports on crop loss are limited. Markets have been disrupted due to road / infrastructure damage.

Additionally, due to the prolonged drought situation that was ravaging the horn of Africa, the affected communities were food insecure.
Any identified gaps/limitations in the assessment

- Road / infrastructure damage has led to reduced access to health facilities, increasing the exposure to protection risks.
- There is an ongoing cholera outbreak response that overlaps with some of these areas.
- Lack of agencies responding.
- Continuous flooding event likely to happen over the months while some areas have limited support or early actions.

Some of the specific identified gaps or limitations related to sexual and reproductive health (SRH) and gender-based violence (GBV) prevention and response in the flood-affected areas include:

1. Lack of data on SRH needs: Understanding the reproductive health needs of women, including access to menstrual hygiene products, contraceptives, and maternal health services, is crucial in an emergency situation. However, without data on these needs, it is challenging to effectively implement SRH interventions.

2. Insufficient focus on GBV prevention and response: Displacement, overcrowded living conditions in temporary shelters, and disrupted social support systems can exacerbate the risk of GBV. It is essential to have GBV prevention and response mechanisms integrated into the emergency response efforts to mitigate this risk and support survivors.

3. Limited coordination and partnerships: Collaboration with relevant stakeholders, including SRH and GBV service providers, is crucial to ensure a comprehensive and coordinated response. This collaboration can help ensure that the specific needs of women and girls are addressed, and that necessary services are accessible in the flood-affected areas.

4. Inadequate access to SRH and GBV services: Several areas remain inaccessible due to floods and road damage. This restricted access can severely limit the provision of SRH and GBV services in these areas. It is crucial to ensure that healthcare facilities, including those providing SRH services and support to GBV survivors, remain functional and accessible during emergencies through integrated medical outreaches.

5. Limited funding for SRH and GBV interventions: Adequate funding is necessary to support the implementation of comprehensive SRH and GBV programs in emergencies. Without sufficient resources, it may be challenging to prioritize these interventions and ensure their effective implementation.

Addressing these gaps and limitations will be crucial to ensure a comprehensive and gender-sensitive response to flood-affected communities in Kenya. Efforts should be made to collect data on SRH needs, integrate GBV prevention and response mechanisms, strengthen coordination and partnerships, improve access to services, and secure adequate funding for SRH and GBV interventions in the flood response efforts.

Operational Strategy

Overall objective of the operation

This DREF allocation aims to provide immediate support for 3 months to at least 30,000 most vulnerable households (approximately 150,000 people) affected by floods leading to displacements in the most affected and vulnerable counties of Mandera, Wajir, Garissa, Tana River, Samburu, Marsabit and Isiolo. Based on current reported impact and forecasts, this intervention provides resources to enhance and complement the KRCs actions that started from early warning phase with Health and floods risk reduction for over 150,000 people while focusing the response to a direct target of 6,000 HH (30,000 people).

As more information becomes available and the rains increase, consequential floods may increase and subsequently the expected changes.

Operation strategy rationale

To address the immediate needs of the target population this DREF will provide an integrated response and seek further support to enhance the prevention at community level given the coming weeks' forecasts. Actions already underway are reported in "National Society Action" and are summarized below:

• Early warning: Early actions will be incorporated in terms of early warning, immediate search, rescue and support to the early
evacuation. It will also have post impact evacuation.
• Shelter - emergency shelter and essential household items.
• Livelihoods and basic needs - in-kind food and or unconditional cash grants.
• Health - first aid, psychosocial first aid/support, health promotion deployment of health kits and surge teams.
• WASH - hygiene promotion, water treatment, sanitation for displaced.
• PGi and CEA cross cutting across all sectors. Particular attention toward displaced households and families with vulnerable groups. The level of engagement, harmonization and involvement of communities play a key role on the intended early actions, ensuring the understanding, acceptance, contribution of the community members to this plan.
Some of the activities listed above are already ongoing and will be covered by replenishment, such as, the emergency shelter and NFI package.
This DREF will work in coordination with the EAPs that have been activated in Tana River Basin such that there is no overlap or duplication of activities. Where there is a need for response activities in the Tana River Basin there will be clear disaggregation between the Anticipatory Actions and Response Actions.

Targeting Strategy

Who will be targeted through this operation?

At least 30,000 households (150,000 people), affected by floods leading to displacements will be targeted by sector as follows:
WASH and Health coverage will be 30,000 households (150,000 people)
Shelter - 6,000 households those whose house are submerged (damaged / destroyed / displaced).
Cash grants - 3,000 households for those evacuated and markets are functional.
Basic needs / food packs - 3,500 households or those evacuated, limited access and markets not fully functional.
Targeting strategy includes supporting those displaced to camps.
Current priority counties are Mandera, Garissa, Wajir, Isiolo, Marsabit, Isiolo, Samburu and Meru. But these are expected to change as more information becomes available.

The counties are targeted in coordination with local governments to identify most high risk and affected sub counties, communities, and households.

Explain the selection criteria for the targeted population

Identification/selection will be based on the level of vulnerability, including displaced households due to:
Level of destruction and damage to homes,
Female headed households,
Households with pregnant and lactating women, children under 5 years old,
Households with disabled,
Households with elderly.

Total Targeted Population

<table>
<thead>
<tr>
<th></th>
<th>Women</th>
<th>Rural</th>
<th>70%</th>
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<tbody>
<tr>
<td>Girls (under 18)</td>
<td>-</td>
<td>Urban</td>
<td>30%</td>
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<tr>
<td>Men</td>
<td>72,000</td>
<td>People with disabilities (estimated)</td>
<td>-</td>
</tr>
<tr>
<td>Boys (under 18)</td>
<td>-</td>
<td></td>
<td></td>
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<tr>
<td>Total targeted population</td>
<td>150,000</td>
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Risk and Security Considerations

Please indicate about potential operation risk for this operations and mitigation actions

<table>
<thead>
<tr>
<th>Risk</th>
<th>Mitigation action</th>
</tr>
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<tbody>
<tr>
<td>-These being some of the counties with resource-based conflict and</td>
<td>-Ensure that the KRC teams supporting the response in the counties are well trained on Safer access to enhance their access during interventions.</td>
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<tr>
<td>borders with neighboring countries have a high risk of insecurity.</td>
<td></td>
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<tr>
<td>-The political situation in the country escalating to the targeted</td>
<td>KRC is known to be neutral during its response across the country, there for a lot of dissemination on KRC</td>
</tr>
<tr>
<td>communities</td>
<td></td>
</tr>
<tr>
<td>Peak rains still be expected in November. Heavy rains and flooding</td>
<td>KRC will continue its response as outlined in this DREF plan of action. KRC will continue monitoring the situation and stand ready to scale-up</td>
</tr>
<tr>
<td>will continue as projected by the KMD. Water levels in Tana and</td>
<td></td>
</tr>
<tr>
<td>Nyando rivers will rise and cause further displacements.</td>
<td></td>
</tr>
<tr>
<td>displacements of people.</td>
<td></td>
</tr>
<tr>
<td>Cholera outbreaks expand to the counties being affected by flood</td>
<td>KRC has put measures to ensure continued sensitization of the communities on the waterborne disease. Subsequently, there is an ongoing response in counties affected by Cholera</td>
</tr>
</tbody>
</table>

Please indicate any security and safety concerns for this operation

-These being some of the counties with resource-based conflict and borders with neighboring countries have a high risk of insecurity. This may cause security risk to KRC staff and volunteers as they respond. KRC will ensure engagement of local staff and volunteers as applicable and continue with security surveillance and using opportunities provided by existing public goodwill and its acceptability approach to ensure successful implantation of the proposed activities. Security briefings will be continuously provided to the staff and volunteers to ensure continued vigilance. KRC Security Unit conducts continuous monitoring of the local security situation and advises the response teams on mitigation measures in case of heightened security situation.

Planned Intervention

Secretariat Services

Budget: CHF 5,027
Targeted Persons: 6

Indicators

<table>
<thead>
<tr>
<th>Title</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td># of field monitoring missions by National and county KRC/IFRC (1</td>
<td>6</td>
</tr>
<tr>
<td>mission per county per month)</td>
<td></td>
</tr>
<tr>
<td># of coordination meetings</td>
<td>3</td>
</tr>
</tbody>
</table>

Priority Actions

Continuously support monitoring and participate in national and county level coordination meetings to provide technical support as required/requested.
Field missions by IFRC to each county supported. IFRC missions for coordination and technical support from operations, health, PMER and finance.

**Multi-purpose Cash**

**Budget:** CHF 65,779  
**Targeted Persons:** 15,000

**Indicators**

<table>
<thead>
<tr>
<th>Title</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td># of HHs that receive cash</td>
<td>3,000</td>
</tr>
<tr>
<td># of PDMs conducted</td>
<td>300</td>
</tr>
</tbody>
</table>

**Priority Actions**

Train and mobilize volunteers.  
Activation of the FSP agreement.  
Needs and Market Assessment, registration, and verification of beneficiaries.  
Community engagement and sensitization on the use of cash support received.  
Distribution of unrestricted cash grants - 3,000 households - one off cash grant KES3,000.  
Post-Distribution Monitoring and market monitoring.

**Shelter Housing And Settlements**

**Budget:** CHF 349,932  
**Targeted Persons:** 30,000

**Indicators**

<table>
<thead>
<tr>
<th>Title</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td># of people reached with emergency shelter</td>
<td>30,000</td>
</tr>
<tr>
<td># of people reached with essential households items</td>
<td>30,000</td>
</tr>
<tr>
<td># of volunteers trained and mobilized on emergency shelter construction</td>
<td>200</td>
</tr>
</tbody>
</table>

**Priority Actions**

Assessments  
Beneficiary identification, registration and distribution.  
Procurement of emergency shelter and essential household items tarpaulins, blankets, sleeping mats, kitchen sets - 6,000 households  
Primary and secondary transportation, handling and distribution of NFIs, plus storage.  
Training and mobilization of volunteers on emergency shelter construction.
Livelihoods And Basic Needs

Budget: CHF 102,359
Targeted Persons: 16,500

Indicators

<table>
<thead>
<tr>
<th>Title</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td># of people reached with food rations</td>
<td>16,500</td>
</tr>
</tbody>
</table>

Priority Actions

Beneficiary identification and registration.
Procurement and distribution of food rations - 3,500 households.
Food distribution costs.

Health

Budget: CHF 101,375
Targeted Persons: 150,000

Indicators

<table>
<thead>
<tr>
<th>Title</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td># of people reached with health services / hygiene promotion</td>
<td>150,000</td>
</tr>
<tr>
<td># households provided with mosquito nets</td>
<td>6,000</td>
</tr>
<tr>
<td># of health kits - male and female</td>
<td>500</td>
</tr>
<tr>
<td># of individuals provided with emergency SRH services, including reproductive health consultations, contraceptive supplies, clean delivery kits, and menstrual hygiene products.</td>
<td>100,000</td>
</tr>
<tr>
<td># of individuals provided with GBV prevention information, including sessions conducted and materials distributed.</td>
<td>30,000</td>
</tr>
<tr>
<td># of survivors of GBV identified and referred to specialized services, including safe spaces, counseling, and medico-legal support.</td>
<td>30,000</td>
</tr>
<tr>
<td># of healthcare providers trained on SRH and GBV prevention, response, and referral.</td>
<td>300</td>
</tr>
<tr>
<td>Percentage of targeted population reached with SRH and GBV awareness campaigns.</td>
<td>80</td>
</tr>
<tr>
<td>Existence and effectiveness of coordination mechanisms with relevant stakeholders and service providers</td>
<td>-</td>
</tr>
</tbody>
</table>
Priority Actions

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.

Conduct active case finding and refer all cases of acute malnutrition to health facilities for appropriate management (10 CHVs in each of the 4 counties*5days).

Communities are supported by NS to effectively detect and respond to infectious disease outbreak.

Sensitization of responding volunteers including CHVs & RCATs (40 pax*4counties) on Epidemic Control & Prevention for epidemics in readiness for deployment.

Essential medicines and supplies (Antibiotics and Chronic ailment conditions).

Non-Pharmaceutical Supplies:

Support volunteers (30*4) conduct Health education and hygiene promotion activities to prevent and control spread of epidemics.

Deployment of medical surge teams for case management of confirmed epidemics for 10 days.

Ensure that referral systems are in place to provide psychosocial support to children, in collaboration with PSS specialists.

Procurement Mosquito Nets for 6,000 households.

Procurement of dignity kits - 500 kits for both male and female.

Preposition of PPE (Gumboots, Gloves, Helmets, etc).

Medical evacuation.

Training of vector control teams:

Allowances for the vector control teams.

Allowance MoH supervisors for the vector control teams.

Activities for response to the flood situation in the context of SRH and GBV prevention and response:

1. Conduct rapid SRH and GBV assessments: Carry out assessments to identify the specific SRH and GBV needs and risks of the affected population, including women and girls. Assessments will include access to basic healthcare services, availability of contraceptives and menstrual hygiene products, and prevalence of GBV incidents.

2. Provide emergency SRH services and supplies: Set up mobile clinics or integrated medical outreaches and enhance the capacity of existing health facilities in flood-affected areas to provide emergency SRH services. Ensure availability of essential supplies like contraceptives, clean delivery kits, and menstrual hygiene products (Dignity kits).

3. Strengthen GBV prevention and response services: Establish safe spaces for women and girls, providing psychosocial support, information, and referrals to GBV specialized services. Conduct awareness campaigns on GBV prevention and establish reporting mechanisms to ensure survivors can access support services.

4. Train healthcare providers on SRH and GBV: Conduct training sessions for healthcare providers on SRH and GBV prevention, response, and referral. Build their capacity to identify signs of GBV and provide appropriate care and support to survivors.

5. Ensure privacy and security in SRH and GBV services: Implement measures to ensure privacy and security in SRH and GBV service delivery, such as setting up separate spaces for consultations, providing adequate lighting and confidentiality measures, and training staff on maintaining privacy and confidentiality.

6. Disseminate SRH and GBV information: Conduct community awareness campaigns, using various communication channels, to ensure that flood-affected communities have accurate information on SRH and GBV prevention, available services, and how to access them.

7. Strengthen coordination and collaboration: Establish coordination mechanisms with relevant stakeholders, including government agencies, local organizations, and international partners, to ensure a comprehensive and coordinated response. Collaborate with SRH and GBV service providers to share information, resources, and expertise.

Water, Sanitation And Hygiene

Budget: CHF 37,955

Targeted Persons: 150,000
**Indicators**

<table>
<thead>
<tr>
<th>Title</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td># of people with access to safe drinking water</td>
<td>30,000</td>
</tr>
<tr>
<td># of people reached with hygiene promotion</td>
<td>150,000</td>
</tr>
<tr>
<td># of households reached with WASH NFIs</td>
<td>6,000</td>
</tr>
<tr>
<td># wells disinfected</td>
<td>16</td>
</tr>
<tr>
<td># emergency latrines supported</td>
<td>80</td>
</tr>
</tbody>
</table>

**Priority Actions**

Assessment of Water points.
Disinfecting of contaminated wells in 4 counties.
Routine water quality testing at source and at household level.
Procurement of hygiene items - bar soaps.
Procurement of water treatment chemicals PUR.
Procurement of Jerricans.
Procurement of toilet slabs.
Phaster training.
Body bags issued.

**Protection, Gender And Inclusion**

**Budget:** CHF 5,654
**Targeted Persons:** 30,000

**Indicators**

<table>
<thead>
<tr>
<th>Title</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of people benefiting safe and equitable delivery of basic services taking into account their needs based on gender</td>
<td>100</td>
</tr>
<tr>
<td># of staff and volunteers briefed on PGI minimum requirements</td>
<td>60</td>
</tr>
</tbody>
</table>

**Priority Actions**

Conduct sensitization on SGBV.
Conduct debriefing sessions for the response teams.
Mapping, establishing and support of GBV referral pathway.
Basic training of staff and Volunteers (4 per county) on Protection principles, Child Protection (CP), Sexual and Gender Based Violence (SGBV) including PSEA and Safe Identification and referral.

**Community Engagement And Accountability**

**Budget:** CHF 3,644
**Targeted Persons:** 30,000
**Indicators**

<table>
<thead>
<tr>
<th>Title</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of complaints and feedback responded to by the National Society</td>
<td>100</td>
</tr>
<tr>
<td># of consultative meetings per county</td>
<td>20</td>
</tr>
<tr>
<td># volunteers CEA trained/briefed and mobilized</td>
<td>200</td>
</tr>
</tbody>
</table>

**Priority Actions**

Community Engagement and Accountability (CEA) strategies will be rolled out throughout the implementation of this operation to ensure that the communities are at the centre of all interventions and that there is community ownership. Consultative meetings will be held with communities during the assessment and the next steps of the implementation. The meetings aimed at discussing preferences on feedback channels. A feedback mechanism will be put in place to get the necessary feedback from community members on issues related to the overall response. This feedback will be shared with all relevant platforms at community, district and national levels to ensure adjustments in programming where necessary. The community members in the target areas will be involved as fully as possible in the planning stages and throughout the response, to increase their ownership of the response sharing clear information about response activities, selection criteria and distribution processes. CEA activities shall include CEA Training for Volunteers and provincial staff focal points. Dedicated sessions on CEA will be incorporated into all main trainings that will be carried out for staff and volunteers.

**National Society Strengthening**

**Budget:** CHF 67,272

**Targeted Persons:** 300

**Indicators**

<table>
<thead>
<tr>
<th>Title</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td># of staff and volunteers trained and mobilised</td>
<td>300</td>
</tr>
</tbody>
</table>

**Priority Actions**

Early warning activities.
Communication and Internet.
E.O.C. Support Volunteers.
Communication and public relations.
Volunteer Insurance.

Monitoring.
Lessons learned workshop.
Admin Cost 7%
About Support Services

How many staff and volunteers will be involved in this operation. Briefly describe their role.

The total number of volunteers involved will include 300 pax across the country. The volunteers will be involved in assessment, distribution and post-monitoring distribution exercises. They will also support during data collection verification and validation of the target communities. The 30 staff will also be involved in coordination with stakeholders including the national and county government, as well as other non-governmental partners.

If there is procurement, will it be done by National Society or IFRC?

The KRCS team will procure the items as stated in the budget within the project period. These will be to support the replenishment of the already distributed and depleted items. KRCS is able to do emergency procurement since it also has prequalified suppliers who can restock the items as the response needs emerge. KRCS has a functional procurement team and regional/branches warehouses capacity if needed.

How will this operation be monitored?

With the support of the IFRC PMER, the KRCS Monitoring, evaluation, learning, and accountability department will support the DREF operation by providing technical inputs and support on planning, continuous monitoring, assessment results, and information management. They will also support the development and implementation of assessments in this operation. Monitoring reports shall be used to make proper adjustments to the plans and inform ongoing actions.

IFRC will undertake three technical support visits to the National Society. At the end of the DREF, the MEAL team will lead a joint lesson learning workshop with all stakeholders to document lessons that can be incorporated in future such operations. The lessons learned session will be built on the previous lessons drawn from other responses.

Please briefly explain the National Societies communication strategy for this operation

KRCS public relations and communication department will ensure the media coverage and visibility of the operation through press article during the implementation, photos, and video documentaries. Information related to the operation will also be disseminated through KRCS social media pages, mainstream media and the organization Website.
## DREF OPERATION

MDRKE058 - Kenya Red Cross  
El Nino Enhanced Floods 2023

### Operating Budget

<table>
<thead>
<tr>
<th>Planned Operations</th>
<th>Amount (CHF)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shelter and Basic Household Items</td>
<td>349,932</td>
</tr>
<tr>
<td>Livelihoods</td>
<td>102,358</td>
</tr>
<tr>
<td>Multi-purpose Cash</td>
<td>65,779</td>
</tr>
<tr>
<td>Health</td>
<td>101,375</td>
</tr>
<tr>
<td>Water, Sanitation &amp; Hygiene</td>
<td>48,897</td>
</tr>
<tr>
<td>Protection, Gender and Inclusion</td>
<td>5,655</td>
</tr>
<tr>
<td>Education</td>
<td>0</td>
</tr>
<tr>
<td>Migration</td>
<td>0</td>
</tr>
<tr>
<td>Risk Reduction, Climate Adaptation and Recovery</td>
<td>0</td>
</tr>
<tr>
<td>Community Engagement and Accountability</td>
<td>3,644</td>
</tr>
<tr>
<td>Environmental Sustainability</td>
<td>0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Enabling Approaches</th>
<th>Amount (CHF)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coordination and Partnerships</td>
<td>0</td>
</tr>
<tr>
<td>Secretariat Services</td>
<td>5,027</td>
</tr>
<tr>
<td>National Society Strengthening</td>
<td>67,272</td>
</tr>
</tbody>
</table>

### TOTAL BUDGET

**749,939**

*all amounts in Swiss Francs (CHF)*

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Click here to download the budget file
Contact Information

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

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IFRC focal point for the emergency: Patrick Elliott, Coordinator Operations, rooving, Africa Region, patrick.elliott@ifrc.org
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Click here for the reference