



KENYA

IFRC network mid-year report, January – June 2023

13 December 2023

IN SUPPORT OF THE KENYA RED CROSS SOCIETY



Kenya Red Cross



47

National Society branches



528

National Society staff



200,000

National Society volunteers

PEOPLE REACHED

Climate and environment



11,000

Disasters and crises



119,000

Health and wellbeing



662,000

Migration and displacement



754

Values, power and inclusion



2,000

FINANCIAL OVERVIEW

in Swiss francs (CHF)

Total	Funding requirements	78.7M
	Income	15.8M
IFRC	Emergency Operations Funding requirements	10M
	Longer-term Funding requirements	3.9M
	Income	820,000
	Funding requirements	6.2M
Participating National Societies	Income	2.0M
	Funding requirements	66.7M
Host National Society other funding sources	Income	578,000
	Funding requirements	

[Click here for more financial information](#)

Appeal numbers **MAAKE002, MDRKE049**

ONGOING EMERGENCY INDICATORS

MDRKE049 / Kenya / Hunger Crisis

People reached by National Societies with contextually appropriate water, sanitation and hygiene services	247,000
People reached per year with support services, in-kind, cash and voucher assistance for emergency response and recovery	54,000
People reached by National Societies with contextually appropriate health services	32,000
People reached by protection, gender and inclusion programming	Applicable data not available

STRATEGIC PRIORITIES

Climate	People reached with activities to address rising climate risks	11,000
	People reached with disaster risk reduction	119,000
Disasters and crises	People reached per year with support services, in-kind, cash and voucher assistance for emergency response and recovery	78,000
	People reached with livelihoods support	13,000
Health and wellbeing	People reached with contextually appropriate health services	662,000
	People reached with contextually appropriate water, sanitation and hygiene services	270,000
	People reached with psychosocial and mental health services	5,000
	People reached with immunization services	Applicable data not available
Migration and displacement	Migrants and displaced persons reached with services for assistance and protection	754
Values, power and inclusion	People reached by protection, gender and inclusion programming	2,000

IFRC NETWORK SUPPORTED ACTIVITIES

National Society	Multilateral Support	Bilateral Support					
		Climate	Migration and displacement	Values, power and inclusion	Enabling Functions	Disasters and crises	Health and wellbeing
American Red Cross	●			●			●
Australian Red Cross	●						
British Red Cross	●	●		●		●	●
Danish Red Cross	●	●	●	●		●	●
Finnish Red Cross	●	●		●	●	●	●
Italian Red Cross	●						●
Norwegian Red Cross	●					●	●
Swedish Red Cross	●						

Planned
 Supported

OVERALL PROGRESS

Context

Kenya continued to face increasing humanitarian needs following the consecutive disasters over the past three years. These include drought, recurrent floods, which all have affected livelihoods and driven widespread food insecurity. Agriculture plays a significant role in Kenya's economy, yet in recent years the country has faced severe food insecurity problems attributed to several factors. The changing nature and frequency of extreme weather events induced by the climate crisis (floods and drought) is shifting in Kenya, which in turn is increasing overall social and economic risk for a large proportion of the population. With most of Kenya's income poor people engaged in the agriculture sector as a source of livelihood, such stagnation of agricultural outputs continues to have a ripple effect. Limited access and availability to sufficient and quality food impacts over 10 million people suffering from food insecurity and poor nutrition, with 2–4 million people requiring emergency food assistance. Following an increase in food prices and low purchasing power, the level of poverty also challenges the nutritional, and mental health status of communities.

Key achievements

During the reporting period, **Kenya Red Cross Society** implemented various operations with support from IFRC, participating National Societies and other partners including the government of Kenya.

Tree planting and care

The Government of Kenya, through the Ministry of the Environment and Forestry in collaboration with stakeholders in the Environmental Management sector, launched a Tree planting campaign to promote reforestation programs. IFRC supports the National Societies in designing programs that contribute to IFRC's Pan-African Tree Planting and Care initiative. Such initiatives include tree planting, the establishment of tree nurseries, combatting desertification, conservation of water catchments, and contributing to water, food, and livelihood security. IFRC is facilitating a strategic partnership with Kenya Red Cross that will enable planting and care of multipurpose trees and reporting will be included in the next reporting cycle.

Through its own initiative, Kenya Red Cross planted 86,932 trees in Western Kenya. The database for tree planting was not yet finalized at the time of consolidating this report so this update will be reflected in the annual report.

Zero Hunger

The changing nature and frequency of extreme weather events induced by the climate crisis (floods and drought) continued to shift in Kenya, which in turn has increased the overall social and economic risk for a large proportion of the population. The Kenya Red Cross through IFRC launched an Emergency Appeal that has been responding to the hunger crisis in Kenya. This was incorporated into the Unified plan for Kenya Red Cross. Through the Appeal, Kenya Red Cross has been able to reach people with livelihoods and basic needs support, and access to safe water. Kenya Red Cross is also supporting people through health outreach services and protection activities. The progress on achievements is reported below under the ongoing emergency response. Other bilateral support to Kenya Red Cross from partners is reflected under the strategic priorities section below.

Red Ready

Kenya Red Cross, in addition to its auxiliary role, is designated as the first line of response in all sudden onset disasters by the Government and the Kenya Humanitarian Partnership Team (KHPT). The National Society works with the National Disaster Operations Centre (NDOC) in coordinating humanitarian emergencies and continued to be the partner of choice for emergencies in Kenya. IFRC supported Kenya Red Cross to strengthen the capacity of volunteers in order to be ready to respond. All volunteers engaged in operations were trained and insured.

National Society development (NSD)

IFRC through the Unified plan of Kenya Red Cross intends to ensure that all external support to National Society Development is aligned with National Society priorities as well as Movement standards, the Kenya Red Cross strategic plan, and annual NSD priorities. Kenya Red Cross has a funding pot for its branches capacity development which they continued to utilize in order to help fulfil their role as effective, principled and sustainable local humanitarian actors. Through the regional and branch Income Generation Activities (IGAs) fund, Kenya Red Cross various regions and branches.

Additionally, Kenya Red Cross received funding through the National Society Investment Alliance (NSIA) project, that is jointly managed by the International Federation of Red Cross and Red Crescent Societies (IFRC) and the International Committee of the Red Cross (ICRC). Kenya Red Cross signed an agreement with IFRC to support the expansion of the NRR Thread & Ink Printing and Embroidery (TIPE) project currently in operation. The factory provides branding for various merchandise with an aim of making profits that are ploughed back in society. Through this arrangement, the proceeds from the factory will be put in a revolving fund where counties can be allowed to borrow to actualize their investments.

Changes and amendments

There were no changes or amendments made to the Unified plan 2023. However, the plan was underfunded and there is a need to mobilize funding in the next implementation period.

IFRC NETWORK ACTION

ONGOING EMERGENCY RESPONSE

Name	Kenya Hunger Crisis
MDR-Code	MDRSO011
Duration	13 May 2021 to 31 July 2023
Funding requirements	Through IFRC Appeal: 8 million Swiss francs Federation-wide: 12.5 millions Swiss francs
Link to Emergency Appeal	Kenya Hunger Crisis Emergency Appeal
Link to Operational Strategy	Kenya Hunger Crisis Operational Strategy

Hunger crises have proven to be one of the severe natural hazards in Kenya that have affected more people and with the longest duration of prevalence causing huge economic loss. This has had an operational risk causing donor exhaustion and hence little or no funds to respond to some of the long-lasting solutions to hunger crises. Also, there has been a slow rate of response across the country due to limited funds where the needs are enormous. The IFRC Kenya Red Cross Appeal has been able to cover the immediate needs of the affected community by providing in-kind food distribution, multi-purpose cash transfers and some Water, Sanitation and Hygiene (WASH) activities in a few areas and immediate responses to health and nutrition.

Kenya Red Cross, through the support of IFRC, has revised the Appeal to align with the ongoing food insecurity crises happening in the Horn of Africa. For all the significant activities in the field, such as in-kind food distribution and cash transfer, Kenya Red Cross has been conducting internal and external reporting through the local media. Some beneficiaries who received cash transfers and food distribution agreed to share their interesting stories in the media, for example, in [Star Newspaper](#) and [Star Newspaper](#) and [Standard Media](#).

Some other examples include:

<https://nation.africa/kenya/counties/turkana/red-cross-in-sh65m-support-programme-for-starving-turkana-families-3956944>

<https://www.youtube.com/watch?v=DmXPoHCy2kl>

https://twitter.com/ntvkenya/status/1574332605243265025?s=20&t=UcwPEW_tQhGEf4-ZjGrSIQ

The Hunger Crisis Emergency Appeal has been underfunded and implementation remains low during the reporting period.

SECTORS OF INTERVENTION



Livelihoods

Objective: *Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods*

Food Security and Livelihoods: in-kind food distribution

In-kind food distribution was carried out in areas where cash was not a feasible option. These areas did not have functional markets to buy commodities, and there were no financial service providers who could provide aid in cash. A total of 7,850 households from eight counties, Turkana 2,000 households, Isiolo 1,000 households, Wajir 500 households, Garissa 500 households, West Pokot 350 households, Kilifi 1,000 households, Lamu 1,000 households and one joint food distribution activity was carried out jointly with IFRC in Marsabit county for 1,500HHs.

All the food distributions have been targeting vulnerable communities with the elderly, pregnant and lactating mothers, people living with disabilities and the most vulnerable in the community. Commodities being distributed included cereals (mainly rice or maize meal), pulses (pulses especially green grams or beans), cooking oil and salt. Each family is entitled to a ration, representing 50% of the household food ration per month, comprising of cereals, 1Kg per household; pulses – 7 Kg per household; cooking Oil – 3 litres; Salt – 0.5 Kg. This food is what has been procured through the IFRC Appeal. However, Kenya Red Cross has also been receiving in-kind food donations from local donors especially the cooperate sector and the Government of Kenya, and through the Appeal Kenya Red Cross is also supporting running costs of for example, transportation of food items, warehousing and allowances during handling (loading and offloading).

There is a need to continuously support communities' livelihood security by enhancing food production in the affected areas. The country depends mainly on rain-fed agriculture, which has not been available for so long, hindering activities such as providing drought-tolerant seeds. The government also depends on the two rainy seasons within the country, and there is a need to enhance proper timing for the distribution of such supplies.



Multi-purpose Cash

Objective: *Households are provided with unconditional/multipurpose cash grants to address their basic needs*

Lifesaving basic needs assistance through multipurpose cash grants

The Kenya Red Cross received additional funds from American Red Cross through the IFRC that were earmarked for cash and voucher assistance and the funds aimed at supporting households in Isiolo and Wajir counties The funds were paid to households in one instalment and a joint post distribution monitoring is planned before the end of March 2023.

Kenya Red Cross conducted a rapid market assessment and distributed cash to 10,705 families in seven counties: 996 households in Lamu, 1,298 households in Wajir, 750 households in Kilifi and 1,250 households in Garissa, 1,000 households Mandera, 1,287 households Tana River, 1000 households in Isiolo and 800 households in Samburu counties. The cash was disbursed in three tranches in all counties to cushion the communities against hunger for three months.



Health & Care

(Mental Health and psychosocial support / Community Health / Medical Services)

Objective: *Strengthening holistic individual and community health of the population impacted through community level interventions and health system strengthening*

The Appeal has supported Kenya Red Cross activities in targeted communities and geographical areas in the arid and semi arid (ASAL) areas of Kenya to enhance access to health and nutrition services, promote the sustainable reduction of health and nutrition risks and improve health and nutrition practices in targeted communities.

Outreach was carried out on nutrition and mental health activities in counties affected by drought. The Counties included Turkana, 6,682 people, Baringo 1,671 people, Marsabit 5,250, Garissa 3,818, Mandera, 4,534 people, Tana River, 1,909 and Lamu 1,630 people with a total of 25,494 people reached.

Kenya Red Cross, since the start of the Emergency Appeal, has sensitized 33 county team members on maternal-infant and young child nutrition in emergencies in two sub-counties of Wajir South. In continued partnership with the Ministry of Health and other stakeholders, which include the local administration, health facilities in-charge, religious leaders, community health assistants and police officers, Kenya Red Cross has continuously sensitized the community on sexual and gender-based violence.

Mental Health has been a challenge to communities affected by drought, and high cases are reported across the counties. Kenya Red Cross has supported four counties with mental health assessments and established safe spaces for sexual and gender based violence (SGBV) victims in Tana River, Garissa, Lamu and Marsabit counties.



Water, Sanitation and Hygiene

Objective: *Ensure safe drinking water, proper sanitation, and adequate hygiene awareness of the communities during relief and recovery phases of the Emergency Operation, through community and organizational interventions*

The prolonged drought coupled with limited access to water has limited access to safe water and sanitation services. Kenya Red Cross has carried out integrated activities aimed at ensuring the provision of clean drinking water for the community. The integrated activities were informed by an assessment, planning, regular coordination with the county government and other stakeholders, who have all contributed to an understanding of how the target population obtains access to water during the dry season.

The water available is also highly contaminated and hence the need to provide water treatment chemicals. The chemicals provided were the Pur and aqua tabs and sufficient for two months for 6,350 households. The people who have been supplied with the water treatment chemicals include those also receiving in-kind food donations from the National Society. Water trucking was also organized to areas where there was no water for the community. Seven water points were rehabilitated, benefiting approximately 43,000 households.



Protection, Gender and Inclusion

Objective: *Communities identify the needs of the most at risk and particularly disadvantaged and marginalized groups, due to inequality, discrimination and other non-respect of their human rights and address their distinct needs*

The drought crisis in ASAL counties affected men and women differently. Women often do not have a say in decisions that affect the use of resources. Nonetheless, often they have to take extra responsibilities of being heads of household when men migrate, and need to search pasture and water for livestock or undertake petty employment in urban centres. The drought disproportionately impacted the most vulnerable groups of female and children-headed

households, orphans and vulnerable children, widows, people with human immunodeficiency virus (HIV), chronic illnesses and people living with disabilities (PLWDs).

Women and children are amongst the highest percentage of the population affected by the drought, as are people living with disabilities (PLWDs) and the elderly who are often at risk of being left behind or marginalized. The Appeal has been prioritizing these groups along with pregnant and lactating women (PLW) and children under five who are the most vulnerable and at the highest risk of malnutrition. Through the response, PLW and children 6–59 months who were at risk of malnutrition were identified through screening and referred for treatment. These women and children were provided with the treatment to prevent a further deterioration of health.

In collaboration with relevant actors, including the community, Kenya Red Cross has ensured the safety and security of all beneficiaries to and from any distribution points. Accountability mechanisms through participatory community forums allow all age groups, people living with different chronic illnesses or with human immunodeficiency virus (HIV) and the PLWDs to express concerns or needs regarding their roles and treatment. These groups have had representation in the village committees and coordination structures that ensure everyone is heard and that the proposed interventions do not harm people but guarantee their protection. Cash and Voucher Assistance activities targeting female headed households have also strengthened women's place and role in the communities and supported their dignity. Additionally, the National Society has trained community health volunteers (CHVs) and community leaders who provide support to identify sexual and gender based violence (SGBV) survivors, psychological first aid (PFA) and effective referral and linkages to quality support services. Kenya Red Cross continues to engage existing government structures to strengthen and enforce laws and policies towards SGBV prevention and response, preposition the RH-Kit 3 to health facilities to support survivors of SGBV, and distribute dignity kits to the affected communities for men, women, boys and girls.

Kenya Red Cross has a PSEA policy that guides the prevention of sexual exploitation for staff and volunteers. This policy will be disseminated to all staff and volunteers engaged in the project to enhance their awareness and minimize the risk of exploitation of communities. Kenya Red Cross has mechanisms in place for monitoring and reporting such cases so that appropriate action can be taken against staff and volunteers involved in violating the policy.



Community Engagement and Accountability

Kenya Red Cross already has a well-established platform for community engagement and accountability through which it provides suitable channels to interact with the communities. Responsibility to the community is enhanced and mainstreamed through actively seeking feedback, closing the loopholes on input from the district and sharing feedback to improve drought response. Kenya Red Cross' publicity fliers with complaints/ feedback toll-free contact numbers are distributed in the targeted communities, and some are pinned on the surfaces of public places.

STRATEGIC PRIORITIES



Climate and environment

Progress by the National Society against objectives

During the reporting period, Kenya Red Cross implemented various projects both bilateral and with the support of the IFRC and ICRC

Climate Smart Agriculture (CSA) funded by Finnish Red Cross implemented in Tana River supported trainings to 435 (205 males, 230 females) on farming technologies and climate smart agriculture.

■ IFRC network joint support

The following participating National Societies supported Kenya Red Cross to implement the above interventions during the reporting period: British Red Cross and Finnish Red Cross.

Finnish Red Cross supported Dadaab Farm project through the Climate Smart Agriculture (CSA) project. The project seeks to support and contribute towards the adoption of agroforestry amongst the communities in Tana River County with the goal of promoting sustainable agriculture and forestry, as well as improving the livelihoods of the targeted community.



Disasters and crises

Progress by the National Society against objectives

1. IFRC has supported Kenya Red Cross through the Hunger Crisis Appeal. The Emergency Appeal seeks a total of 8 million Swiss Francs to deliver humanitarian assistance to 500,000 people (100,000 households) over a period of 18 months to address the current drought crisis in Kenya.
2. British Red Cross supported Kenya Red Cross through the IFSL Taita Taveta & Bomet projects. In Taita, the goal of the project is the protection and promotion of rural livelihoods of poor and vulnerable households in Taita Taveta County. This is being achieved through various approaches which include support to livelihood initiatives, water sanitation and hygiene as well as linking humanitarian assistance to government Social Protection. In Bomet, the project aims at achieving two goals of Kenya Red Cross by tackling worsening food insecurity and socio-economic challenges and the climate crisis. The British Red Cross also supported the Kilifi Drought Response Project with livelihoods activities.
3. The Building Resilience in Urban Settlement project has been supported by Danish Red Cross and provides livelihood activities and builds resilience in the urban settlements.
4. Through the Government of Kenya (GoK), Kenya Red Cross supported a project for community members through animal destocking. The Livestock Offtake Program, Phase Two funded by the Government of Kenya in Turkana, Kajiado, Kilifi, Samburu, Marsabit, Garissa, Tana River, Wajir, Mandera. Communities provided meat distribution to vulnerable households facing food insecurity which benefitted 98,788 people. A total of 20,614 people benefitted as livestock sellers.
5. The International Organization For Migration (IOM) supported Kenya Red Cross, to implement a Gender and Vulnerability Sensitive Disaster Risk Reduction and Community Resilience in Turkana County. The project is implemented in Loima, Turkana West and Turkana South subcounties which are flood plains of Turkwel, Tarach and Kawalathe Rivers. It will carry out Gender and Vulnerability Sensitive DRM trainings and capacity building sessions for the county disaster risk management (DRM) structures as well as support in filling the gaps for the county DRM Plans.
6. WWF-Kenya, supported the Kenya Red Cross Lamu with the construction of an Emergency Operation Centre (EOC) in Hindi ward, Lamu county, next to the Emergency Command Centre Kenya. This is part of the resilience building project that aims to strengthen community resilience to floods, conflict, marine related incidents and insecurity disasters.
7. Bomet County Government supported Kenya Red Cross to improve the community's livelihoods, and provide access to water, health, nutrition and food security by up scaling the best practices and lessons learnt in the first phase of implementation.
8. Kenya Red Cross with funding from USAID Bureau for Humanitarian Assistance (BHA) is currently responding to the current drought through a project "Improving Resilience of Drought Affected Persons in Turkana, West Pokot and Baringo Counties of Kenya. The project is implemented using an integrated approach with three majorly affected sectors of food security (cash assistance), WASH, health and nutrition services.
9. Through Christian Bind Mission (CBM) funding, Kenya Red Cross implemented a Global Drought Response on Cash and Voucher Assistance in Turkana County and drought response in Bungoma.

10. American Red Cross supported various operations on livelihoods & basic needs through cash and voucher assistance.
11. Economic Security (ECOSEC) project funded by ICRC in Lamu and Garissa reached 320 households or 1,920 beneficiaries (941 male and 979 female). The project will provide village savings and loans (VSLA) training and enrol students to vocational training. To date, 49 students have enrolled.
12. Through the Bomet Integrated Food Security and Livelihoods (IFSL) project supported by British Red Cross in Bomet, 517 farmers were reached with farm inputs while 281 farmers were sensitized on new farming skills and technologies, post-harvest management. Integration of protection, gender and inclusion (PGI) was supported in this project where 32 (9 female, 23 male) community/ responders were sensitized, and 34 members trained on gender based violence (GBV) prevention, response and referral pathways.
13. Integrated Food Security and Livelihoods (IFSL) funded by British Red Cross in Taita Taveta supported community beneficiaries with livelihoods, income generating activities (IGA) and health interventions. PGI and CEA were also integrated in the implementation activities and 360 farmers were trained in agricultural and livestock practices. Under the mother-to-mother support groups, 80 mothers were sensitized on food diversification and importance of setting up kitchen gardens. Ninety nine farmers were supported with farm inputs. Other activities included training on agribusiness, village savings and loan associations (VSLA) trainings, nutrition sensitive programming (maternal, infant and young child nutrition (MIYCN) in emergency). Forty volunteers were trained on nutrition sensitive programming, caregivers sensitized on family mid upper arm circumference (MUAC), and community members reached with WASH messages.
14. A Community Disaster Rescue Centre in Hindi funded by World Wildlife Fund (WWF) implemented in Lamu supported training of 30 community based disaster response teams (CBDRTs) in response to conflict, coordination, emergency medical response during response.
15. Urban Community Resilience Building Project (UCRB) funded by Danish Red Cross implemented in Nairobi County, Mathare and Mukuru & Mombasa County, Tudor and Miritini directly supported 7,287 beneficiaries on disaster risk reduction (DRR) interventions and mental health and psychosocial support (MHPSS) activities in both counties.
16. Meru and Tharaka Drought Response Inclusion Project (DRIP) funded by Christian Blind Mission (CBM) was implemented in Tharaka Nithi & Meru counties. Cash transfers for basic needs was carried out for 6,162 people (1027 households, 504 households and 523 households in Meru & Tharaka Nithi).
17. The Turkana Drought Response Inclusion Program funded by Christian Blind Mission (CBM) global was implemented in Turkana where 24,108 households were reached with cash assistance and 27 children provided with referral services.
18. Kenya Red Cross provided support to drought affected communities through cash and voucher assistance (CVA) funded by Norwegian Red Cross in Garissa and Marsabit. A total of 4,300 (2,193 female & 2,107 male) beneficiaries were reached through cash and voucher assistance while 616 children under 5 with severe acute malnutrition (SAM) and moderate acute malnutrition (MAM) were reported to have improved their nutritional status.
19. Integrated (Health, Nutrition, Emergency Cash Transfer, WASH, Child Protection and Social Behaviour Change) response to the drought emergency in arid and semi arid countries (ASAL) counties funded by USAID Bureau for Humanitarian Assistance (BHA) implemented in 23 ASAL Counties. A total of 47,716 children were screened and 53,018 people received uninterrupted access to health services.

■ **IFRC network joint support**

The following participating National Society's provided funding to Kenya Red Cross to implement the above interventions during the reporting period. The support was both through the IFRC and bilaterally through American Red Cross, British Red Cross, Danish Red Cross, and Finnish Red Cross.



Progress by the National Society against objectives

USAID-Support to IFRC's Efforts to Prepare for the Potential Spread of Ebola, a Viral Hemorrhagic Fever Disease, to the Kenya

The Ministry of Health reported an outbreak of Ebola virus disease in Mubende, Uganda on the 20th of September 2023. The Ebola outbreak became the latest in years of reporting on epidemics of such nature in the country and the neighboring Democratic Republic of Congo. Ebola spread throughout nine districts and by November, the virus disease had spread to the Jinja district which was only 117 km from the Busia-Uganda border increasing the risk of infection on the border country. This showed that the spread was moving fast towards the Kenyan border and traders and travelers using the Trans-African highway and other major roads leading in and out of Uganda would increase the chances of the disease spreading to Kenya border counties. USAID through IFRC funded Kenya Red Cross to support interventions to reduce the risk of the outbreak.

Kenya Red Cross worked with the Ministry of Health and an implementation plan was launched to support the following key areas:

- Risk Communication and Community Engagement (RCCE)
- Community-Based surveillance (CBS).
- Preparedness for Safe and Dignified Burials (SDB)
- Preparedness of Kenya Red Cross Ambulance service operators:
- Preparedness for Mental Health and Psychosocial Support
- Kenya Red Cross Emergency Operations Centre
- Ambulance services
- Coordination through the Kenya Red Cross Emergency Operations Centre and Public Health in Emergency Operation Centre (PHEOC)
- Review and Reflections-Entailed both physical and virtual meetings with national, county government, ministries, and stakeholders Between January and June 2023, the following activities were achieved:
- 351 volunteers in the target counties were trained on community based surveillance (CBS), and active case finding.
- 27,000 information, education and communication (IEC) materials were printed and distributed including - leaflets, key messages, posters, and fact sheets.
- 661,957 people have been reached through Community Risk Awareness Sessions (RCCE) - door to door, social mobilization, religious leaders, local administration.
- 28 local safe and dignified burial (SDB's) staff were trained and positioned in priority high risk counties (Busia, Kisumu, Bungoma, Trans Nzoia and West Pokot). These teams were prepositioned in Busia-13 and Kisumu-15.
- 20 Kenya Red Cross ambulance service operators have been trained on infection prevention control (IPC) and waste management for Ebola virus disease (EVD)

CP3 USAID Kenya

Zoonotic disease

In the period January to June 2023, the Kenya Red Cross Society has continued to implement community-based surveillance (CBS) in the four Community Epidemic Pandemic Preparedness programme (CP3) implementing counties, with a One Health approach for common epidemic potential diseases including zoonotic diseases, such as anthrax and rabies. One Health activities across the four counties have continued to be coordinated by the established One Health committees with membership from the Ministry of Health (MoH), Ministry of Agriculture and Livestock Development (MoALD), Ministry of Water and Environment, Kenya Red Cross and other stakeholders/partners, including the private sector.

- 339 master trainers were trained on Epidemic Preparedness in Communities (EpiC) core training package. Trainers were drawn from the counties comprising of staff from the Ministry of Health, Ministry of Agriculture and Livestock Development (MoALD) and Kenya Red Cross. The training was cascaded to 225 Community Health Volunteers (CHVs) from the 20 new community health units across the four counties (108 male, 117 female).
- A total of 836 trained CBS volunteers and a total of 70 trained government-sponsored animal health assistants across the four implementing counties, supported in verifying all animal disease alerts.
- A total of 48,934 animal vaccines were administered in CP3 counties against anthrax, rabies, contagious bovine pleuropneumonia, lumpy skin disease, and sheep & goat pox.

Surveillance

The Kenya Red Cross CP3 Programme, the IFRC, CORE Group Partners Project and USAID Kenya held a meeting with the national MoH division disease surveillance unit, in a bid to initiate discussions on how to link the Kenya Red Cross CBS reporting platform with the Government's Event Based Surveillance (EBS) system. Presentations of both systems were made by the technical teams, and it was agreed that the two systems would be integrated.

A total of 95 (52 male, 43 female) Kenya Red Cross volunteers, CHAs and AHAs who had been trained in Epidemic Prevention Communities (EpiC), were further trained in Community Based Surveillance (CBS).

Health emergency management

In preparedness for a possible Ebola Virus Disease (EVD) outbreak in Kenya, following a confirmed outbreak in Uganda in September 2022, Kenya Red Cross, through the CP3 Programme, supported the training of 28 trainers in Epidemic Prevention Communities (EpiC) and community-based surveillance (CBS). Kenya Red Cross, with technical support from IFRC, also supported the Kenyan Government to develop and ratify safe and dignified burials national policy/standard operating procedures. Additionally, Kenya Red Cross and IFRC supported the Government to train five safe and dignified burials teams, strategically prepositioned, to respond in priority counties.

Risk Communication and Community Engagement (RCCE)

The CP3 Programme team worked closely with the CEA Department to ensure RCCE materials are well aligned with local community needs and to the Government guidance for specific disease outbreaks' preparedness and response.

Cumulatively, a total of 30,062 households were visited reaching 90,480 people, while a total of 690 group information sessions held reached 31,276 people, and a total of 10 mobile cinemas/street theatres were conducted reaching 3,489 people. Additionally, 11 radios produced 44 health talk shows and aired 151 radio spots, and 208 school visits were conducted, reaching 28,668 learners and teachers.

The CP3 Programme has continued to engage the local journalists previously trained by BBC Media Action in "Lifeline" reporting in emergencies, to collect feedback from communities. More than 156,000 people were reached through these different approaches and through local media engagement.

A total of 633 men and 643 women were reached with community health promotion through mobile cinemas. While a total of 2,075 local officials, 294 religious' leaders, 2 traditional healers and 710 other community leaders were engaged on epidemic preparedness in communities.

COVAX Roll out support to Ministry of Health Kenya funded by Finnish Red Cross and IFRC was implemented in nine 'hard to reach' counties. The AFRICA COVID-19 Vaccination Project was implemented in Turkana, Samburu, Tana River, Marsabit, Isiolo, Lamu, Kitui, Baringo, Wajir. The project utilized advocacy, building trust, health and enhancing reach to assist 1.56 million community members and support vaccination of approximately 301,000 'hard to reach' and vulnerable community members. The project directly sensitized 431,512 (350,355 male & 390,722 female) while 35,964 (15,142 male, 20,822 females) have been vaccinated to date.

Save Lives and Livelihoods Programme (SLL)

Save Lives and Livelihood Programme (SLL) is a partnership between the Mastercard Foundation and Africa Centre for Disease Control (CDC) that is supporting the procurement and delivery of tens of millions of vaccines and help to hasten economic recovery on the continent. Under the SLL programme, Kenya Red Cross will deliver critical Risk Communication and Community Engagement (RCCE) activities to vulnerable communities by ensuring that vaccination activities are community-led and trusted. Other partners in the SLL program are providing procurement and logistics to a central warehouse (UNICEF), in-country logistics (WFP), managing COVID-19 Vaccination centres and safety surveillance.

Kenya Red Cross received bilateral support from several donors for capacity development. The following projects were funded bilaterally:

1. Through the Global Fund, Kenya Red Cross is implementing a project on HIV and Aids intervention across the country which is ongoing.
2. Continuity in Crisis, a project for ensuring continuity of non communicable diseases (NCD) care for crisis-affected populations funded by Danish Red Cross and implemented in Kalobeyei refugee settlements, Nairobi, Tana River and Kilifi Counties. 21,683 beneficiaries of non-communicable disease (NCD) clinics have been reached. Additionally, 2,100 learners and school population (1,210M & 890F) were reached with NCD messages, and 65 children (61M,4F) reached with child therapy services.
3. Resilience Health & Rights in Northern Kenya funded by Danida through Danish Red Cross implemented in Marsabit, Turkana, Garissa, Wajir and Mandera (Dadaab). Kenya Red Cross received funding from DANIDA through the Danish Red Cross to execute a four-year initiative centered on enhancing resilience, healthcare, and human rights in five specific counties. The primary objective of this project is to aid in the development of sustained resilience in marginalized regions where a total of 12,500 persons reached through sensitization sessions.
4. Kenya Red Cross received funding to support implementation of a project on Improving sexual and reproductive health rights (SRHR) and gender based violence (GBV) outcomes for Women in Tana River County facing climate risks and challenges in accessing health information and services funded by Danish Red Cross implemented in Tana River and Kilifi. A total of 558 participants (212 Male and 346 Female) were reached through raising awareness on 16 days of activism, eradication of female genital mutilation (FGM) day, International Women's Day 1073 households reached through maternal and new born health (MNH) services
5. Sustainable Management and Access to Water and Sanitation in the ASALs Programme (SWASAP) funded by Water Fund and implemented in Isiolo provided training on community led total sanitation (CLTS) and WASH to 66 (33M & 33 F) 42 CHVs, 11 religious leaders, 6 chiefs/Sub-areas and 7 healthcare workers.
6. Bomet Integrated Development Programme Phase 2 (BIDP 2) jointly funded by Bomet County Government and Kenya Red Cross Society, implemented in Bomet county, reached 34,268 households through health messaging on epidemic and priority diseases in the community health units while 414,925 beneficiaries were reached through monthly mobilization exercises.
7. Finnish Red Cross is the lead EU partner implementing the ECHO Humanitarian Implementation Plans (HIP) and the project ended in July 2023, for which a final report is under development. This is a COVID 19 vaccine uptake project that aimed at enhancing the uptake of the vaccine among hard to reach and vulnerable community members in 9 (Tana River, Lamu, Wajir, Marsabit, Isiolo, Samburu, Kitui, Turkana and Baringo) counties and 23 sub counties in Kenya. The project utilized advocacy, building trust, health and enhancing reach pillars to reach to 1,56 million community members and to support the vaccination of approximately 301,000 hard to reach and vulnerable community members.
8. Bomet Covid 19 Roll Out Project funded by British Red Cross reached 269,085 people through Kenya Red Cross volunteers trained on the COVID 19 Vaccine and vaccination procedures, 23 (11 male & 12 female) volunteers trained. A total of 19,512 (10,089 male & 11,152 female) community members were vaccinated at the Link facility during the monthly mobilization sessions.
9. British Red Cross supported Kenya Red Cross under the Bomet COVAX Roll out Project to increase the number of people vaccinated in the county. The project is being implemented in two sub counties; Bomet Central and Sotik Sub counties. The county branch is working with the department of health and other partners to ensure that communities are sufficiently aware of the COVID -19 and accept to be vaccinated.
10. Kenya Red Cross received funding from Norvo Nordisk Foundation (NNF) through the Danish Red Cross to implement a four-year project to enhance access to non communicable disease (NCD) care in crisis situations targeting four sites i.e., Nairobi, Tana River, Kilifi and Kalobeyei Refugee settlement. The main goal of the project is to improve access to NCD prevention, care and support for people affected and displacement by disaster, and support integration of NCD prevention and care in humanitarian operations. The project is ongoing.
11. WFP has supported Kenya Red Cross with food distribution in Kwale, Kilifi, Makueni, Kitui and Kajiado. This project supplies and delivers supplementary feeding products to health facilities.
12. Lamu Garissa WASH funded by ICRC in Lamu and Garissa supported 2,562 people thorough hygiene promotion campaigns messages

■ IFRC network joint support

The following participating National Societies provided funding to Kenya Red Cross to implement the above interventions during the reporting period. The support was both through the IFRC and bilaterally through British Red Cross and Danish Red Cross.



Migration and displacement

UNHCR supported a project on protection and assistance of Somali refugees in Dadaab. Kenya Red Cross contributed towards improvement of the overall wellbeing of persons of concern in Turkana through the provision of primary health care and nutrition services in Kalobeyei refugee settlement, offering tracing services in Kakuma and Kalobeyei, supporting movement of asylum seekers through the support of UNHCR.

ICRC supported a project on tracing and restoring family links for refugees in Kalobeyei.



Values, power and inclusion

Progress by the National Society against objectives

Kenya Red Cross received bilateral support from Danish Red Cross through a project for enhancing Community Development in Mukuru – civil society in development (CISU) funded by Danish Red Cross implemented in Nairobi. The project reached 796 (385 female, 411 male) youth in school were reached with life skills training. A total of 2,099 (939F, 1,160M) youth in and out of school were reached by the the project activities.

The Protection, Gender and Inclusion project funded by British Red Cross in Taita Taveta trained 40 community health volunteers (CHVs) on child protection. With IFRC, Danish Red Cross and British Red Cross support.

Restoring Family Links (RFL) project funded by ICRC, implemented in Refugee Camps and all over the country. A total of 754 refugee women were reached with RFL support.

Through the sexual and reproductive health (SRH) and gender based violence (GBV) project in Tana river and Kilifi counties, Finnish Red Cross also supported Kenya Red Cross to contribute to improved SRH and gender based violence GBV outcomes benefiting an estimated 42,000 women of reproductive age (WRA) and a healthier community in both Tana River and Kilifi Counties including for 2,000 persons living with disability. The project aims at increasing the demand and access for SRH and GBV including female genital mutilation (FGM) services, and enhanced quality of SRH and GBV services at both community and health facility level.

The Ministry of Foreign Affairs of Finland funded the GBV Awareness Project in Kenya through Kenya Red Cross which is being implemented in Samburu, Bungoma and Kilifi Counties. The overall goal is to contribute to the reduction of gender-based violence and harmful practices and the project is expected to complement the Finland-Kenya bilateral programme on strengthening prevention and response to Gender-Based Violence.

Safeguarding project funded by the British Red Cross implemented in Taita Taveta supported 505 people (191 males, 314 female) with safeguarding services and 1,890 households benefitted from relief food.

Kenya Red Cross carried out activities in line with the process of community engagement, accountability and especially feedback within beneficiary communities. The IFRC team had supported the Kenya Red Cross to develop specific plans, guidelines and operational procedures to ensure that communities are actively involved in designing systems for early action, anticipation and planning. Monitoring and evaluation (M&E) is an integral part of all IFRC projects and programmes. This operational plan adopted results-based monitoring that promotes a common understanding and a reliable practice of monitoring and evaluation by the National Society and humanitarian partners.

ENABLING LOCAL ACTORS



Strategic and operational coordination

Progress by the National Society against objectives

The IFRC has a Country Cluster Delegation for Kenya and Somalia and the Regional Office for Africa, based in Nairobi. The IFRC, through the Delegation, provides resource mobilization and technical support to Kenya Red Cross in emergency response operations as well as long-term programming.

Kenya Red Cross works in partnership and coordination with all Movement actors by engaging them in Movement coordination meetings, proposal development and involvement in technical working group meetings.

Kenya Red Cross works and collaborates with Participating National Societies 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.

In disaster situations, in-country partners supported the National Society in the emergency response either through bilateral support or by contribution to the Emergency Appeal. The National Society works also closely with the ICRC delegation in-country through their multi-year cooperation agreement and collaborates on various projects concerning economic security, restoring family links and protection, as indicated under the strategic priorities section.

Kenya Red Cross, in addition to its auxiliary role, is designated as the first line of response in all sudden onset disasters by the Government and the Kenya Humanitarian Partnership Team (KHPT). The National Society works with the National Disaster Operations Centre (NDOC) in coordinating humanitarian emergencies, the National Drought Management Authority (NDMA) in drought management, and co-chairs of Kenya Cash Working Group. 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, which is responsible for the implementation of nutrition interventions targeting malnourished children, pregnant and lactating women and the elderly.

The United Nations has a strong presence in Nairobi for international (UN-Habitat and UNEP) country and regional programmes. The UN agencies which are working in partnership with Kenya Red Cross include, UNHCR (refugee programmes), UNICEF (nutrition, epidemics and child protection), UNFPA (reproductive health and gender based violence), WHO (epidemics), UN-OCHA (coordination of partners and trainings on Kenya Interagency Rapid Assessments), UN Women, Food and Agriculture Organization (programmes on livestock including vaccination, animal offtake, distribution of hay), and the International Organization for Migration (shelter sector partnership). Kenya Red Cross also works with in-country donors including European Commission Humanitarian Aid, USAID/OFDA, FCDO and the European Union. The UK Space Agency also supports Kenya Red Cross in developing space satellite technology for response preparedness and planning.

Kenya Red Cross is part of the Health Promotion Stakeholders working group chaired by Ministry of Health with the health districts. It facilitates co-creation, co-implementation, co-monitoring of health promotion activities on advocacy, communication, social mobilization and risk communication and community engagement (RCCE).

Kenya Red Cross is also part of the Eastern and Southern Africa Risk Communication and Community Engagement Technical Working group chaired by UNICEF and IFRC under the risk RCCE collective service

Kenya Red Cross is part of the Movement-wide working group for CEA in Africa. It is also part of the Horn of Africa Drought and Hunger Crisis Alliance for African Partnership (AAP) working group chaired by UNOCHA.



Progress by the National Society against objectives

IFRC regional office and Kenya Red Cross coordinated the development of a concept note for a regional IFRC Reference Centre that Kenya Red Cross will be hosting. The concept note was developed in consultation with Kenya Red Cross' organizational development department and the leadership and aims to address issues related to stronger governance, integrity and financial sustainability. The concept note is at the final stage and will soon be presented to the IFRC for the the Secretary General's approval.

Capacity building fund through National Society investment alliance (NSIA) project

The National Society Investment Alliance (NSIA) is a pooled funding mechanism, run jointly by the IFRC and the International Committee of the Red Cross (ICRC). It provides flexible, multi-year funding to support the long-term development of Red Cross and Red Crescent Societies.

The NSIA is a simple, cost-effective and accountable way of funding Red Cross and Red Crescent Society development. It helps them reach their full potential and fulfil their role as effective, principled and sustainable local humanitarian actors. The NSIA is jointly managed by the International Federation of Red Cross and Red Crescent Societies (IFRC) and the International Committee of the Red Cross (ICRC). It is an important part of turning our commitment to localization into action. Kenya Red Cross succeeded in getting the 5-year NSIA Accelerator for long-term organizational development and sustainability.

Kenya Red Cross signed an agreement with IFRC to support the expansion of the NRR Thread & Ink Printing and Embroidery (TIPE) currently in operation. The factory provides branding for various merchandise with an aim of making profits that are ploughed back into society. Through this arrangement the proceeds from the factory will be put in a revolving fund where counties are allowed to borrow to actualize their investments. The first clients for the factory will be internal clients within the society followed by external clients that include but are not limited to schools, companies and organizations. This then necessitates a joint inception meeting to understand the reasons for the expansion and to actualize the expansion plan.

Thread & Ink Printing and Embroidery (TIPE) is an entity engaged in mass production of ready-made garments, embroidery, screen printing, direct to film (DTF) and heat transfer as the specialized branding services company. Thread & Ink Printing and Embroidery is established as an entity fully owned and operated by Kenya Red Cross Society North Rift Region. TIPE provides high quality fabric to the residents of Eldoret and its environs where they select from a variety of sizes and quality to the liking of our customers.

During the period, Kenya Red Cross, jointly with IFRC and ICRC, conducted an inception meeting virtually on 22nd May 2023. The purpose of the meeting was to engage and prevent technical elements and approaches of the project, to review the overall plan, objectives, outcomes and goals of the project and encourage stakeholders to advocate for coordinated flow of services.

Production of the IEC materials is ongoing albeit on a low scale. A recruitment process is ongoing of the productions and quality control coordinator, management accountant, sales and marketing officer to start with other positions will be filled gradually. In addition, procurement pursuing legal framework agreements with raw materials suppliers as well as procurement of machines in process.

Three staff have been recruited i.e., the productions and quality control coordinator, management accountant, sales and marketing officer to start with other positions will be filled gradually. Once the recruitment process is finalized, the procurement will initiate all projected to take place in Q3 2023.

Additionally, Kenya Red Cross received bilateral support from different donors for capacity development.

The following projects were funded bilaterally:

1. Information & dissemination project funded by ICRC. The communication (CP) project seeks to ensure that Kenya Red Cross Society has strengthened the capacity of its staff and volunteers to respond to all kinds of disasters and emergencies, particularly those arising from armed conflict or other situations of violence in a timely and effective manner while maintaining preparedness for such events during times of peace.

2. ICRC Tracing Project supporting tracing and restoring family links for refugees in Kalobeyei.
3. DANIDA Strategic Partnership Agreement (SPA) project through the Danish Red Cross (DRC), a four-year funding (2022–25). The funding aims at strengthening cross cutting priorities as per Danish Red Cross country strategic plan including National Society development, innovation, youth programming, forecast based actions and mental health.
4. IFRC Regional Office and Kenya Red Cross coordinated the development of concept note for a regional IFRC Reference Centre that Kenya Red Cross will be hosting. The concept note was developed in consultation with Kenya Red Cross Organisational Development department and the leadership and aims to strengthen governance, integrity and financial sustainability. The concept note is at a final stage and should be presented to the IFRC in the near future for SG approval.
5. Kenya Red Cross has a funding pot for its branches capacity development. Through the Regional and Branch IGAs fund, Kenya Red Cross supported income generation activities (IGAs) at the Region/Branches.



Humanitarian diplomacy

Progress by the National Society against objectives

To help position Kenya Red Cross within the country as a leading humanitarian actor, it is critical to build public awareness and visibility for its role in responding to those affected by emergencies. This not only helps build the brand and credibility of the organization in Kenya, but also provides an opportunity for further funding and support. Kenya Red Cross worked with national and royal media to provide updates on the response and the needs of communities as well as collect stories of impact from people who received the much-needed support through the response. It was also a great opportunity to showcase the responders and volunteers on the frontline of the response and their important role in helping communities in the relief and recovery period of the disaster.



Accountability and agility (cross-cutting)

Progress by the National Society against objectives

All operations required personnel who supported in the implementation of the interventions. Kenya Red Cross engaged staff and volunteers who were activated based on the needs of the affected areas. Additional teams including surge capacities were engaged to support in the implementation of operations.

Kenya Red Cross carried out activities in line with the process of community engagement, accountability and especially feedback within beneficiary communities. The IFRC team had supported the Kenya Red Cross to develop specific plans, guidelines and operational procedures to ensure that communities are actively involved in designing systems for early action, anticipation and planning. Monitoring and evaluation (M&E) is an integral part of all IFRC projects and programmes. This operational plan adopted results-based monitoring that promotes a common understanding and a reliable practice of monitoring and evaluation by the National Society and humanitarian partners. A monitoring and evaluation framework is in place for the country plan to ensure that outcomes and outputs are tracked and achieved as planned and that data is disaggregated appropriately.

All operations developed a risk management plan that was jointly formulated for the operations and a risk monitoring mechanism established for mitigation. All operations were supported by program staff including CEA, PMER, operations managers for quality assurance, accountability, and reporting.

Indicator tracking tables (ITTs) were developed for the Unified plan to track indicators against the plan.

Under the coordination and management of Kenya Red Cross Society, and with the technical and managerial support of the IFRC, the Kenya Red Cross Society has been implementing the RCCE strategy in coordination with the national Ministry of Health as well as key RCCE partners including UNICEF, WHO and other local organizations in order to develop high quality, effective and accountable RCCE activities.

In the background of WHO's declaration on COVID pandemic, engagement of local influencers and leaders to spearhead community advocacy on COVID vaccination was enhanced with focus on integration to ensure there were no missed opportunities for communities in accessing COVID vaccines while accessing other health services. Kenya Red Cross got approval to sustain demand creation for COVID vaccines aligned with SLL integration strategy and reached 2,590,398 people by June 2023.

During the reporting period, a data quality assessment (DQA) was conducted, and spearheaded by Deloitte targeting all implementing counties aimed at evaluating and identifying areas of improvement for M&E processes and documentation of the project.



The International Federation of Red Cross and Red Crescent Societies (IFRC)

is the world's largest humanitarian network, with 192 National Red Cross and Red Crescent Societies and around 15 million volunteers. Our volunteers are present in communities before, during and after a crisis or disaster. We work in the most hard to reach and complex settings in the world, saving lives and promoting human dignity. We support communities to become stronger and more resilient places where people can live safe and healthy lives, and have opportunities to thrive.

DATA SCOPE AND LIMITATIONS

- **Timeframe and alignment:** The reporting timeframe for this overview is covering the period from 1 January to 30 June 2023. However, due to the diversity of the IFRC and differences in fiscal years, this coverage may not fully align for some National Societies. Mid-year reporting data may have been based on estimations, with plans to submit more robust numbers at the annual reporting stage.
- **Missing data and breakdowns:** National Societies have diverse data collection systems and processes that may not align with the standardized indicators. Data may not be available for some indicators, for some National Societies. This may lead to inconsistencies across different reporting tools as well as potential under or over-estimation of the efforts led by all.
- **Reporting bias:** The data informing this Federation-wide overview is self-reported by each National Society (or its designated support entity) and which is the owner and gatekeeper, and responsible for accuracy and updating. IFRC tries to triangulate the data provided by the National Societies with previous data and other data in the public domain.

ADDITIONAL INFORMATION

- [IFRC Global Plan and Country Plans](#)
- [Subscribe for updates](#)
- [Donor response](#) on IFRC website
- [Live Disaster Response Emergency Fund \(DREF\)](#) data
- Operational information: [IFRC GO platform](#)
- National Society data: [IFRC Federation-wide Databank and Reporting System](#)

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National Society

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