

# EMERGENCY APPEAL

## OPERATIONAL STRATEGY

### Kenya, Africa | Complex Emergency



*Samburu North, Keleswa Primary School, in August many children were staying home due to lack of food. KRCS distributed 500 food rations to families and schools to help ease the strain. Samburu is among 7 counties currently classified in IPC Phase 3 (Crisis) (Photo KRCS)*

Appeal No: <b>MDRKE068</b>	To be assisted: <b>300,000 people</b>	Appeal launched: <b>02/10/2025</b>
Glide No: <b>XX-2014-123456-XXX</b>	DREF allocated: <b>995,000 CHF</b>	Disaster Categorization: <b>Orange</b>
Operation Start date: <b>22/10/2025</b>	Operation End date: 31/12/2026	

**IFRC Secretariat Funding requirement: 10 million CHF**  
**Federation-wide funding requirement: 15 million CHF<sup>1</sup>**

<sup>1</sup> The Federation-wide funding requirement encompasses all financial support to be directed to the Kenya Red Cross Society (KRCS) in response to the emergency. It includes the KRCS's domestic fundraising requests and the fundraising appeals of supporting Red Cross and Red Crescent National Societies (CHF 5 million), as well as the funding requirements of the IFRC secretariat (CHF 10 million). This comprehensive approach ensures that all available resources are mobilized to address the urgent humanitarian needs of the affected communities.

## TIMELINE

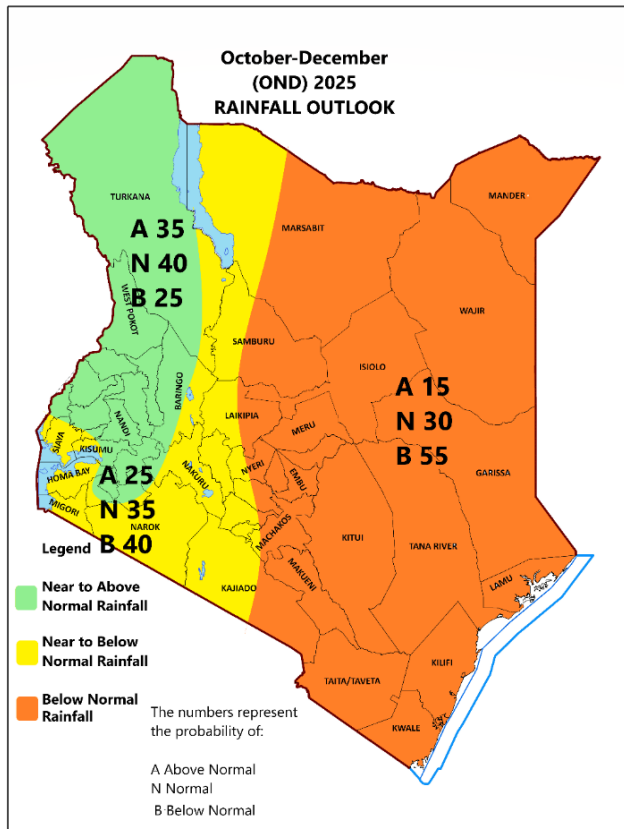


*In North Horr, Marsabit County, our teams visited affected families, offered medical outreaches and food support, rehabilitated water points and assessed the extent of the drought, including dried wells. (KRCS photo)*

## TIMELINE

- 7 Apr '25,** IFRC allocated CHF 970,592 via DREF to support KRCS reach 60,000 people across seven ASAL counties with food, cash, health, and WASH services.
- 27 May '25** IFRC allocated CHF499,001 via DREF to support KRCS respond to the March-May rains and a cholera outbreak.
- Aug '25** In August, the government requested USD 128.6 million for the drought response under the Ending Drought Emergencies Framework.
- 12 Sept '25** Early Action Protocols were activated on releasing CHF 367,238 to support KRCS with early interventions in Kwale, Kilifi, and Kitui, targeting 150,000 people.
- 1 Oct '25** Nationwide relief food dispatch began, aiming to reach 2.15 million people across all 23 ASAL counties.
- 24 Oct '25** IFRC launched a Complex Emergency (MDRKE068) to support KRCS scale up their drought, floods and diseases outbreak responses.

# DESCRIPTION OF THE EVENT



Kenya is increasingly vulnerable to climate extremes, with cycles of severe drought often followed by intense rainfall and flooding. Beginning in November 2023, El Niño-enhanced rains triggered widespread flooding that persisted into early 2024, displacing thousands and damaging infrastructure. However, the October–December 2024 short rains underperformed significantly across arid and semi-arid lands (ASALs), disrupting cropping cycles, delaying replanting, and worsening food and nutrition insecurity.

The ASAL regions are currently facing a worsening dry scenario marked by insufficient rains, heat stress, dwindling water and pasture, rising food insecurity, and increasing conflict risks.

ASALs cover nearly 90 per cent of Kenya’s land and are home to approximately 16 million people (30 per cent of the population). These regions support 70 per cent of the country’s livestock, primarily through pastoralism and small-scale farming. However, they face chronic challenges including poverty, weak infrastructure, limited services, and frequent climate shocks such as droughts, floods, and land degradation.

By January 2025, the National Drought Management Authority (NDMA) reported deteriorating drought conditions in most ASAL counties, with Wajir, Kilifi,

and Kwale entering the “Alert” phase due to inadequate rainfall. The combination of floods followed by failed rains disrupted agriculture, depleted water sources, and led to rising livestock losses – highlighting the growing volatility of Kenya’s climate.

ASAL counties (e.g., Turkana, Garissa, Mandera, Wajir, Marsabit) continue to experience severe drought, with successive failed rainy seasons leading to water scarcity, pasture degradation, livestock deaths, and food insecurity. The ASAL Humanitarian Network emphasize that six ASAL counties are at IPC Phase 4 (Emergency) and eight in Phase 3 (Crisis), urging urgent funding and early action to prevent worsening conditions.

The NDMA’s September 2025 food and nutrition assessment found that while the March–May long rains were near to or above average in most regions, over 1.8 million people – including 500,000 children and 100,000 pregnant women – remain in urgent need of food assistance (IPC Phase 3 or higher). Of these, approximately 179,000 are in IPC Phase 4 (Emergency), mainly in Baringo, Mandera, Marsabit, and Turkana. The 2025 lean season shows about an 80% increase in high-acute food insecurity cases compared to 2024.

The situation is expected to worsen between October 2025 and January 2026 due to forecasted below-average short rains and rising temperatures, potentially pushing 2.1 million people into IPC Phase 3 or above. Eleven ASAL counties are projected to experience increased food insecurity, with Garissa, Tana River, and Wajir shifting from IPC Phase 2 to Phase 3. A continued worsening, with a about 24% rise in projected food insecurity for the upcoming short rains compared to last year.

As of October 2025, malnutrition remains critical. Between April 2025 and March 2026, an estimated 741,884 children aged 6–59 months are expected to suffer from acute malnutrition, including 178,938 with severe acute malnutrition (SAM) and 562,946 with moderate acute malnutrition (MAM). Additionally, 109,462 pregnant and lactating women are in need of treatment.

Limited access to water and pasture is intensifying competition over resources and increasing the risk of conflict. Livestock diseases, poor pasture

conditions, and rising mortality are undermining pastoral livelihoods and household purchasing power.

As of October 2025, ASAL counties are facing a deepening water crisis. Seasonal rivers and water pans, essential for both human and livestock consumption, have dried up in numerous areas, forcing communities to travel longer distances and endure extended wait times at water points. The NDMA has warned that the scarcity of water is intensifying competition over limited resources, heightening the risk of intercommunal conflict. While county governments and humanitarian partners have initiated emergency water interventions, including borehole drilling and water trucking, these efforts remain insufficient to meet growing demand. Without scaled-up investment in climate-resilient water infrastructure, the crisis threatens to undermine livelihoods, exacerbate food insecurity, and accelerate displacement across the ASAL region.

Competition for scarce grazing land and water has escalated as rangelands dry up, resulting in more frequent conflicts among pastoralist groups. These conflicts further undermine mobility, herd health, and access to essential resources. The drought is also heightening protection risks, including sexual and gender-based violence (SGBV), early marriage, and the exclusion of persons with disabilities.

Kenya is grappling with a resurgence of cholera and escalating zoonotic disease risks, driven by worsening drought conditions that have severely limited access to safe water, sanitation, and hygiene services across several counties.

Health and nutrition indicators continue to decline, with rising risks of disease outbreaks – especially cholera – in water-scarce counties such as Tana River, Garissa, Wajir, Turkana, Mandera, Marsabit, Narok, and Kajiado. Reduced humanitarian funding has led to fewer outreach services, limiting access to immunisation, vitamin A supplementation, and primary healthcare, particularly in remote areas.

WASH breakdown triggered by floods since February–May 2025 continues to fuel cholera in flood-affected counties like Migori, Kisumu, Nairobi, and Kwale. A new cholera outbreak in Transmara West, Narok County (23 Sept–8 Oct 2025) has recorded 55 suspected cases, including 6 confirmed and 5 deaths (CFR 9.1%). This comes just weeks after the Government declared the previous

nationwide outbreak contained on 1 September. Between February and August 2025, 426 confirmed cases and 20 deaths (CFR 4.7%) were reported across Migori, Kisumu, Kwale, Mombasa, Turkana, Garissa, and Nairobi.

Zoonotic threats are also intensifying. In Garissa, brucellosis has been reported among goats, raising concerns over human transmission via unpasteurized animal products. Rift Valley Fever alerts have been issued for Garissa, Wajir, Marsabit, and Narok, where drought and sporadic rains have created ideal conditions for mosquito vectors.

The Kenya Meteorological Department forecasts continued heavy rainfall (20–50 mm and isolated > 50 mm/day) in the Lake Victoria Basin, Rift Valley highlands, and parts of Central Kenya through November, raising the risk of localized flooding, flash floods, landslides, and lightning—particularly in poorly drained or hilly areas such as Elgeyo Marakwet, Kisii, Kisumu, and Narok.

Predicted above average rains are likely to cause loss of lives, population displacement, destruction of livelihoods and infrastructure and increase in the risk of diseases outbreaks including cholera, Rift Valley fever, Malaria etc. in at least 12 counties of West Kenya and parts of Rift Valley.



*KRCS search and rescue in Elgeyo Marakwet landslide (KRCS photo)*

## Summary of county situation and impacts:

- Elgeyo Marakwet: A major landslide struck Moror and Chesongoch villages in Marakwet East Sub-County following heavy rainfall. The disaster displaced 151 households, caused 26 fatalities (12 male, 14 female), left 26 people injured, and 25 missing. Search and recovery operations are ongoing, led by the Kenya Defence Forces (KDF), National Police Service (NPS), and humanitarian partners.
- Trans Nzoia: Flooding along River Sabwani intensified after upstream dam bursts (Amani, Chepkoilel, Marinda, Chief Mutende). The floods affected 5,516 households, displaced 540, destroyed 2,354 acres of farmland, and damaged 284 houses and four schools. Relief efforts and community sensitization are underway.
- Tana River: Flooding in Lagha Tula and Bangale submerged 67 households across four villages, with livestock losses reported. One person was rescued. Road access remains disrupted: Thika-Garissa Road is flooded between Bangali and Madogo, Hola-Garissa Road is cut off at Dukanotu, and Bura-Hosingo Road is impassable except by motorbikes and four-wheel vehicles. Water levels may rise if rains persist.
- Laikipia: A dam overflow caused localized flooding, displacing 83 households. Assessments have been completed, and KRCS is working with the County Government to provide food and non-food items.
- Baringo: Heavy rains triggered flash floods and backflow into Lakes Baringo and Bogoria, affecting 71 households and destroying 33 acres of farmland in Mukutani, Baringo North, South, and Tiaty East.
- Nairobi: Urban flooding has been reported in the CBD and informal settlements. Over 200 households in Mukuru Kayaba and Kayole have been affected. Assessments are ongoing to determine support needs.

Droughts and floods in Kenya have increased protection risks for vulnerable groups, especially women, children, persons with disabilities, and the elderly. Women and girls face heightened gender-based violence, child marriage, and exploitation, while children experience school dropouts, abuse, and child labor. Displacement and loss of livelihoods drive negative coping strategies, and persons with disabilities often lack access to inclusive services. Health risks such as waterborne diseases and maternal complications are widespread, and resource-based conflicts further threaten safety. These challenges demand urgent, integrated protection measures for at-risk populations.

Humanitarian agencies, including the Kenya Red Cross, are actively coordinating relief efforts, but the situation remains critical with heightened risks of disease outbreaks, trauma and further displacement.

The October – December (OND) 2025 forecast equally predicts a 35% above average rainfall forecast in the Northwest (Turkana) and Western belt (Lake Basin) of the country. The predicted above average rains are likely to cause loss of lives, population displacement, destruction of livelihoods and infrastructure while increasing the risk of vector borne diseases outbreaks including Malaria, Cholera, etc. in at least 12 counties of West Kenya and parts of Rift Valley.

International humanitarian funding for Kenya has dropped sharply in 2025, mirroring global trends of reduced donor commitments. This decline comes at a time of rising climate and health-related risks, severely disrupting food and nutrition programmes in early 2025 and undermining the country's ability to respond to escalating humanitarian needs.

## Severity of humanitarian conditions

### 1. Impact on Accessibility, Availability, Quality, Use, and Awareness of Goods and Services

#### Health Services

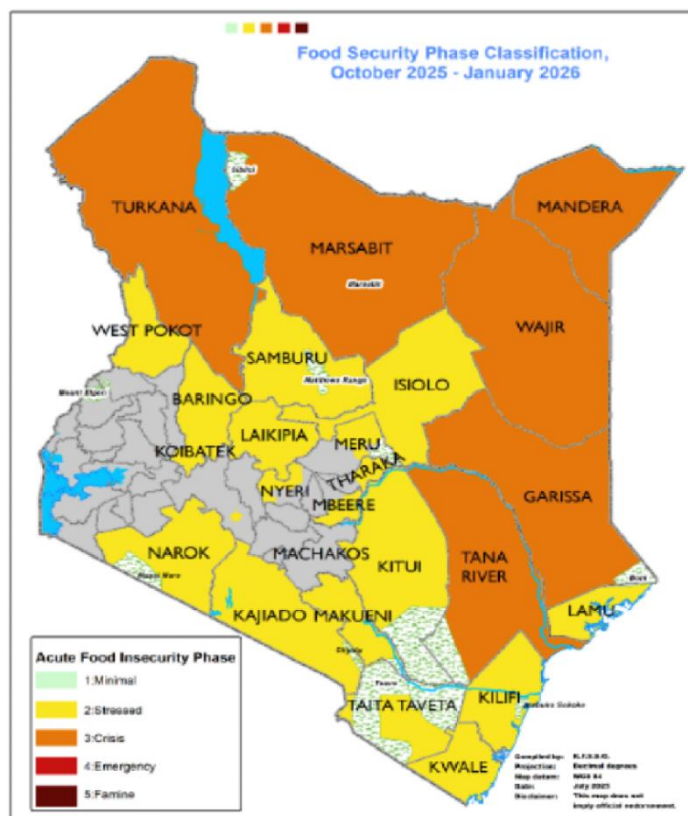
- Health systems in ASAL counties remain under strain due to the prolonged drought and resource limitations.
- Communities face reduced access to health facilities such as migration, poor roads, and insecurity hinder service delivery.
- Some facilities report stock-outs of essential medicines and nutrition commodities, while water shortages compromise infection prevention and control. Outreach and mobile clinics that serve remote areas have scaled down significantly following the end of donor support, leaving vulnerable populations without critical services.

## Water and Sanitation

- Water scarcity in ASAL regions has dried up seasonal rivers and pans, forcing longer travel and wait times at water points.
- Emergency interventions (boreholes, water trucking) are insufficient, especially for pastoralist communities and displaced populations.
- Poor access to clean water has reduced hygiene practices and increased the risk of cholera and other waterborne diseases.

## Food and Nutrition

- Acute Food Insecurity (IPC Phase 3+)
  - Jul-Sep 2025: Over 1.8 million people are in IPC Phase 3 or higher, with 179,000 in IPC Phase 4 (Emergency). Malnutrition is critical, affecting:
  - Apr-Jul 2025:
    - 741,884 acutely malnourished children (178,938 SAM; 562,946 MAM)
    - 109,462 pregnant/lactating women needing nutrition support
  - **Trend:** Food insecurity in ASAL in 2025 surpasses 2024 levels, with nearly double the number of people in IPC Phase 3+. The 2025 lean season shows an **80% increase** in high-acute food insecurity cases compared to 2024. Malnutrition prevalence remains alarmingly high, though slightly improved compared to the previous year.
- Short-Rains Season (October–December 2025 vs 2024 – Projected)
  - Oct 2025–Jan 2026 (projection): 2.1 million people in IPC Phase 3+ (2.0 million in Phase 3; 160,000 in Phase 4)
  - **Trend:** A continued worsening, with a **~24% rise** in projected food insecurity for the upcoming short rains compared to last year.
- Food assistance is limited due to funding cuts, especially in Baringo, Mandera, Marsabit, Turkana, and Garissa.



## Education and Protection Services

- Protection risks have intensified with displacement from floods and ongoing food insecurity. Women and girls face heightened gender-based violence, child marriage, and exploitation, while children have increased exposure to abuse, neglect, and child labor.
- Access to formal protection services is limited by damaged infrastructure and overstretched systems, and use remains low due to stigma and lack of information. Awareness efforts exist but are insufficient, leaving many at-risk groups without adequate support

## 2. Impact on Physical and Mental Wellbeing

### Physical Health

- Climate extremes (floods, droughts) have disrupted cropping cycles, depleted water sources, and increased livestock mortality, undermining food security and health.
- Disease outbreaks (cholera, brucellosis, Rift Valley Fever) are rising due to poor sanitation and vector proliferation.
- Landslides in Elgeyo Marakwet caused fatalities and displacement, with survivors facing overcrowded shelters and limited medical care.

### Mental Health

- Displacement, food insecurity, and loss of livelihoods are contributing to trauma, anxiety, and depression.
- Women and children, especially in shelters and drought-affected areas, face heightened psychological stress due to protection risks and uncertainty.

- Community health workers and caregivers are stretched, with reduced support and increased caseloads.

### 3. Risks and Vulnerabilities

#### Most Affected Groups

- Children under five: High rates of acute malnutrition and vulnerability to disease.
- Pregnant and lactating women: Limited access to nutrition and maternal care.
- Pastoralist communities: Loss of livestock, water scarcity, and livelihood collapse.
- Persons with disabilities: Exclusion from services and increased protection risks.
- Women and girls: Heightened exposure to SGBV, early marriage, and exploitation.
- Displaced populations: Shelter insecurity, poor sanitation, and limited access to aid.

#### Emerging Risks

- Intercommunal conflict over water and pasture in ASAL counties.
- Disease outbreaks (cholera, malaria, zoonotic diseases) due to poor WASH conditions and climate volatility.
- Protection risks: SGBV, child labor, and neglect in overcrowded camps and underserved regions.
- Infrastructure collapse: Landslides and floods damaging roads, clinics, and schools.

## CAPACITIES AND RESPONSE

### 1. National Society response capacity

#### 1.1 National Society capacity and ongoing response

The Kenya Red Cross Society (KRCS) is a leading humanitarian organisation with a robust national presence, comprising over 261,000 volunteers and approximately 600 staff operating through eight regional offices and 47 county branches. Headquartered in Nairobi, the KRCS serves as the first line of response in all sudden-onset disasters, with a mandate to support up to 150,000 affected individuals during emergencies.

The KRCS possesses strong capacity in both emergency response and development programming, with skilled personnel experienced in managing complex operations across sectors such as WASH, health and nutrition, and livelihoods. The organisation is well-equipped to implement cash transfer programmes (CTPs), with trained staff and volunteers capable of rapidly and effectively rolling out cash assistance. To ensure community-centred responses, the KRCS integrates CEA across its operations. Staff and volunteers are trained to promote meaningful participation, establish feedback mechanisms, and uphold accountability to affected populations. Supporting its operational excellence, the KRCS maintains strong systems in logistics, finance, procurement, and information and communication technology (ICT), all critical to meeting the demands of large-scale emergency appeals and sustained humanitarian action.

#### Core areas of operation



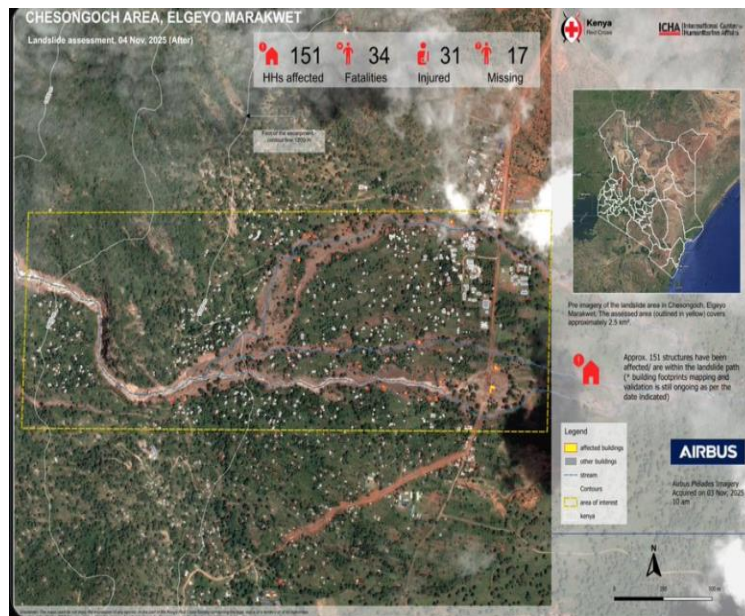
Number of staff:	<b>720</b>
Number of volunteers:	<b>262,000</b>
Number of branches	<b>47</b>

#### Response and Anticipatory Actions by KRCS:

On 7 April, the IFRC allocated CHF 970,592 via DREF to support 60,000 people across seven ASAL counties with food, cash, health, and WASH services. This followed the IPC Short Rains Assessment highlighting the failed October-November-December (OND) 2024 rains and projected poor March–May 2025 rainfall, leaving 2.2 million people food insecure, including 266,000 in an emergency phase. Through the DREF and support from other donors, the KRCS reached 17,768 households with food assistance, 1,000 households with cash transfers, 7,462 households through nutrition outreach. An additional 829 people received Mental Health and Psychosocial support (MHPSS), 46 water sources were rehabilitated, and 32,458 pupils in 103 schools were reached through the Schools Meals Programme.

On 27 May, the IFRC allocated CHF499,001 via DREF to support KRCS respond to the March-May rains and a cholera outbreak. The IFRC-DREF Operation was designed to respond to the dual crises of flooding and cholera outbreaks in Kenya, aiming to minimize loss of life and curb the spread of disease. The operation has supported a total of 375,109 people affected by these emergencies. This included a comprehensive package of lifesaving and relief activities such as: Aqua search and rescue; Emergency shelter support; Unconditional cash grants; Health interventions; Water, Sanitation and Hygiene (WASH); Risk Communication and Community Engagement (RCCE); Psychological First Aid (PFA); Community-Based Surveillance (CBS).

The operation prioritized counties with the highest numbers of displaced individuals and those most affected by the cholera outbreak. The core focus is to provide integrated humanitarian assistance to 3,000 households (approximately 15,000 people) through cash, non-food items (NFIs), and essential services that uphold dignity, protection, and well-being. Given the ongoing public health emergency in flood-affected counties, WASH and health interventions will be scaled up to reach the broader affected population. Prevention efforts, vector control, and RCCE activities will be extended to cover the full 375,109 people impacted by the crisis.



Satellite imagery reveals the extent of the landslide's destruction, with over 150 structures affected in Elgeyo Marakwet. Kenya Red Cross teams remain on the ground, providing psychosocial support, tracing services and relief assistance to affected families. (5 Nov, KRCS)

Early Action Protocols were activated on 12 September, releasing CHF 367,238 for early interventions in Kwale, Kilifi, and Kitui, targeting 150,000 people. The KRCS is implementing resilience measures including drought-tolerant seeds, pasture management, water facility rehabilitation, and cash for Water Sanitation and Hygiene (WASH). Summary as follows:

- **Kilifi County – Magarini Sub-County**, early action activities include PSP sessions for crops and livestock, market assessments for hay, seeds, and WASH items, and installation of four 10,000-liter water tanks. Farmers and livestock keepers are being targeted and registered with integrated agro-advisory services. Procurement of seeds and hay is ongoing, radio spots are airing early warning messages, volunteers have been trained and deployed, and community review meetings are underway to support EAP implementation.
- **Kwale County – Kinango Sub-County**, a PSP workshop developed localized advisories, and market assessments for hay, seeds, and WASH items were completed. Four 10,000-liter storage tanks have been installed to improve water access. Targeting and registration of farmers is ongoing, with seed and hay procurement in progress. Community review meetings and radio spots on Radio Kaya are supporting early warning dissemination, while trained volunteers engage communities to implement the EAP.
- **Kitui County – Mwingi North Sub-County**, KRCS has completed consultations with key departments and conducted PSP-based stakeholder engagement. Market assessments confirmed feasibility for cash assistance, and targeting and registration of recipients are done. Seed procurement for Tseikuru ward is awarded, and early maturing crop seeds have been distributed in Tharaka and Tseikuru. WASH infrastructure assessments are finalized, with rehabilitation and installation underway. Volunteers are trained and deployed, radio spots are airing early warning messages, and WASH installations are ongoing.

Western Kenya has been severely affected in Elgeyo Marakwet County, a major landslide in Chesongoch and Moror villages: In Elgeyo Marakwet, significant response gaps persist in search and rescue operations due to limited access and inadequate earth-moving equipment. Health services, shelter, and WASH support remain overstretched. Current actions include deploying specialized teams and air support, strengthening coordination, providing mobile clinics and psychosocial support, and continuing search and recovery efforts for missing persons. In Trans Nzoia, heavy rains and flooding have damaged key infrastructure, submerged bridges, and cut off access to markets and essential services. Additional gaps include insufficient shelter and relief supplies, rising health and sanitation risks, and weak information flow. Immediate priorities focus on restoring access roads,

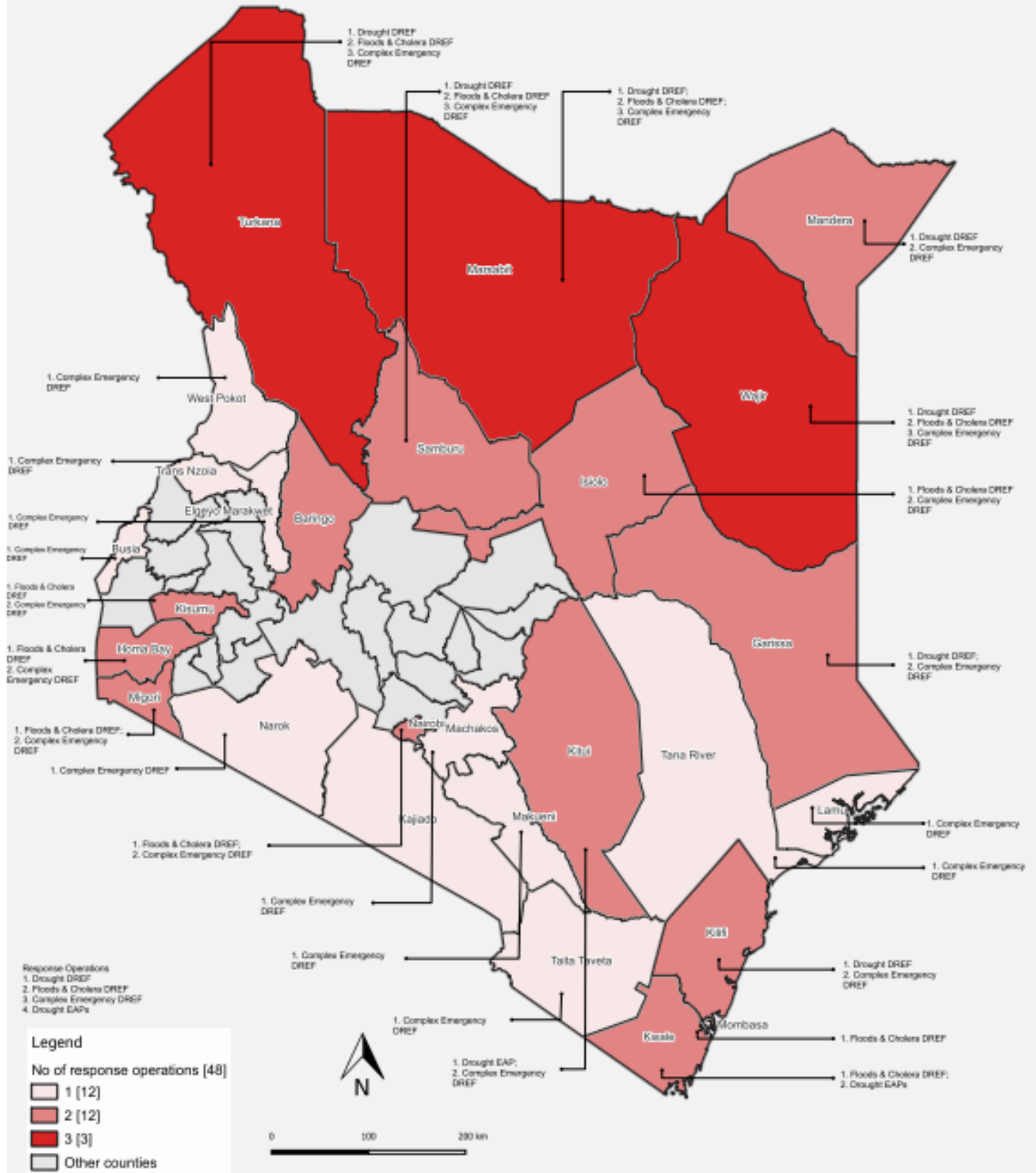
improving drainage, scaling up WASH and relief interventions, and enhancing coordination. The National Society response teams continue to deliver lifesaving interventions, conduct rapid assessments, and share key safety messages through local networks and radio stations.

The Kenya Red Cross Society (KRCS) has actively responded to the crisis by deploying drones and GIS mapping technology to support damage assessment and search operations. In addition, they dispatched seven tonnes of food and non-food items to assist 100 households, with plans underway to extend support to up to 500 households. KRCS also established a tracing desk aimed at reuniting separated families, while providing psychosocial support and paramedic triage services. Furthermore, the organization engaged local communities in discussions about relocating to safer areas and raised awareness on disaster risk reduction.

Summary of response						
	County	Sub County	WASH	In-kind	CVA	Nutrition
Drought DREF	Turkana	Turkana East	12,270 ppl		300 HHs	
	Marsabit	North Horr	16,200 ppl	500 HHs		36,320 ppl
	Samburu	Baringo North	9,820 ppl			
	Garissa	Mbalambala	15,312 ppl	500 HHs		21,270 ppl
	Wajir	Wajir West	10,301 ppl		350 HHs	
	Mandera	Mandera West	9,987 ppl		350 HHs	
	Baringo	Tiaty, Baringo South	1,110 people	500 HHs		2,410 ppl
Drought EAPs	Kitui	Mwingi North	Participatory scenario planning, distribution of drought tolerant crops to 1,500hh, rehabilitation of strategic boreholes, cash for water for 500hh			
	Kilifi	Magarini	Early warning messages, participatory scenario planning, distribution of drought tolerant seeds, market assessment			
	Kwale	Kinango and Lungalunga	Participatory scenario planning, distribution of drought tolerant seeds to 1500 farmers, early warning messages			

**4**  
Response operations

**28**  
Counties with response operations



## Coordination

The Kenya Red Cross Society (KRCS) is a core actor within the Kenya Humanitarian Partnership Team (KHPT), recognized for its extensive local reach, technical expertise, and neutral humanitarian mandate. These attributes make KRCS a trusted partner in both emergency response and resilience-building efforts across Kenya. Within KHPT a multi-agency platform that coordinates emergency preparedness and response KRCS plays a pivotal operational and coordination role. It actively contributes to joint planning, often co-leading sectoral working groups such as Health, WASH, and Protection, and collaborates closely with the UN Resident Coordinator's Office, UNOCHA, and other KHPT members to ensure coherent and timely humanitarian interventions.

KRCS also partners with key government institutions to strengthen national response mechanisms. This includes working with the National Disaster Operations Centre (NDOC) during emergencies and the National Drought Management Authority (NDMA) for drought-related coordination. As a co-chair of the Kenya Cash Working Group, KRCS plays a strategic role in advancing cash-based assistance across the country. It also collaborates with the Hunger Safety Net Programme (HSNP), a flagship government initiative providing unconditional cash transfers to vulnerable households in Arid and Semi-Arid Lands (ASALs). Additionally, KRCS works with the Ministry of Health on nutrition programs and coordinates with other ministries to support drought assessments and related interventions.



*In Marsabit County, KRCS provide food support (KRCS photo)*

## 1.2 Capacity and response at national level

In August, the government requested USD 128.6 million for the drought response under the Ending Drought Emergencies Framework. **On 1 October, nationwide relief food dispatch began, aiming to reach 2.15 million people across all 23 ASAL counties.** The Cabinet Secretary emphasised the need for collective action to ensure that no Kenyan goes hungry.

## 2. International capacity and response

### 2.1 Red Cross Red Crescent Movement capacity and response

#### IFRC membership

The International Federation of Red Cross and Red Crescent Societies (IFRC) maintain a Country Cluster Delegation for Kenya and Somalia, as well as its Africa Regional Office, both based in Nairobi. Through these

offices, the IFRC provides technical support, resource mobilisation, and strategic guidance to the KRCS, supporting both emergency response and long-term programming.

Kenya Red Cross Society works and collaborates with various National Societies (PNS) 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 PNS work closely with KRCS to develop and implement projects and programs in a variety of areas, including disaster preparedness and response, health and first aid, malaria prevention and treatment, food security and water and sanitation, community development & resilience building and blood transfusion services. Specifically for this response Finnish Red Cross are planning with KRCS to allocated support via an existing programme in Tana River.

This Emergency Appeal adopts a Federation-wide approach, engaging all PNSs present in Kenya. The Appeal leverages their collective expertise, capacities, and resources to strengthen KRCS operations in the targeted areas. To ensure transparency and collective accountability, the IFRC will lead Federation-wide reporting for the emergency response, showcasing the unified efforts of the IFRC membership in delivering humanitarian assistance to affected communities. Coordination efforts go beyond immediate relief, encompassing long-term resilience-building and National Society Development initiatives.

The KRCS is taking the lead in the coordination with the IFRC membership and shared leadership for this operation. The IFRC network's collaborative 'Way of Working' is reflected in regular coordination with both in-country and remote PNSs during strategic planning, multi-year operations, and emergency responses. The KRCS leadership reinforces this approach by promoting inclusive consultations that support harmonised response and development efforts. Membership coordination is maintained through monthly and ad hoc meetings, promoting shared leadership and strategic alignment.

### International Committee of the Red Cross

The ICRC maintains a regional delegation in Nairobi, which serves as a strategic hub for its operations across Eastern and Central Africa. In collaboration with the KRCS, the ICRC supports key humanitarian initiatives including restoring family links (RFL), economic security, and water and habitat projects in areas such as Lamu and parts of Garissa County. It also works to enhance operational safety and security through the implementation of the Safer Access Framework. The KRCS, together with the IFRC, facilitates Red Cross Red Crescent Movement coordination meetings, which serve as platforms for information exchange, strategic updates, and harmonisation of efforts related to the Emergency Appeal response and other ongoing activities involving the KRCS and PNSs operating in Kenya.

## 2.2 International Humanitarian Stakeholder capacity and response

The KRCS is a core actor within the Kenya Humanitarian Partnership Team (KHPT), recognised for its extensive local reach, technical expertise, and neutral humanitarian mandate. These attributes make the KRCS a trusted partner in both emergency response and resilience-building efforts across Kenya. The KRCS plays a vital operational and coordination role within the KHPT, a multi-agency platform that coordinates emergency preparedness and response. It actively contributes to joint planning, often co-leading sectoral working groups such as health, WASH, and protection, and collaborates closely with the UN Resident Coordinator's Office, UNOCHA, and other KHPT members to ensure coherent and timely humanitarian interventions.

The KRCS also partners with key government institutions to strengthen national response mechanisms. This includes working with the National Disaster Operations Centre (NDOC) during emergencies and the NDMA for drought-related coordination. As a co-chair of the Kenya Cash Working Group, the KRCS plays a strategic role in advancing cash-based assistance across the country in addition to collaborating with the Hunger Safety Net Programme (HSNP), a flagship government initiative providing unconditional cash transfers to vulnerable households in ASAL counties. Additionally, the KRCS works with the Ministry of Health on nutrition programmes and coordinates with other ministries to support drought assessments and related interventions.

In Kenya, a hub system functions as a network of regional coordination centres and logistics facilities that support humanitarian preparedness, response, and resilience-building. Operated by a range of actors, including the KRCS, UN agencies, and government bodies, these hubs serve both national and regional purposes. The KRCS manages eight such regional hubs across Kenya.

## 1. Gaps in the response

Kenya is currently facing a complex humanitarian crisis marked by:

- Flood-induced displacement and landslide-related fatalities in western highlands and Rift Valley.
- Severe drought in ASALs, creating deepening food and water crises.
- Enduring cholera outbreaks, compounded by WASH system failures in both drought- and flood-affected counties.

Weather outlook:

- Forecasts indicate persisting heavy rains in western regions
- Continued dry spells in the east and ASALs heightening hazard risks across the country. In the ASALs high surface temperatures continue to worsen evaporation, creating even drier conditions.

### Livelihoods:

Kenya's Arid and Semi-Arid Lands (ASAL) regions are grappling with the compounded effects of climate shocks, first floods, then failed rains, which have triggered severe food insecurity and the collapse of pastoral livelihoods. These back-to-back climate events have eroded household resilience, leaving communities vulnerable and in urgent need of support. Immediate interventions must focus on restoring household purchasing power and safeguarding pastoralist systems, which are central to the region's socio-economic fabric.

Pastoral livelihoods are currently under immense strain. The underperformance of rains has accelerated the depletion of pasture and water resources, directly impacting livestock health and productivity. This has led to reduced milk yields and diminished income from livestock sales. Rangelands continue to deteriorate, and this trend is expected to persist through January 2026, further limiting pasture availability. Additionally, the incidence of livestock diseases is rising, compounding the challenges faced by herders.

Forage production is the foundation of productive and sustainable livestock farming, and therefore pasture establishment will be prioritized before livestock numbers or output goals are expanded. Successful livestock management begins with understanding the role of forage as the primary feed source, and this requires planning the type of forage needed based on how livestock will be raised. The forage will be used primarily for grazing, hay production, or feedlot feeding, as each system requires different species, management approaches, and harvesting practices. This strategic approach supports the guiding principle that we must first be farmers capable of producing sufficient feed before focusing on livestock expansion. When pastures are well planned and managed, livestock performance improves, feed costs decrease, and the overall system becomes more profitable and resilient.

KRCS will establish or renovate pasture systems beginning with a careful evaluation of land characteristics and environmental conditions. The topography of the land influences how plants grow and how animals graze. Low-lying areas may collect water, increasing the risk of flooding, waterlogging, and disease in both forage plants and livestock. Sloping or inclined areas, on the other hand, may reduce disease pressure but require animals to use more energy to move and graze, affecting body condition and productivity. Soil structure plays an important role in determining water retention, air movement, and root penetration, all of which affect plant vigor and long-term growth. Soil texture, whether sandy, loamy, clay-based, or calcareous, influences nutrient availability and drainage. To ensure successful establishment, soil testing will be conducted before planting. This allows producers to correct nutrient deficiencies and pH imbalances, which reduces the need for costly fertilizers later. Selecting forage varieties that are compatible with local climate conditions, soil characteristics, and the intended purpose of the pasture is key to ensuring long-term productivity.

KRCS will work with State Department for livestock in drought affected areas where farmers are at risk of losing their animals as a result of depleted pasture and browse to improve livestock breeds. This will enhance

productivity in terms of milk and meat, increase disease resistance, better adoption to climate changes and substantial socio-economic benefits for farmers.

### Water, Sanitation, and Hygiene (WASH):

Kenya's arid and semi-arid land (ASAL) regions are facing critical WASH. These include extreme water scarcity, fragile infrastructure, poor sanitation coverage, regulatory gaps, contamination risks, high costs of water access, and heightened vulnerability to climate change. Access to sustainable water remains a major concern, with approximately 37% of the ASAL population lacking basic water services. Nearly one-third of water supply systems in these regions are consistently non-functional, while two-thirds experience frequent service disruptions. The situation is worsened by unpredictable weather patterns, including prolonged droughts and occasional floods, which disrupt the reliability of seasonal rivers, wells, and boreholes as water sources.

Safe water access is increasingly urgent as seasonal rivers and water pans have dried up, forcing communities to travel long distances and intensifying competition over scarce resources. Residents in ASAL regions often travel long distances to fetch water, which limits its availability for daily use. Immediate needs include emergency water trucking and borehole rehabilitation. Sanitation coverage is also critically low. While approximately 32% of Kenyans have access to improved sanitation, the figure is significantly lower in rural and ASAL areas. Open defecation remains widespread due to the lack of toilets and inadequate sewage systems, posing serious public health risks. Hygiene practices are hindered by limited access to basic facilities. Many households lack handwashing stations and soap, increasing vulnerability to waterborne diseases.

Longer-term solutions require investment in climate-resilient water infrastructure and expanded WASH programming to prevent outbreaks of waterborne diseases such as cholera. Current WASH efforts remain underfunded and underrepresented, with insufficient investment in sustainable water systems and hygiene promotion, leaving communities vulnerable to poor sanitation and disease.

The ongoing drought has further strained water availability and there is a need to support the rehabilitation of strategic community water points. These efforts should include the installation of green energy systems to enhance sustainability and ensure long-term functionality. There is a need for continued investment in climate-resilient water infrastructure to address chronic water scarcity and support climate adaptation. By integrating green energy solutions, the organization aims to significantly reduce energy costs associated with water treatment and distribution, ultimately improving food and economic security through reliable water access.

There is a need to prioritize the design of resilient water infrastructure capable of withstanding the adverse effects of climate change. This includes embedding lasting behaviour change and community engagement into all interventions. There is a need to deliver a comprehensive WASH package that not only reduces vulnerability to water-related diseases but also strengthens community resilience and supports long-term development outcomes. Promoting good hygiene practices is essential to prevent disease transmission, and all interventions will ensure that water is provided in sufficient quantities to enable proper hygiene.

### Health

Health services are urgently needed to address cholera outbreaks and rising zoonotic disease risks, including brucellosis and Rift Valley Fever. Reduced humanitarian funding has weakened outreach services, leaving gaps in immunization, maternal care, and disease surveillance. Health remains an underfunded sector, particularly in remote ASAL areas where access to primary care is extremely limited.

### Nutrition

Malnutrition is critical, with over 741,000 children under five and 109,000 pregnant and lactating women requiring treatment. Immediate needs include therapeutic feeding and nutrition-sensitive programming. Potential interventions could involve linking cash assistance to nutrition outcomes and supporting households with malnourished children to meet food needs through local markets. Nutrition services have declined due to funding cuts, leaving significant gaps in outreach and treatment. There is a need to support households with malnourished children under five years, and pregnant and lactating women meet their food needs through cash assistance. This will boost the purchasing power, hence access to their food needs from the local markets.

As of September 2025, a total of 2,456 Government of Kenya (GoK) health facilities across 21 ASAL counties and 3 urban counties are providing Integrated Management of Acute Malnutrition (IMAM) services in line with the Kenya National IMAM Protocol. These facilities are staffed with personnel who have received training, and the majority of health workers delivering essential services are equipped to implement IMAM guidelines. Routine on-the-job training is conducted to ensure adherence to protocols, complemented by targeted support supervision to maintain service quality.

Reporting is carried out through the Kenya Health Information System (KHIS) using approved IMAM service delivery tools to guarantee data integrity. All IMAM-related data is generated monthly through the IMAM database, enabling performance tracking and alignment with Sphere standards.

However, stock-out rates for nutrition therapeutic commodities remain alarmingly high at 27.4%, far exceeding the recommended threshold of <1.5%. In September 2025 alone, 611 health facilities reported stock-outs of Ready-to-Use Supplementary Food (RUSF). This situation is particularly critical in counties that lack support from the World Food Programme (WFP) and the Ministry of Health (MoH).

### Shelter

Current gaps in shelter support include inadequate provision of safe and dignified temporary housing for displaced families, especially in areas affected by floods and landslides. Affected households are living in overcrowded camps or makeshift structures without proper protection from weather, privacy, or security. There is limited attention to accessibility for persons with disabilities and older people, and gender-sensitive considerations such as separate spaces for women and girls are often missing. Shelter interventions are underfunded and poorly coordinated, leaving significant gaps in coverage and quality. These shortcomings increase exposure to health risks, protection concerns, and further vulnerability among marginalized groups.

### Protection, Gender, and Inclusion (PGI)

Affected families have migrated in search of food, water, and pasture, disrupting traditional community structures and placing additional responsibilities on vulnerable groups, especially women and children, many of whom are forced to assume household leadership roles. Persons with disabilities and the elderly face heightened risks of marginalization and being left behind. Scarcity of resources and prolonged displacement have increased protection risks, including gender-based violence (GBV), child labor, early marriage, school dropouts, and harmful traditional practices. Overcrowded shelters and insecurity in pastoralist areas further expose women, children, and other at-risk groups to violence and exploitation. Current response efforts show gaps in addressing the distinct needs of women, men, boys, girls, and persons with disabilities. Women and girls face unique challenges such as inadequate menstrual hygiene management and limited access to safe spaces, which are often overlooked in emergency contexts. There is an urgent need for tailored interventions that consider age, gender, and diversity, alongside community education on GBV prevention and reporting. Expanding the scope of response to include gendered dimensions of risk, vulnerability, and capability is critical to ensuring inclusive, equitable, and resilient humanitarian assistance.

The prolonged and high-pressure response environment is also taking a toll on the staff and volunteers working at the frontline of a response. Many are working under extreme stress, witnessing widespread suffering while facing the same economic, environmental, and security challenges as the communities they serve. Exposure to distressing situations, long working hours, and limited rest or psychosocial support can lead to fatigue, burnout, and emotional strain. Prioritizing staff and volunteer wellbeing is essential to sustain the humanitarian response.

### Community Engagement and Accountability

Community Engagement and Accountability (CEA) gaps include limited access to timely, inclusive information for remote and marginalized groups, weak feedback and complaint mechanisms, and low community participation in planning and decision-making. Communication is often one-way, with few opportunities for communities to influence interventions. Vulnerable groups such as women, persons with disabilities, and minority clans are frequently excluded, and awareness of protection risks like gender-based violence remains low. These gaps undermine trust, accountability, and the effectiveness of humanitarian responses.

## OPERATIONAL CONSTRAINTS

**Funding situation:** The main operational constraint relates to the significant need and the lack of funding available to address the needs. Dependence on emergency aid rather than sustained, structural investment limits program effectiveness and long-term resilience.

**Cholera evolution:** There is an ongoing cholera outbreak in some of the affected counties (new outbreak in Narok County). There is a risk this will spread and increase, requiring resources to be diverted from the direct flood response.

**Displacement:** Floods and droughts force population movements, straining host areas and health services. Nomadic pastoralism complicates consistent program delivery, infrastructure planning, and tracking of service needs.

**Logistics & Access Constraints:** The October November December (OND) rains continue to be experienced in different parts of Kenya. The heavy rainfall across several counties has resulted in flooding and landslides, affecting infrastructure and consequently access. Poor road networks and flood damage restrict physical access to communities, delaying supply delivery, health outreach, and monitoring activities. Remote locations elevate operational costs and reduce service frequency.

## FEDERATION-WIDE APPROACH

The Emergency Appeal is part of a **Federation-wide approach**, based on the response priorities of the Operating National Society and in consultation with all Federation members contributing to the response. The approach, reflected in this Operational Strategy, will ensure linkages between all response activities (including bilateral activities and activities funded domestically) and will assist to leverage the capacities of all members of the IFRC network in the country, to maximize the collective humanitarian impact.

The Federation-wide funding requirement for this Emergency Appeal comprises all support and funding to be channelled to the Operating National Society in response to the emergency event. This includes the operating National Society's domestic fundraising ask, the fundraising ask of supporting Red Cross and Red Crescent National Societies, and the funding ask of the IFRC secretariat.

## OPERATIONAL STRATEGY

### Vision

The IFRC and KRCS are launching a humanitarian appeal to support approximately 300,000 people across Kenya's drought affected arid and semi-arid lands (ASALs) and floods affected western regions. The response will reach the most vulnerable communities through timely, life-saving emergency response that addresses urgent needs in water, sanitation, healthcare, and livelihoods. While responding to immediate crises, we commit to linking humanitarian action with long-term resilience building, by investing in climate-resilient infrastructure, strengthening local systems, and inclusive community engagement to support recovery, adaptation, and sustainable solutions.

This Emergency Appeal has been launched to scale up assistance for drought, flood and disease affected communities. This Appeal complements ongoing interventions funded through previous DREF allocations and currently triggered Early Action Protocols, which remain insufficient in meeting the escalating needs. The Emergency Appeal includes a Federation-wide funding ask of CHF 15 million, aiming to reach 300,000 people from the most affected and hard-to-reach communities.

### Anticipated climate-related risks and adjustments in operation

In Kenya's ASAL regions and flood-prone western counties, climate-related emergencies are intensifying in frequency and severity. The ASALs are currently experiencing below-average rainfall and rising temperatures, leading to acute water shortages, pasture depletion, and increased food insecurity. Simultaneously, western regions are facing destructive floods that have displaced communities, damaged infrastructure, and triggered outbreaks of waterborne diseases. Humanitarian operations will be adjusted to respond rapidly and effectively to these evolving risks. There will be a focus to support activation of early warning systems and anticipatory action protocols, enabling faster response to predicted climate shocks.

# Targeting

## People to be assisted

The IFRC and KRCS are launching a humanitarian appeal to support approximately 300,000 people across Kenya's arid and semi-arid lands (ASALs) and western regions. These populations are among the most vulnerable, facing severe and overlapping crises including prolonged drought, acute food insecurity, disease outbreaks, risk of flooding and a significant reduction in global humanitarian funding. Targeting will be guided by Integrated Food Security Phase Classification (IPC) data, needs assessments, and community-led verification processes to ensure an inclusive and evidence-based response. Through this Appeal, the KRCS aims to alleviate immediate suffering while laying the foundation for sustainable community-driven recovery and resilience.

The KRCS will prioritise interventions in underserved, worst-hit sub-counties, identified in coordination with County Steering Groups (CSGs). The response will address urgent needs while also building long-term resilience through community-led, multi-sectoral actions. The approach integrates emergency response, durable solutions, and early actions, tailored to the unique needs of each community and implemented simultaneously for maximum impact. The response will be closely coordinated with and aligned to the Government of Kenya's drought response plan of action and strategy.

To address these complex challenges, the KRCS will implement a comprehensive, three-tiered strategy that provides immediate relief while enabling long-term resilience and reducing future vulnerability:

1. **Immediate Response:** Anticipatory actions in seven counties to reduce the impacts of droughts and floods. Includes identifying high-risk communities, providing fodder for livestock, advocating for post-harvest management, and disseminating early warning messages to mitigate the effects of emerging
2. **Durable Solutions:** Deliver life-saving emergency assistance to households in crisis or at immediate risk of deterioration. The focus will be on strengthening families' coping capacities, especially those with limited access to essential services such as food, clean water, and healthcare.
3. **Early Actions:** The KRCS will invest in anticipatory actions to reduce the impacts of drought and floods. This includes identifying high-risk communities, providing fodder for livestock, advocating for post-harvest management, and disseminating early warning messages to mitigate the effects of emerging threats. Equally, KRCS will focus on anticipatory health risk reduction and epidemic preparedness to prevent outbreaks before they occur. These actions will be coordinated at national level but also at County Government level through the KRCS local Branches and Regional Offices.

This should not be seen as merely short-term action but as part of the same, simultaneously triggered set of interventions in addressing long-term community needs with immediate and lasting impacts. The selection of the target areas, communities, and households will be guided by existing needs assessment data, IPC classifications, and community-led verification processes.

Community committees will be involved in the process of setting out the beneficiary selection criteria and choosing the beneficiaries, to ensure that only the most vulnerable person/household benefits. Through a community-based targeting approach KRCS will target the most vulnerable. These have included widows or divorced women heads of households with children under 5 years; pregnant or lactating mothers with children under 5 years; widows or divorced women-headed families with no source of income; families with severely malnourished children or children (under 5 years); the elderly; households headed by people with disabilities with no source of income; and children-headed households.

## Prioritization of activities

This operation builds upon the previously launched the Drought DREF launched on 7 April supporting 60,000 people across seven ASAL counties with food, cash, health, and WASH services. The Floods and Cholera DREF launched on 27 May reaching 375,109 people affected by these emergencies. In August drought Early Action Protocols were activated for early interventions in Kwale, Kilifi, and Kitui, targeting 150,000 people.

Further support was mobilized through an additional DREF grant allocation in November 2025 (MDKE068) to reinforce this Complex Emergency Appeal. This allocation priorities the scale up of emergency response reaching 150,000 people with an integrated response in line with the planned operations in this Operations Strategy.

Looking ahead, prioritization will be guided by ongoing detailed assessments and close coordination with partners to ensure that community needs are accurately mapped against existing support and remaining gaps. While addressing immediate needs, all sectoral interventions will be designed with a focus on durable solutions that enhance long-term resilience, self-reliance, and well-being of the most affected and vulnerable populations. To ensure sustainability and a robust exit strategy upon completion of the Appeal, the KRCS and the IFRC will align the objectives of this Emergency Appeal with the Unified Plan, which supports a range of initiatives implemented by KRCS.

### Considerations for protection, gender and inclusion (PGI) and community engagement and accountability (CEA)

The KRCS will prioritise households where the compounding consequences of prolonged food insecurity and flooding has particularly burdened women and girls, who are also at increased risk of SGBV, as well as older people and people living with disabilities, making these groups particularly vulnerable. The actions will also set up a complaint and feedback mechanism using different channels and platforms, such as community volunteers, community meetings, focus group discussions, a toll-free line and suggestion boxes and responses provided through community meetings. This will better facilitate two-way communications with the targeted communities.




*KRCS working with local communities on sustainable, durable solutions (KRCS photo)*

## PLANNED OPERATIONS

Through this Operations Strategy, the IFRC aims to support the KRCS in the response to the flooding. The Appeal will support the KRCS in scaling-up response and early recovery, as follows.

### INTEGRATED ASSISTANCE (Shelter, cash grants, livelihoods strengthening)

	<b>Shelter</b>	Female > 3,870	Female < 3,705	169,000 CHF
		Male > 3,780	Male < 3,645	Target: 15,000 people
<b>Objective:</b>	Provide safe, dignified and appropriate shelter solutions for displaced households or affected by the complexity of the situation			
<b>Priority Actions:</b>				

In response to floods and landslides an emergency shelter response will be launched to meet the needs of the most vulnerable displaced households in the western affected Counties. The response includes the distribution of emergency shelter and essential household items (EHIs) and a demonstration on their safe use. This response will be part of an integrated package of essential household items, emergency WASH, and health items.

Activities include:

- Mobilise trained and equipped volunteers to support in assessment, targeting, beneficiary selection and technical guidance on the use of the items distributed.
- Conduct rapid needs assessments in high-risk counties to identify priority households.
- Procurement and distribution of emergency shelter and EHIs to reach 3,000 households:
  - 6,000 tarpaulins to provide temporary shelter for displaced families.
  - 6,000 blankets sleeping mats to ensure warmth, improve comfort and dignity.
  - 3,000 kitchen sets to enable safe food preparation and restore basic cooking capacity.
- Any designated sleeping spaces will be gender sensitive, the structures are carefully planned with Relief Committees consisting of personnel from Directorate of Gender and Cultural Services.
- Logistics efforts focus on procurement, transport, and storage of supplies, with distribution points set up in high-risk counties.

	<b>Multi-purpose Cash</b>	Female > 18: 9,030	Female < 18: 8,645	1,576,000 CHF
		Male > 18: 8,820	Male < 18: 8,505	Target: 35,000 people

**Objective:** To enable vulnerable households to meet their immediate needs with dignity and flexibility

**Priority Actions:**

**Multi-purpose cash**

KRCS will support households with malnourished children under five, and pregnant and lactating women, through unconditional cash assistance to improve food access via local markets. Integrated medical outreaches will address nutritional needs, while WASH interventions will ensure access to safe water and promote hygiene to prevent waterborne diseases. Livestock support will help curb zoonotic disease spread and strengthen household resilience against flood-related shocks.

- 7,000 households will receive multipurpose cash grants over three months via financial service providers.
- The programme will coordinate with the Kenya Cash Working Group for market assessments and monitoring.
- Target areas are selected based on high malnutrition caseloads, with beneficiaries identified through clinic registers in collaboration with local health facilities.
- Targeting will focus on families with children under five with moderate or recovered severe acute malnutrition, and at-risk pregnant and lactating women.
- Coordination with government and humanitarian actors will ensure efficiency, avoid duplication, and enhance impact.
- Include PGI measures to mitigate GBV risks and address protection needs. Ensure cash distribution points are safe and accessible and provide clear information on GBV prevention and available services. Train staff to identify and refer protection cases through established pathways, while promoting community awareness on protection and reporting mechanisms. Apply inclusive targeting that considers the specific needs of women, men, boys, girls, and persons with disabilities.



## Livelihoods

Female > 18: 12,900

Female < 18: 12,350

3,517,000 CHF

Male > 18: 12,600

Male < 18: 12,150

Target: 50,000 people

### Objective:

To protect, restore and diversify livelihoods through anticipatory action, emergency support, and recovery support that reduces reliance on negative coping strategies

### Priority Actions:

#### In-kind food support

In response to the ongoing drought in Kenya's Arid and Semi-Arid Lands (ASALs), there will be in-kind food distributions, and the school feeding programme is being scaled up to provide critical food assistance to affected communities.

- Targeting and registration in five counties, supported by staff and volunteers,
- Procurement and distribution of food for both school feeding and general food distribution (GFD), ensuring continuity of nutrition support for learners and vulnerable households – 10,000 pupils for two terms.
- Logistics support using light weight vehicles and trucks to reach last-mile locations.
- Post-distribution monitoring will also be conducted with dedicated staff and volunteer support to ensure accountability and effectiveness.

#### Durable solutions for livelihoods

The ongoing drought in Kenya's ASALs has severely affected food security, water access, and livelihoods, prompting a multi-sectoral response to protect communities and build resilience. This plan integrates support across agriculture, water, nutrition, health, environment, and youth empowerment targeting vulnerable groups such as women and people leaving with disabilities. Key activities include fodder and seed distribution, irrigation rehabilitation, nutrition screening, hygiene promotion, and skills development, backed by strong coordination and capacity building.

- **Livestock Support:** KRCS will provide fodder (via commodity vouchers where feasible), promote pasture management and drought-resilient breeds, and distribute 1,500 fodder tree seedlings, assorted fruit seedling and grass seeds. Farmers with existing water sources will be targeted, the intervention seeks to repair existing boreholes or water sources to produce sufficient yield. The intervention seeks to make a quick impact on 2,000 vulnerable livestock farming families located across the agro pastoralists zone affected by the drought and threatened by the resource-based conflict by distributing animal fodder, including barley and concentrate, to help protect their animals and restore their livelihoods while generating pasture for the forecasted below average rainfall season
- **Crop Production and Kitchen Gardening:** Support includes post-harvest management, drought-tolerant seed distribution (cowpeas, green grams, millet), assorted vegetable and fruit seedlings, conical garden kits, and drip irrigation for 80 farms. Technical guidance on pest and weed control will be provided.
- **Environmental:** Assessment on pesticide risks, training on environmental stewardship, and establishment of school-based disaster and environmental clubs, along with tree nurseries in schools and communities.
- Conduct sensitization and awareness campaigns on available skills-building opportunities, followed by mapping, targeting, verification, and selection of 40 vulnerable youth based on established criteria. Once identified, the selected youth will be registered and enrolled in vocational training centers (VTC), and upon completion, startup kits will be procured and distributed to support their transition into income-generating activities.
- Conduct an engineering survey and design review of the irrigation system and WASH components, upgrading the existing solar power system to optimize its full capacity, and rehabilitating the rising main pipes. It also includes installing distribution water tanks, constructing distribution lines and water points for farmers, and building cattle troughs. Additionally, rainwater harvesting systems will be installed at the school, operators will be trained on system operation and maintenance, and Irrigation Water Users Associations will be formed to ensure sustainable management of the infrastructure.

- Advocate for improved post-harvest crop management to minimize losses using the Participatory Scenario Planning (PSP) approach following the release and dissemination of seasonal county forecasts. It also promotes crop diversification through PSP sessions, with one session per county across three counties. Additionally, the project will procure, target, and distribute drought-tolerant seeds such as cowpeas, green grams, and millet—to 750 households per county at a value of KSh 1,500 per household, considering the use of commodity vouchers where feasible to facilitate seed procurement.
- Early warning and community engagement: Risk information will be shared through outreach, radio spots, and printed materials. Community participation will be strengthened using KRCS feedback mechanisms.  
Promote Inclusive and participation in the livelihood's activities. Implement targeted actions to ensure women and girls, persons with disabilities, and other marginalized groups are actively involved in livelihood programs.

## HEALTH & NUTRITION

 <b>Health &amp; Care</b>	Female > 18: 77,400	Female < 18: 74,100	2,420,000 CHF
	Male > 18: 75,600	Male < 18: 72,900	Target: 300,000 people

### Objective:

To ensure access to essential health services for affected communities, with a focus on maternal and childcare, as well as nutrition services in underserved areas

### Priority Actions:

These interventions aim to contain outbreaks rapidly, safeguard public health, and minimize the compounding impact of drought on already-stressed health systems.

### **KRCS provides community-based disease prevention and health promotion, focusing on anticipatory risk reduction and epidemic preparedness to prevent outbreaks before they occur.**

- Scale up health, nutrition, and hygiene education to reach 300,000 people, aiming to prevent disease, reduce malnutrition risk, and strengthen resilience.
- Implement community-based disease surveillance and early warning systems through trained volunteers and health workers, focusing on outbreaks like cholera and RVF.
- Preposition essential WASH including water treatment chemicals, PPEs and IPC commodities for household & health facilities, ORS and pharmaceutical commodities for community level and facilities in high-risk counties for rapid response.
- Activate KRCS surge teams (nurses, clinical officers, public health officers, pharmacists, doctors, and nutritionists) to support county governments during disease outbreaks and other drought associated health emergencies.
- Conduct RCCE campaigns promoting hygiene, safe water use, and responsible livestock practices ahead of the rainy season.
- Support preventive animal health measures, including targeted livestock vaccinations (e.g., RVF, rabies) in collaboration with the Directorate of Veterinary Services.

### **KRCS will scale up integrated, life-saving health and WASH interventions to reduce morbidity and mortality linked to cholera and other drought-exacerbated diseases.**

- Integrated human and animal health and nutrition outreaches by leveraging on the routine MoH activities and KRCS support thus delivering emergency care, rehydration therapy, vaccination, and maternal-child health services in affected communities.
- Strengthen epidemic detection and response via rapid teams, active case finding, sample collection, and IPC support at health facilities.

- Deploy hygiene promotion teams to improve water access and sanitation in areas with diarrheal disease outbreaks.
- Intensify RCCE campaigns targeting high-risk populations with disease prevention messages.
- Support livestock disease surveillance and treatment (e.g., brucellosis, rabies, RVF) to prevent zoonotic transmission to humans.


#### **Acute Malnutrition is addressed in the target population in ten counties**

- Preposition health and nutrition supplies in regional hubs and conduct integrated nutrition outreaches (Super cereal Plus, Ready to Use Supplementary foods, Therapeutic spread).
- Actively identify and refer acute malnutrition cases to health facilities.
- Sensitize CHVs and caregivers on Family MUAC for community nutrition surveillance and county teams on Maternal, Infant, and Young Child Nutrition in Emergencies, including monitoring of Breast Milk Substitutes Act violations.
- Targeted support supervision will be routinely done to ensure service quality.
- Reporting will conform with the Kenya Health Information System where tracking can be done to ensure quality and alignment with the sphere standards.

#### **Psychosocial support provided to the target population as well as to RCRC volunteers and staff**

- Support to MHPSS counsellors.
- Conduct community Mental Health and Psychosocial Support sessions, engaging local associations and community platforms (including religious and education stakeholders).
- Conduct debriefing sessions for the response teams and volunteers.

### **WATER, SANITATION AND HYGIENE (WASH)**

	<b>Water, Sanitation and Hygiene</b>	Female > 18: 77,400	Female < 18: 74,100	4,701,000 CHF
		Male > 18: 75,600	Male < 18: 72,900	Target: 300,000 people
<b>Objective:</b>	<b>To improve access to safe water and sanitation, reduce disease risks, and promote hygiene practices in affected communities.</b>			
<b>Priority Actions:</b>				

### Community managed water sources giving access to safe water are provided to target population

- Scale-up support to reach 300,000 people with improved access to water through the construction, rehabilitation, and equipping of key water supply schemes in strategic acute drought-hit areas and training of the water management representatives including boreholes, shallow wells, and water pans. Include solarization of water systems for sustainability. Including repair and repositioning of fast-moving parts for strategic community water points.
- Rehabilitation of riverbank irrigation systems.
- Support community-led management and maintenance of water systems. Communities will benefit from trainings and tools to address water scarcity and improve water management and safety - to develop water harvesting and conservation techniques that will support the most relevant livelihoods, including efficient irrigation systems for household or community gardens.

### Hygiene related goods (NFIs) which meet SPHERE standards are provided to the target population

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

### Hygiene promotion activities which meet SPHERE standards in terms of the identification and use of hygiene items provided to target population

- Scale up support to reach 300,000 people with hygiene promotion. Train hygiene promoters on hygiene promotion as Trainer of Trainees for participatory hygiene and sanitation transformation emergency response (PHASTER) methodologies. Sensitize Community Health Volunteers (CHVs) on hygiene and sanitation promotion
- Conduct thematic hygiene promotion campaigns targeting, institutions and communal areas in the target areas for Water, Sanitation, and Hygiene.
- Roll out Community-Led Total Sanitation (CLTS) as a participatory approach to eliminate open defecation by triggering collective behaviour change.
- Support school WASH programs and hygiene promotion in IDP camps.
- Active CBS and increased vigilance on water quality and sanitation practices during disease outbreaks in branches not covered already.

## PROTECTION AND PREVENTION (Protection, Gender & Inclusion (PGI); Community Engagement & Accountability (CEA); Disaster Risk Reduction (DRR))

 <b>Protection, Gender and Inclusion</b>	Female > 18: 77,400	Female < 18: 74,100	73,000 CHF
	Male > 18: 75,600	Male < 18: 72,900	Target: 300,000 people

**Objective:** To ensure equitable access to assistance and safeguard the dignity, safety, and rights of vulnerable groups, including women, children, and persons with disability

#### Priority Actions:

- Gender analysis to inform sectors.
- PGI trainings for staff and volunteers on gender and SGBV, child protection and disability inclusion, safe referrals and survivor centred approach.
- Procurement and distribution of dignity kits for young girls and women for menstrual health management.
- Top up for persons with disabilities in the MPCA to cover additional barriers and costs during humanitarian crises including: accessibility challenges, accompaniment/proxy, health related expenses and heighten protection risks.

- Child protection:
  - Support with referrals for unaccompanied and separated minors and other child protection cases.
  - Support food for schools in Livelihoods and follow up on drop-out cases.
  - Awareness sessions on Child protection.
- Emergency fund for protection cases and access to services.
- Prevention and response on SGBV:
  - GBV mitigation actions in sectors and particularly with shelter, MPCA and livelihoods.
  - Update of referral pathways and provide safe referrals for protection cases.
  - Provision of Dignity kits with focus on sustainable menstrual solutions.
  - Sensitization sessions on SGBV particularly on available services and harmful practices particularly on early marriages.
- Safeguarding:
  - Briefings on CoC and Safeguarding Policies.
  - Focal Points for safeguarding designated and SoPs/guidance to respond to cases.
  - Communications materials and sensitization actions for communities.
  - Gender and Disability feedback mechanisms established.


 <b>Community Engagement and Accountability</b>	Female > 18: 77,400	Female < 18: 74,100	53,000 CHF
	Male > 18: 75,600	Male < 18: 72,900	Target: 300,000 people

**Objective:**

To ensure transparency, inclusivity, and community ownership throughout the operational process.

**Planned Actions:**

- CEA will be integrated throughout the response to ensure meaningful participation of affected communities. Engagement will use KRCS tools and approaches to capture feedback and address gaps promptly.
- Communities will participate through feedback desks in temporary camps, a toll-free complaint line, focus group discussions, and household visits. These mechanisms will inform needs assessments and promote awareness of feedback channels.
- The exit strategy will include community consultations, lessons-learned workshops, and a final evaluation incorporating community feedback on implementation and impact

 <b>Risk Reduction, climate adaptation and Recovery</b>	Female > 18: 77,400	Female < 18: 74,100	456,000 CHF
	Male > 18: 75,600	Male < 18: 72,900	Target: 300,000 people

**Objective:**

To reduce vulnerability to climate-induced shocks and support long-term resilience through proactive and recovery-oriented interventions.

**Priority Actions:**


### Disaster Risk Reduction (DRR) Activities

- The planned DRR interventions aim to strengthen the preparedness of KRCS branches and community disaster response teams in affected counties through risk mapping, early warning, and early action systems.
- Activities will build skills and capacities for contingency planning, coordination with authorities, and integration of food safety measures.
- Community-led vulnerability and capacity assessments (VCAs) will guide risk reduction plans and link to long-term development programming.
- KRCS will roll out multi-hazard early warning systems and apply lessons from previous drought responses to ensure community-driven action.
- Additional efforts include climate awareness campaigns in schools and communities, promotion of bylaws and policies for disaster preparedness, and tree planting initiatives to support reforestation and livelihoods.
- All interventions will adopt climate-smart and environmentally sustainable approaches in line with IFRC's Green Response framework.

### Early Actions

- The interventions aim to strengthen disaster preparedness and resilience at community, county, and national levels through early warning systems and rapid response measures.
- KRCS will build capacities of communities, government, and partners to anticipate and act on risks, reducing disaster impacts.
- Updated, hazard-specific county risk profiles will guide targeted preparedness strategies, while climate risk advisories will be disseminated via radio, social media, local structures, schools, and markets to ensure timely information reaches vulnerable populations.
- The Technical Working Group on Anticipatory Action (TWG-AA) will coordinate actors, harmonize approaches, and ensure decisions are informed by credible triggers and risk analysis.
- KRCS will disseminate early warning messages, advocate for evacuation where necessary, hold community review meetings.

## ENABLING APPROACHES (National Society Strengthening, Coordination & Partnerships and Secretariat Services)

	<b>National Society Strengthening</b>			1,355,000 CHF
---	---------------------------------------	--	--	---------------

**Objective:** To enhance KRCS's institutional and operational capacity for effective humanitarian response and long-term resilience

### Priority Actions:

The approach to National Society strengthening under this Emergency Appeal is twofold: a) To ensure that the necessary capacities are in place to implement response and preparedness activities through reinforced National Society branches; and b) To contribute to the longer-term National Society Development Plan

### Strengthen National Society disaster management capacity

- Upgrade branch infrastructure (offices, vehicles, warehouses).
- Strengthen preparedness through contingency planning, simulations, and stockpiling.
- Train and deploy National Disaster Response Teams (NDRTs).
- Build branch-level Emergency Operations Centre (EOC) capacity.

### Volunteer, Youth and Staff Development

- Enhance volunteer support with training, equipment, and psychosocial care.

- Strengthen youth structures and integrate them into operations.
- Train staff in emergency response, coordination, PGI, CEA, and technical areas.

**Digital transformation**

- Invest in data systems for collection, analysis, and reporting.
- Improve digital connectivity between HQ and branches.
- Upgrade digital tools for finance, procurement, and logistics.
- Expand mobile data collection for feedback, assessments, and monitoring.

**PMER/MEAL and information management**

- Support analysis and evaluations to inform programming and advocacy.
- Streamline data collection and reporting for accuracy and timeliness.
- Conduct after-action reviews and lessons learned workshops at branch level.



**Coordination and Partnerships**

47,000 CHF

**Objective:**

To ensure harmonized, efficient, and inclusive humanitarian action through strategic collaboration with Movement partners, local authorities, and other humanitarian actors

**Priority Actions:**

Effective coordination is key to the KRCS-led response. IFRC and in-country PNSs provide tailored support under the Ways of Working approach, while KRCS engages government, UN agencies, and humanitarian clusters to align efforts with national priorities and community needs. Movement cooperation is strengthened through regular coordination guided by the Seville Agreement 2.0, ensuring a unified and efficient response.

**Membership Coordination**

- IFRC and in-country Partner National Societies (American, British, Danish, Finnish, Italian, and Norwegian Red Cross) support KRCS with technical, financial, and in-kind contributions based on their expertise. Coordination follows the Ways of Working approach, using established platforms to ensure a unified response, joint planning, and effective information sharing.

**Engagement with external partners**

- KRCS and IFRC collaborate with government ministries, humanitarian clusters, and coordination platforms to align interventions with national priorities, avoid duplication, and leverage technical expertise. Partnerships are strengthened through joint assessments, outreach to private and non-traditional donors, and advocacy to ensure community needs are represented.

**Movement Cooperation**

- KRCS ensures regular operational coordination with IFRC, ICRC, and participating National Societies, guided by the Movement Coordination Agreement and Seville Agreement 2.0, to align support and actions across Movement partners.



**IFRC Secretariat Services**

634,000 CHF

**Objective:**

To ensure an effective and coordinated international response

**Priority Actions:**

To deliver a coordinated and impactful response, IFRC and KRCS are implementing strategic support measures. These include strengthening partnerships and resource mobilization, enhancing risk management and logistics, and investing in human resource development. Communications are being scaled up to boost visibility and manage reputational risks, while upgraded data systems enable real-time analysis and informed decision-making. Robust PMER frameworks ensure accountability and track progress across all response levels.

### **Strategic Partnerships & Resource Mobilization (SPRM)**

- Coordinate with Movement partners, donors, and governments to support the Emergency Appeal, including pledge management.
- Develop high-quality proposals and maintain regular donor engagement through updates, calls, field visits, and meetings.
- Strengthen partnerships locally and internationally to secure financial and technical support.

### **Risk management**

- Support KRCS in implementing coordinated accountability and safeguarding measures.
- Strengthen business continuity planning and track emerging risks with mitigation strategies.

### **Logistics**

- Coordinate in-kind donations and support KRCS in supply chain management and timely delivery.
- Assist with procurement and bilateral logistics, including warehousing and mobilization.

### **Human resources – surge deployments**

- Build IFRC team capacity and promote HR development across Partner National Societies.
- Mobilize global and regional surge personnel to reinforce KRCS operations and coordination.

### **Communications**

- Strengthen disaster data systems and real-time community insights through feedback mechanisms.
- Build KRCS capacity in digital tools and data management for improved decision-making.

### **IM and data analysis**

- Support Federation-wide PMER systems to ensure accountability and guide programming.
- Conduct regular monitoring, midterm and final evaluations, and structured data collection

### **Planning, Monitoring, Evaluation & Reporting (PMER)**

- Support Federation-wide PMER systems to ensure accountability and guide programming.
- Conduct regular monitoring, midterm and final evaluations, and structured data collection.

### **Security:**

- The IFRC security plans will apply to all IFRC staff throughout the operation. Area specific Security Risk Assessment will be conducted for any operational area should any IFRC personnel deploy there; risk mitigation measures will be identified and implemented.
- IFRC Regional and Global Security Units will coordinate with IFRC HoD to identify and support additional safety and security needs.
- All IFRC must, and RC/RC staff and volunteers are encouraged, to complete the IFRC Stay Safe e-learning courses, i.e. Stay Safe 2.0 Global edition Level 1-3.
- Insurance of volunteers involved in the operation should be ensured.

## **Risk management**

IFRC applies a proactive risk management approach guided by its Risk Management Policy and Framework. Clear procedures for identifying, reporting, and mitigating risks are in place, with defined roles across the Emergency Appeal. Operational teams, supported by risk champions, maintain a country-level risk register reviewed monthly by the regional coordinator. Security is prioritized through completed risk assessments and mitigation strategies. All IFRC personnel must comply with Minimum Security Requirements and are encouraged to complete Stay Safe e-learning courses. Volunteer insurance is also ensured.

<b>Risk</b>	<b>Likelihood</b>	<b>Impact</b>	<b>Mitigating actions</b>
Counties with resource-based conflicts and borders with	Medium	Medium	<ul style="list-style-type: none"> <li>• Ensure that KRCS teams supporting the response in the counties are well-trained on safer access to enhance their access during interventions.</li> </ul>

neighbouring countries have a high risk of insecurity			
Insecurity and conflicts	Medium	Medium	<ul style="list-style-type: none"> <li>• Security and risk management measures should be taken to ensure that staff and volunteers are not subjected to increased risk because of insecurity and local conflicts. Further, mitigation strategies should be employed to reduce the risk of resource-based conflicts in targeted communities – this will be linked to providing increased access to water and pasture, strengthening security and early warning systems.</li> </ul>
Cholera outbreaks expand to counties being affected by the floods.	High	Medium	<ul style="list-style-type: none"> <li>• The KRCS adopted measures to ensure the continued sensitisation of communities on waterborne diseases. Subsequently, there is an ongoing response in counties affected by cholera.</li> </ul>
Modality mismatch (e.g. CVA in non-functional markets) reduces impact and creates frustration	Low	High	<ul style="list-style-type: none"> <li>• Use market functionality and community preferences to guide delivery modality selection</li> <li>• Monitor and adapt delivery models.</li> </ul>
Lack of funding	Medium	Medium	<ul style="list-style-type: none"> <li>• Build a prioritisation of activities by location. Ensure, using CEA, that the Movement can communicate with communities on any prioritisation/ targeting required.</li> </ul>
Exclusion of vulnerable groups due to targeting issues or social bias	Low	High	<ul style="list-style-type: none"> <li>• Use intersectional vulnerability analysis and community feedback to refine targeting and delivery modalities</li> </ul>
Protection risks, especially for women, children, and persons with disabilities	Medium	High	<ul style="list-style-type: none"> <li>• Integrate protection across activities</li> <li>• Train staff and volunteers on key principles for PGI</li> <li>• Coordinate with protection actors working in the communities</li> </ul>
Risk of SEA or harassment	High	High	<ul style="list-style-type: none"> <li>• Train staff and volunteers on safeguarding</li> <li>• Ensure people are aware of reporting and response mechanisms</li> <li>• Signature of CoC and PSEA Policy for all staff and volunteers</li> <li>• Mandatory briefing on safeguarding to all staff and volunteers</li> <li>• Gender and disability Reporting channels established</li> </ul>

## Quality and accountability

IFRC will lead transparent, Federation-wide reporting to highlight collective humanitarian efforts. Support will be provided to strengthen KRCS's PMER unit through training in data quality, ethics, planning, monitoring, and reporting. regular use of reporting tools, such as, situation reports and operational updates, will ensure transparency, inform decision-making, and engage communities and donors. Documentation, including photos and reports, will serve as evidence for aid delivery, feedback, and advocacy. Continuous monitoring will be conducted at country level, including updates to the operational risk register. Indicators will be drawn from the IFRC Network Indicator Bank to ensure standardized tracking across National Societies.

Outcome/output	Indicators	Target
<b>Integrated Assistance</b>		
<b>Shelter</b>		
Outcome 1: Displaced households and those affected by the complexity of the situation are supported with safe, dignified, and context-appropriate shelter solutions that meet their immediate needs.	% of targeted displaced households provided with emergency shelter solutions that meet minimum safety, dignity, and adequacy standards.	85%
Output 1.1: Emergency shelter materials (e.g., tarpaulins, shelter kits) and essential household items are distributed to targeted displaced households.	# of displaced people receiving emergency shelter materials and or essential household items.	15,000
Output 1.2: Technical support and guidance on safe shelter construction and site planning are provided to affected communities.	# of the KRCS Train KRCS staff and volunteers on shelter construction to support vulnerable people in setting up shelters.	35
<b>CVA</b>		
Outcome 3: Crisis-affected households meet their immediate basic needs and strengthen their resilience through access to Multi-purpose Cash (MPC) and complementary services	% of targeted crisis-affected households that meet their basic needs through Multi-purpose Cash (MPC) assistance and report improved coping capacity due to access to complementary services.	85%
Output3.1: Targeted vulnerable households receive timely and adequate Multi-purpose Cash (MPC) transfers to meet essential needs such as food, water, healthcare, and shelter.	# of people provided with unconditional cash assistance.	35,000
	% of households who report being able to meet the basic needs of their households, according to their priorities (minimum expenditure basket).	85%
<b>Livelihoods</b>		
Outcome 2: Livelihoods are protected, restored, and diversified through anticipatory action, emergency assistance, and recovery support, reducing reliance on negative coping strategies and enhancing household resilience.	% of targeted households reporting improved livelihood security and reduced use of negative coping strategies (e.g., selling productive assets, reducing meals, child labour).	85%
Output 2.1 Total number of individuals who received food assistance (e.g., food parcels, vouchers, school meals) from the National Society.	# of pupils receiving a daily meal in schools for two terms.	10,000
Output 2.1 Improved agricultural practices: Distribution of inputs, training in climate-smart and sustainable practices.	# of households with access to emergency feed and water supply for livestock.	2,000
	# of households reached with essential on-farm and off-farm inputs/materials/tools for agricultural/food production.	2,000
Output 2.2 - Enhanced livelihood diversification and income opportunities: Vocational training, small business support, and promotion of alternative income sources	# of people provided or supported with formal or informal technical, vocational or professional education or training opportunities - in climate-smart agriculture, pest control, post-harvest handling, ploughing hours, and sustainable land use practices.	400
<b>Health and Care and Nutrition</b>		
Outcome 4: Affected communities, particularly in underserved areas, have sustained access to essential health services, with a strong focus on maternal and child healthcare as well as nutrition support.	% of targeted population in underserved areas accessing essential health, maternal and child healthcare, and nutrition services on a regular basis.	85%
Output 4.1 Mental Health and psychosocial support - Psychosocial support provided to the target population as well as to RCRC volunteers and staff.	# of people in the targeted population provided with psychosocial support services.	5,000
	#of RCRC volunteers and staff provided with psychosocial support services	600
Output 4.2 Community and Primary Health care - Mobile health teams deliver comprehensive, integrated health and nutrition services, to vulnerable groups in targeted regions of Somaliland and Puntland.	# of people reached through intensified Risk Communication Community Engagement activities targeting high-risk populations with messages on disease prevention and control.	300,000

Output 4.2: Affected communities, particularly in underserved areas, have sustained access to essential nutrition support.	# of target communities reached through preposition health and nutrition supplies in the regional hubs (including MUAC tapes, kits, dignity kits, and assorted pharmaceutical supplies). Conduct nutrition integrated health outreaches.	10,000
<b>WASH</b>		
Outcome 5: Access to safe water, improved sanitation, and hygiene practices is enhanced in affected communities, contributing to reduced disease risks and improved public health outcomes.	% of households in targeted communities with sustained access to safe drinking water, improved sanitation facilities, and practicing key hygiene behaviours (e.g., handwashing with soap at critical times).	80%
Output 5.1 Vulnerable and hard-to-reach communities have improved and sustainable access to safe water through the construction or rehabilitation of boreholes, shallow wells, and sand dams, integrated with solar-powered systems.	# of people provided with improved access to safe and sustainable water sources (disaggregated by sex, age, and location).	75,000
	# of safe and accessible water infrastructure, water points for cooking and drinking water which are culturally appropriate, constructed or rehabilitated, including earth dams.	14
Output 5.2 Vulnerable households receive hygiene and dignity kits, while community-led hygiene promotion campaigns strengthen positive sanitation and hygiene behaviours to reduce disease risks	# of people covered with hygiene promotion activities.	300,000
	# of families supported with WASH NFIs	4,000
	# of family hygiene kits distributed	4,000
<b>Protection and Prevention</b>		
<b>PGI</b>		
Outcome 6: Communities are empowered to identify and respond to the distinct needs of the most vulnerable, including disadvantaged and marginalized groups, through inclusive and protective approaches that promote dignity, equity, and safety.	% of community-led initiatives or mechanisms that actively include and address the needs of vulnerable, disadvantaged, and marginalized groups.	80%
Output 6.1: Protection, gender, and inclusion are systematically integrated across all program interventions to safeguard the dignity, safety, and rights of affected populations and ensure that no one is left behind.	# of people reached by protection, gender and inclusion programming.	300,000
	# of women and girls that receive dignity kits	3,000
	# persons with disabilities that received targeted support	150
	# protection cases referred to available services	350
	# of staff and volunteers trained to apply the PGI Minimum Standards in emergency and development programming, disaggregated by sex, age, and disability	250
Output 6.2 PSEA - Emergency response operations prevent and respond to sexual and gender-based violence and all forms of violence against children	% of volunteers and staff trained on PSEA and basic SGBV awareness and survivor-centred response, including receiving and managing sensitive SGBV (including safeguarding)-related disclosures	100%
	# of people that receive SGBV and Child protection awareness sessions	5,000
<b>CEA</b>		
Outcome 7: People and vulnerable communities affected by the complex situation are empowered to meaningfully participate in decisions that impact their lives and trust the IFRC network to act in their best interests through transparent, inclusive, and accountable engagement mechanisms.	% of people surveyed who feel the National Society's services meet their most important needs and provide useful support	80%
Output 7.1: Feedback Mechanisms Number and type of methods established to collect feedback from the community.	% of operational feedback received and responded to by the National Society.	80%
	# of staff, and volunteers trained on community engagement and accountability	250
	# of people reached through methods that enable communities to participate in the planning and management of services, programmes, and operations	10,000

## Risk Reduction, climate adaptation and Recovery

Outcome 8: Vulnerability to climate-induced shocks is reduced and long-term community resilience is strengthened through proactive, adaptive, and recovery-oriented interventions.	% of targeted households reporting improved capacity to anticipate, absorb, and recover from climate-induced shocks.	60%
	# of people reached with disaster risk reduction.	10,000
	# of people reached through early warning messages.	10,000

## Enabling Approaches

### Partnerships and Coordination

Outcome 9: Technical and operational complementarity among the IFRC's membership and with the ICRC is enhanced through cooperation with external partners.	# of regular coordination mechanisms with all Movement partners	Monthly
	# of Partners meeting to brief on the Appeal	2
	# of Donors meeting to brief on the Appeal	1

### National Society Development

Outcome 10: National Societies are prepared to effectively respond to epidemics/emerging crises, and their auxiliary role in providing humanitarian assistance is well-defined and recognised	The National Society is part of government-led emergency coordination platforms	Yes
Output 10.1: National Society is engaged in structured preparedness and capacity building processes.	The National Society is part of the country, interagency, and international community's official emergency response coordination platforms	Yes
	# of branches with enhanced disaster and crisis response capabilities	10
	% of volunteers provided with equipment for protection, safety and support appropriate to the emergency	85%

### Secretariate Services

Outcome 11: IFRC Secretariat Services Effective and coordinated disaster response is confirmed.	% of financial reports compliant with IFRC procedures	100%
Output 11.1: Agility and Accountability the IFRC strengthens its effectiveness, credibility, and accountability.	The resource mobilisation strategy has been developed	1
	The communications strategy has been developed	1
	Percentage of PNS reporting within a Federation Wide PMER structure	100%
	The National Society has a risk management framework in place	1
	% of financial reports compliant with IFRC financial procedures and standards	100%
	# of technical and monitoring visits conducted	12



*Food distribution in Marsabit County (KRCS photo)*

# FUNDING REQUIREMENT



## OPERATIONAL STRATEGY

### MDRKE068 - Kenya Red Cross Kenya Complex Emergency

#### FUNDING REQUIREMENTS

<b>Planned Operations</b>	<b>12,965,000</b>
Shelter and Basic Household Items	169,000
Livelihoods	3,517,000
Multi-purpose Cash	1,576,000
Health	2,420,000
Water, Sanitation & Hygiene	4,701,000
Protection, Gender and Inclusion	73,000
Risk Reduction, Climate Adaptation and Recovery	456,000
Community Engagement and Accountability	53,000
Environmental Sustainability	0
<b>Enabling Approaches</b>	<b>2,035,000</b>
Coordination and Partnerships	47,000
Secretariat Services	634,000
National Society Strengthening	1,355,000
<b>TOTAL FUNDING REQUIREMENTS</b>	<b>15,000,000</b>

*all amounts in Swiss Francs (CHF)*

## Contact information

For further information please contact:

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

### At Kenya Red Cross Society:

- **Secretary General:** Dr. Ahmed Idris, Secretary General, Kenya Red Cross Society; email: [idris.ahmed@redcross.or.ke](mailto:idris.ahmed@redcross.or.ke), phone: +254 703 037 000

### At the IFRC:

- **IFRC Country Cluster Delegation:** Naemi Heita, Head of Cluster Delegation; email: [naemi.heita@ifrc.org](mailto:naemi.heita@ifrc.org)
- **IFRC Regional Office for Africa:** Rui Alberto Oliveira, Regional Operations Lead; email: [rui.oliveira@ifrc.org](mailto:rui.oliveira@ifrc.org), phone: +254 780 422276
- **IFRC Geneva:** Santiago Luengo, Senior Officer, Operations Coordination; email: [santiago.luengo@ifrc.org](mailto:santiago.luengo@ifrc.org), phone: +41 (0) 79 124 4052

### For IFRC Resource Mobilisation and Pledge support:

- **IFRC Regional Office for Africa:** Louise Daintrey, Head of Strategic Engagement and Partnerships; [louise.daintrey@ifrc.org](mailto:louise.daintrey@ifrc.org), +254 110 843 978

### For In-Kind donations and Mobilisation table support:

- **IFRC Regional Office for Africa:** Allan Kilaka Masavah, Manager, Global Humanitarian Services & Supply Chain Management; email [allan.masavah@ifrc.org](mailto:allan.masavah@ifrc.org)

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

- **IFRC Regional Office for Africa:** Beatrice Okeyo, Regional Head PMER & QA, email: [beatrice.okeyo@ifrc.org](mailto:beatrice.okeyo@ifrc.org), phone: +254732 404022

### Reference



Click here for:

- [Emergency Appeal](#)