



Manocheer Deghat/I/RI/N/Nairobi/January 2008

# Kenya

## Emergency Humanitarian Response Plan

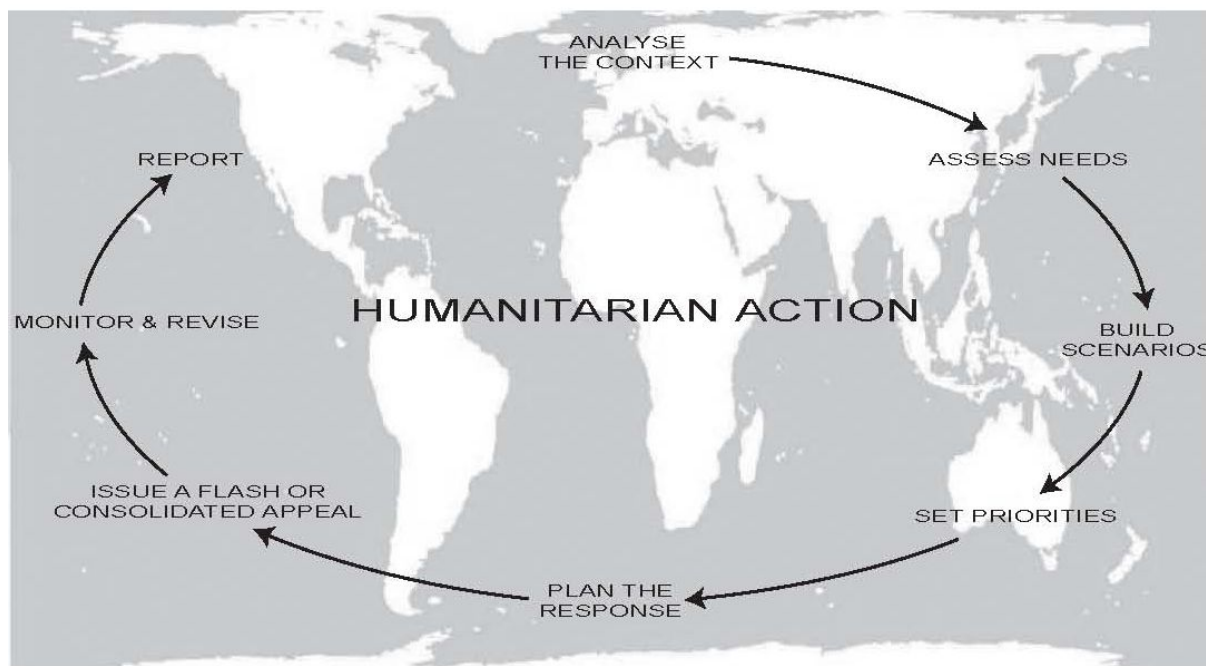
# 2008

Consolidated Appeal Process



UNITED NATIONS

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### **SAMPLE OF ORGANISATIONS PARTICIPATING IN CONSOLIDATED APPEALS**

AARREC	CRS	HT	MDM	TEARFUND
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ACTED	Danchurchaid	IA	MENTOR	UMCOR
ADRA	DDG	ILO	MERLIN	UNAIDS
Africare	Diakonie Emergency	IMC	NCA	UNDP
AMI-France	Aid	INTERMON	NPA	UNOSS
ARC	DRC	Internews	NRC	UNEP
ASB	EM-DH	INTERSOS	OCHA	UNESCO
ASI	FAO	IOM	OHCHR	UNFPA
AVSI	FAR	IPHD	OXFAM	UN-HABITAT
CARE	FHI	IR	OXFAM UK	UNHCR
CARITAS	Finnchurchaid	IRC	PA (formerly	UNICEF
CEMIR	French RC	IRD	ITDG)	UNIFEM
INTERNATIONAL	FSD	IRIN	PACT	UNJLC
CESVI	GAA	IRW	PAI	UNMAS
CFA	GOAL	Islamic RW	Plan	UNOPS
CHF	GTZ	JOIN	PMU-I	UNRWA
CHFI	GVC	JRS	PU	VIS
CISV	Handicap International	LWF	RC/Germany	WFP
CMA	HealthNet TPO	Malaria	RCO	WHO
CONCERN	HELP	Consortium	Samaritan's	World Concern
Concern Universal	HelpAge International	Malteser	Purse	World Relief
COOPI	HKI	Mercy Corps	SECADEV	WV
CORDAID	Horn Relief	MDA	Solidarités	
COSV			SUDO	

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Map No. 4187 Rev. 1 UNITED NATIONS  
January 2004

Department of Peacekeeping Operations  
Cartographic Section

## 1. EXECUTIVE SUMMARY

Widespread violence, which has caused a growing humanitarian crisis, was triggered in Kenya by the announcement on 30 December 2007 that incumbent Mwai Kibaki had narrowly won a hotly contested presidential election against Orange Democratic Movement leader Raila Odinga. Amid claims, including from national and international observers, that the vote had been flawed by serious irregularities, rioting and looting began to break out in urban centres across the country. The sudden nature of the violence, the main areas of which were in the west of the country and in and around Nairobi, deaths and resultant displacement not only persisted but worsened, sparking regional and international responses and mediation efforts, including the most recent one coordinated by the African Union and led by former United Nations Secretary General Kofi Annan.

The clear ethnic dimension to the violence, with members of specific groups targeted, has characterised this emergency a serious protection crisis, albeit with a direct link to an underlying political one. The humanitarian implications of the violence are grave. For over two weeks the targeted ethnic violence resulted in alarming reports of killing, injuries, gender-based violence, extensive looting and destruction of property and mass displacement of the population. More than 500 people have been reported as killed and thousands injured. The violence has affected some 500,000 persons who require emergency assistance, 250,000 of whom are internally displaced. Almost 4,000 Kenyans have sought seeking refuge in Uganda and many hundreds more have fled to northern Tanzania.

Most aid agencies operated at the height of the crisis with reduced staffing capacity as personnel were unable or unwilling to come to work for fear of being caught up in the violence, or deliberately targeted on the basis of their alleged political or ethnic affiliation. The humanitarian response was further hampered by the restrictions on freedom of movement caused by the violence. As Kenya plays a regional economic, commercial, and political, development and humanitarian hub supporting Somalia, Uganda, Burundi, Democratic Republic of Congo and South Sudan, this has meant that the impact of the crisis has been felt beyond its borders into almost all of these countries. While the protection crisis is at the forefront of the response – with particular focus on those who fled their homes, the host communities who are receiving them, as well as those who had property destroyed – there is a need for early recovery elements which support livelihood recovery and which can immediately support the affected population to restore their lives.

The National Disaster Operations Centre in the Office of the President has coordinated the Kenyan Government's response to the crisis. Local authorities have been organising and coordinating local relief efforts in conjunction with the Kenyan Red Cross Society (KRCS) – which was the first and principal responder to the violence, focusing initially on providing emergency medical care to victims – and other humanitarian partners. As the situation developed and humanitarian needs emerged, the UN supported the KRCS and began distributing food and non-food relief items to affected people including growing numbers of displaced. Numerous humanitarian agencies have thus joined the relief effort and recognised that the protection concerns along with early recovery needs of this emergency will require short, medium and possibly longer term responses.

Although there were initial difficulties in assessing the situation, the priority needs during the acute phase of the emergency are identified as food, shelter, health and hygiene, water and sanitation and protection. Whilst the most acute phase of the violence may have passed, without a political resolution the humanitarian situation remains critical and volatile. This initial flash appeal is a snapshot which will be revised in the coming weeks as the trajectory of the crisis and humanitarian needs become clearer and as the division of labour in humanitarian response crystallises. Moreover, as the situation evolves the need for early recovery and economic assistance become paramount.

In close coordination with the Kenyan Government, the United Nations System, the KRCS, participating non-governmental organisations and other United Nations partners, **this Flash Appeal seeks \$41,938,954<sup>1</sup>** for actions within a planning horizon of six months. The \$7 million provided by CERF on January 10 leaves an unfunded balance of \$34.8 million. The appeal includes 25 NGO projects, 34 UN projects, and four projects proposed by the International Organisation for Migration.

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<sup>1</sup> All dollar figures in the document denote United States dollars. Funding for this Flash Appeal should be reported to the Financial Tracking Service (FTS, [fts@reliefweb.int](mailto:fts@reliefweb.int)).

**TABLE I: KENYA EMERGENCY HUMANITARIAN RESPONSE PLAN 2008**

Summary of Requirements – By Cluster\*

As of 16 January 2008

<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by the respective appealing organisation.

Cluster	Full Requirements \$	Approved CERF Funding \$	Other Committed Funding \$	Unmet Requirements \$
Camp Coordination and Camp Management	2,736,177	504,867	0	2,231,310
Coordination	500,000	0	0	500,000
Early Recovery	6,385,000	0	0	6,385,000
Education	1,520,800	0	0	1,520,800
Emergency Telecommunications	1,150,378	0	0	1,150,378
Food	10,204,932	3,353,681	0	6,851,251
Health	3,462,789	634,929	0	2,827,860
Logistics	617,150	0	0	617,150
Nutrition	2,200,000	0	0	2,200,000
Protection	3,608,649	814,088	0	2,794,561
Shelter & Non-Food Items	6,396,647	872,664	0	5,523,983
Water and Environmental Sanitation	3,156,432	842,625	100,000	2,213,807
<b>Total</b>	<b>41,938,954</b>	<b>7,022,854</b>	<b>100,000</b>	<b>34,816,100</b>

\* NOTE: evolving practice is to show funding per 'sector' (or sometimes 'cluster') following the sector groupings used in country, to be in accordance with the coordination structures on the ground and in the appeal text. Funding per standard IASC sector is also tracked (see Table IV, p. 51), because the fixed standard allows comparison across appeals. FTS on-line tables will offer both groupings.

**TABLE II: KENYA EMERGENCY HUMANITARIAN RESPONSE PLAN 2008**  
 Summary of Requirements – By Appealing Organisation\*  
 As of 16 January 2008  
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by the respective appealing organisation.

Organisation	Full Requirements \$	Approved CERF Funding \$	Other committed Funding \$	Unmet requirements \$
AAK	300,000	0	0	300,000
ACORD	400,000	0	0	400,000
CARE	1,255,000	0	0	1,255,000
CRS	400,000	0	0	400,000
FAO	500,000	0	0	500,000
GTZ	200,000	0	0	200,000
IMC	1,150,000	0	0	1,150,000
IOM	2,023,868	662,450	0	1,361,418
IRC	1,010,000	0	0	1,010,000
NRC	1,518,750	0	0	1,518,750
OCHA	300,000	0	0	300,000
ORCHC	200,000	0	0	200,000
OXFAM UK	1,000,000	0	0	1,000,000
UNDP	1,000,000	0	0	1,000,000
UNFPA	1,007,064	213,504	0	793,560
UN-HABITAT	1,430,000	0	0	1,430,000
UNHCR	6,466,024	1,422,169	0	5,043,855
UNICEF	7,791,957	1,075,350	100,000	6,616,607
WFP	11,680,460	3,353,681	0	8,326,779
WHO	1,410,000	295,700	0	1,114,300
World Concern	200,000	0	0	200,000
WVK	695,831	0	0	695,831
<b>TOTAL</b>	<b>41,938,954</b>	<b>7,022,854</b>	<b>100,000</b>	<b>34,816,100</b>

## 2. CONTEXT AND HUMANITARIAN CONSEQUENCES

### 2.1 CONTEXT

Following elections in Kenya on 27 December and allegations of vote-rigging, sporadic violence broke out in many parts of the country between supporters of Raila Odinga's Orange Democratic Movement (ODM) and Mwai Kibaki's Party of National Unity (PNU). Complicating the political differences and driving much of the violence were ethnic dimensions. The riots and violence along clear ethnic lines left more than 500 people reportedly dead, and some 255,000 people have been displaced from the provinces in western Kenya, as well as the slums around Nairobi and other places. An estimated 4,000 people have sought refuge in neighbouring Uganda and many more reported close to the border. Altogether, nearly 500,000 have been affected – meaning they have been displaced, are hosting displaced persons, or have had livelihoods destroyed – and require emergency assistance. The discriminate targeting that continued for a period of two weeks characterises this as a serious protection crisis and, in the absence of a political solution, has the potential to break out anew at any point in the future.

Flashpoints in the ongoing unrest are the slum areas of Nairobi as well as Eldoret and Burnt Forest in Rift Valley Province, and Kisumu in Nyanza Province. Coast Province, including the main town of Mombasa and Western Province has also been affected by violence, including killing, injuries, gender-based violence (GBV), extensive looting and destruction of property resulting in large displacement of population. Tensions are currently greatest in Eldoret district where, in what has been the most symbolic instance of violence, up to 17 persons were burnt alive in a church. The situation remains complicated with most basic services disrupted and livelihoods destroyed. Food, shelter, water, sanitation, and health facilities are all identified needs. Displaced are found in public buildings located within their own neighbourhood's lands, and many have opted to move back to their areas of origin where they are physically safer and can seek collective protection. Whilst the underlying reason for this crisis is political, the humanitarian emergency is characterised as a protection crisis coupled with serious needs to restore pre-existing vulnerable and newly destroyed livelihoods.

The patterns of displacement remain fluid, with movements in a constant state of transit. This is expected to continue for as long as the political crisis is unresolved. Adding to the vulnerability of livelihoods is the timing of the violence, which coincides with the harvesting season in one month. During the violence many farms were burnt and crops lost, creating an additional vulnerability not only for those who were displaced, but also for those who remained on their land. As such the humanitarian response, critical as it is for saving the lives of many displaced families, would need to extend assistance to families who have lost their livelihoods, and host families who have been receiving displaced families since the violence broke in late December.

This crisis has also affected the whole region, as Kenya is a hub for humanitarian and development operations throughout East Africa and the Horn. The disturbances have caused disruption to transport and economic activity contributing to a lack of availability of both relief and commercial goods within the wider region including to Uganda, southern Sudan, the Democratic Republic of the Congo (DRC), and Somalia. Quite apart from the need to respond to the crisis itself, the situation has thus attracted the attention of regional and international leaders, and several efforts at mediation have been made but so far with little success. Despite the political deadlock between the two main political groups, the Government has cooperated with the international aid community on response efforts. The National Disaster Operations Centre in the Office of the President has coordinated the Government's response. Local authorities have been organising and coordinating local relief efforts in conjunction with the KRCS and other humanitarian partners.

#### ***Initial Relief Efforts***

The Kenyan Red Cross Society (KRCS), through its branches in the country, is the agency which for the moment has the greatest operational capacity and presence.<sup>2</sup> To date the United Nations humanitarian response has mainly been channelled through KRCS: for example, United Nations Children's Fund (UNICEF) donated pre-positioned emergency family kits for 8,000 families. KRCS' presence is widely accepted by belligerents but it, like most agencies and non-governmental organisations (NGOs) attempting to bring assistance to populations in distress, is not immune from problems relating to restricted access, lack of supplies, and the risk of being overwhelmed by the

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<sup>2</sup> On 4 January it launched an appeal for approximately \$14.4 million to provide essential life-saving needs to 500,000 affected people, including 100,000 IDPs, for a period of one month.



needs with which it is faced. Roadblocks have been a particular hindrance to the delivery of assistance in various parts of the country.

In the first week of the crisis, the World Food Programme (WFP) organised offices in Eldoret, Kisumu, Mombasa and Nakuru and has reached some 100,000 beneficiaries with some 700 metric tonnes (MT) of WFP commodities other than cereals, to complement the cereal rations provided by the Government through the KRCS to the same population. WFP has been providing micronutrient corn-soya blend (CSB) to health facilities in the vicinity of Nairobi slums and in affected areas in the west in support of the UNICEF-led supplementary feeding programme. The United Nations Population Fund (UNFPA) has coordinated the distribution of 1,500 post-rape treatment kits through the Nairobi Women's Hospital and is further channelling rape treatment kits and clean delivery kits through the KRCS. The United Nations Development Programme (UNDP) Bureau of Crisis Prevention and Recovery (BCPR) pledged \$100,000 for coordination and early recovery. The United Nations Information Centre began centralising data on humanitarian needs and issuing daily press briefings, whilst the Office for the Coordination of Humanitarian Affairs (OCHA) began coordinating information through a situation centre.<sup>3</sup> UNICEF has provided more than \$650,000 worth of medical, nutrition, water and sanitation and shelter supplies since the crisis began. The United Nations High Commissioner for Refugees (UNHCR) has distributed over 400 family kits (including two blankets, kitchen sets, two jerry cans, soap, plastic tarpaulins and mosquito nets) for 2,000 persons and have transported over 1,000 family kits to Narok for further distribution. Furthermore, UNHCR has started to monitor and assess the protection needs of internally displaced persons (IDPs), particularly women and children.

In the first days of the crisis, the Resident Coordinator (RC) met with members of the UN and other humanitarian partners to discuss the humanitarian response to the current crisis, to identify needs and gaps and to develop a coordinated response plan. It was agreed to adopt the cluster approach to facilitate a coordinated response which led to the formulation of eleven clusters with appointed lead agencies, to identify gaps, map capacities and organise concerted responses in each sector.

To enable an immediate response to the needs of those affected, it was decided to make a request to the Central Emergency Response Fund (CERF) for initial funding whilst a flash appeal was being developed to provide a more comprehensive overview of needs and outline response strategies for the coming six months. A CERF grant of \$7 million was thus accorded on January 10 for life-saving assistance.

The Government has issued food to the WFP and the KRCS for distribution to the affected communities. They have also provided security escorts to relief delivery and public transportation. The Government of Kenya has constituted three committees made up of Permanent Secretaries to deal with Humanitarian Response, Peace-building and Transport to address the crisis.

### ***The Way Ahead***

With the failure of the most recent mediation effort by Ghanaian President Kufour on 10 January, the situation remains volatile and with the potential to descend into violence once more. A political solution is paramount: as long as a solution is not found, the situation remains tense with the possibility of the majority of internally displaced persons (IDP) being displaced for longer than expected. Some have been quoted saying that they do not wish to go back to their previous homes. If this attitude takes root, the Government would be required to provide alternative land for resettlement, potentially exacerbating long-standing property issues. The humanitarian response also needs to factor in the need for support through to the next harvest; a need for economic recovery and livelihoods support; and the effects the continued disruption will have on regional economic, social, humanitarian and development activities and links.

### ***Humanitarian Impact Scenarios***

Within the current context, the UN country team has determined that it is in no position to state a 'Most Likely Scenario' for the situation. To reflect this political and operational precariousness, this appeal thus presents scenarios that range from best-case to medium to worst.

#### **Best-Case Scenario**

- No further displacements.

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<sup>3</sup> The centre has a dedicated webpage for further information: <http://ochaonline2.un.org/default.aspx?tabid=10370>.

- No further violence during political demonstrations, no more targeted violence towards civilians.
- An alternative resettlement solution is negotiated and implemented peacefully.
- Refugees and IDPs are able to return to their places of residence prior to violence, with alternative resettlement solutions negotiated and implemented peacefully for those who desire them.
- Government repairs basic social infrastructure and reconciliation activities take place.

### **Medium-Case Scenario**

- Isolated violent acts continue in some areas, but do not cause massive displacement.
- IDPs remain in camp situations for the short term (up to 3 months).
- IDPs currently in host families begin to request assistance after their reserves run out (within one month), and some move to the camps.
- IDPs are unable to return home due to ethnic tensions, and alternative resettlement solutions will be needed which prove hard to negotiate.
- Some shortages of basic goods in affected areas due to transport access constraints.
- Access to basic services restricted in some localised areas including for people living with HIV/AIDS<sup>4</sup>.
- Refugees remain in Uganda.

### **Worst-Case Scenario**

- Violent acts occur across the country, causing more human rights abuses, destroying infrastructure, disrupting service provision in major urban areas, and creating new vulnerable populations including street children in both existing affected areas and new areas.
- Increase in the overall displaced populations.
- Overcrowding in camp and host families leads to sexual and economic exploitation.
- Host families become unable to support their IDPs, and force them into camps.
- IDPs remain in camp situations for at least the medium term.
- New refugee influxes into neighbouring countries.
- High mortality and morbidity rates.
- Insecurity further restricts humanitarian response.
- Food prices increase, transport delivery cut impacting hugely on economy and livelihoods.
- As long rainy season starts, camps get flooded.
- Massive job loss.

## **2.2 HUMANITARIAN CONSEQUENCES AND NEEDS ANALYSIS**

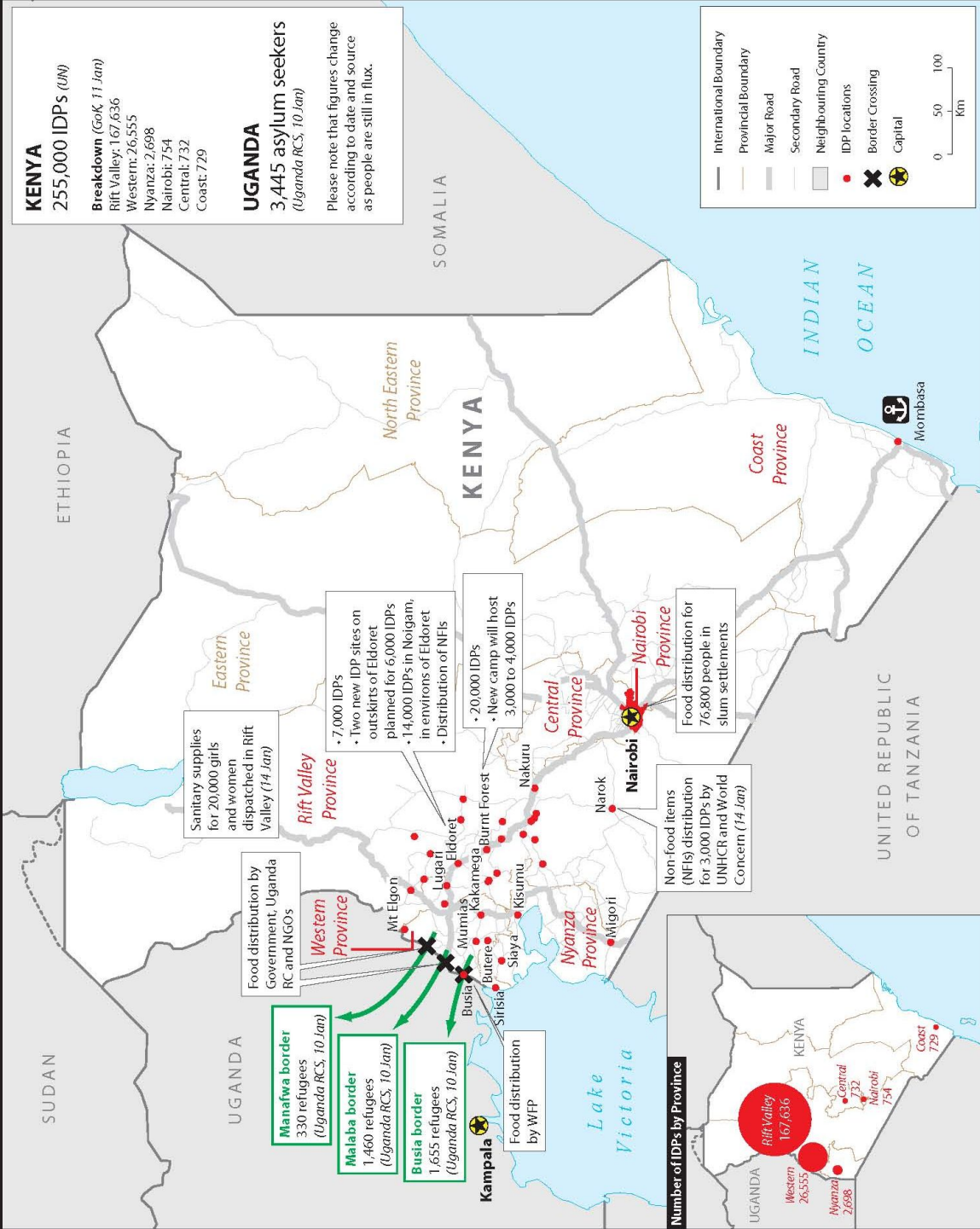
Due to the nature of the evolving crisis and problems with accessing all populations, many of whom are still on the move, formal assessments for some sectors or areas have not been completed; however, a number of rapid assessments were undertaken by KRCS, Médecins sans Frontières (MSF), single-agency and inter-agency assessments. WFP staff carried out rapid assessments in food security out of their offices in Eldoret, Kisumu, Mombasa, Nairobi and Nakuru. UNHCR sent teams to the Rift Valley for rapid assessment of protection, shelter and camp management. A joint UNICEF, OCHA, United Nations Department of Safety and Security (UNDSS) mission took place to Eldoret to assess needs and establish contacts with local authorities and leaders. Given the numbers of people who sought refuge in churches, the alliance of church-based organisations have indicated acute needs for food, shelter and non-food items, as well as for sanitation and hygiene. UNFPA, UNICEF and UNHCR have been conducting GBV/child protection rapid assessments in the Nairobi slums and are planning assessments in all affected provinces.

On 7 January the Government of Kenya reported that 255,000 people have been displaced, many thousands of whom have taken shelter with relatives in situations that remain unclear. It is estimated that the total vulnerable population is thought to be about 500,000 people, including those displaced. UN agencies are aiming to assist 250,000 IDPs in the coming weeks. Although the Government is reluctant to sanction the establishment of IDP camps, one has been set up in Eldoret which can accommodate up to 20,000 persons, mostly from the slums around the town, and at which some basic services have been established such as food distribution and medical services. With the advent of the school term, those IDPs who were sheltering in schools have been or will be moved; despite the Government's policy, this will doubtless require new camps or similar shelters.

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<sup>4</sup> Human Immuno-deficiency Virus/Acquired Immuno-deficiency Syndrome.

**Kenya: Displacement and Humanitarian Response (as of 15 Jan 2008)**



**SITUATION**

- Urgent needs include shelter, clean water and sanitation, food, blankets and mosquito nets.
- Schools reopened with 50% normal attendance on first day.
- Relief efforts coordinated by Government ministries in partnership with UN, Kenya Red Cross and NGO community.

**LINKS**

- UNCT Situation Report No. 13
- Latest updates for Kenya
- Related maps
- OCHA Kenya

**Disclaimer:**

The boundaries and names shown and the designations used on all maps do not imply official endorsement or acceptance by the United Nations. The data and information represented originates from public sources as indicated. ReliefWeb makes every effort to use the latest available data and to ensure that its products are accurate, complete and timely, but no warranties are made to this effect. Comments are welcome to maps@reliefweb.int.

**Creation date:** 15 Jan 2008  
**Base map sources:** UNCS, SALE, Global Discovery, GSI, SCGM

**Narrative and statistical sources:**  
**Government of Kenya (GoK), Uganda Red Cross Society (RCS), WFP, UNHCR**  
**UNCT**, 15 Jan 2008 (Kenya presidential elections violence situation report No.13)  
**OCHA**, 7 Jan 2008 (Kenyan refugees in Uganda OCHA Situation Report No. 3)



Office for the Coordination of Humanitarian Affairs  
 United Nations

The majority of those displaced are of Kikuyu ethnicity although other communities such as Kisii, Luhya and Kalenjin have been affected as well. Presently, most of those displaced are on the move back to, or are already on, their ancestral lands. However, others are stuck in transit and form a greater percentage of the displaced population being assisted by humanitarian community. Thousands of the poorest displaced and non-displaced families are affected by inflated food prices, interruption in food supplies and loss of livelihoods that is already resulting in increased moderate malnutrition in children that will become more severe if conditions persist.

Due in large part to the sudden nature of the crisis, the displaced populations lack essential life-saving requirements including food, water and sanitation, essential domestic items, protection and access to health care. Injuries caused by wounds inflicted during the fighting, including from blunt and edged instruments and from firearms, are widespread and the capacity of health facilities to respond has been reduced by insecurity. The planting season is also close, and if communities are not to be left wholly reliant on handouts and humanitarian assistance, they need to be helped in gaining access to land and with agricultural input to replace that lost in the skirmishes.

One of the immediate impacts on people has been the trauma, be it physical or psychological, of the sudden eruption of violence. Recent assessments conducted in Nairobi and the countryside have identified emergency trauma management including psycho-social care, provision of primary health care and essential health kits (trauma, reproductive health kits including post exposure prophylaxis), as the most urgent health care needs. This highlights the requirement for immediate health needs, including emergency surgical, medical and primary health care services, all of which suffered widespread disruption due to the displacement of people, including health staff, and the loss of medical stocks and supplies. Public sector health facilities lack technical personnel, with many health workers expected to be too afraid to report to duty. The health risks are thus very great for pregnant and lactating women, children, the elderly, the disabled, and those suffering from diseases. For example, there have already been reports of patients on anti-retroviral therapy (ART) unable to access treatment, and an increasing incidence of rape has been reported. The situation is most likely to deteriorate further.

The health situation of those displaced is worsened by their places of displacement, with many congregating in public places such as police stations, churches and schools. These sites are unable to provide reliable clean drinking water or sanitation facilities to the IDPs, which will cause the situation to quickly deteriorate with a potential of disease outbreaks and deaths amongst vulnerable groups. Access to safe drinking water and adequate sanitation facilities is reported as being non-existent for the vast majority of IDPs. A few NGOs are operational in some of the areas but are overwhelmed. There is a dire and immediate need for improved water provision and sanitation in these sites, especially for water storage tanks, jerry cans and buckets, chlorine tablets, latrine slabs and mobile toilets, generators, and pumps. Bearing in mind the Government's reluctance to establish formal camps, a solution must be found very soon, especially for those persons sheltering in schools as the new term started on 14 January.

Schools have been largely cleared of IDPs in order to facilitate the return of pupils. The consequences of these buildings' occupation are difficult to determine at the moment, but undoubtedly most of them will show signs of disrepair from two weeks of IDPs having lived in them. Additionally, it is not easy to transfer to a school in another part of the country; this means that those who left their homes because of the violence and are now residing in camps, with hosts, or with relatives, will have difficulty accessing education for their children.

Whilst the violence has had a traumatic and visible impact upon people through the rioting and displacement, the medium- and long-term impacts on livelihoods are also considerable. The closure or destruction of shops and businesses during the peak of the violence caused scarcities and price hikes for most basic commodities, especially for food and fuel. Micro-enterprises in the slum areas have been practically destroyed. Given the ethnic nature of much of the violence, those who have been displaced risk remaining so for some considerable time. In addition, of those who are displaced, many have lost their homes, possessions and livelihoods, and require urgent and integrated assistance with NFIs such as family kits and shelter materials, but also in economic recovery and other support such as debt forgiveness and new financing opportunities. Thousands of the poorest displaced and non-displaced families are affected by inflated food prices, interruption in food supplies and loss of livelihood that will, for example, impact heavily upon children if current conditions persist.

The initial focus of the emergency response to the current emergency in Kenya will therefore be to support the protection of the affected populations through:

- Mapping out the affected groups and needs from this violence, including displaced, resident and host communities;
- Stabilising the initial food security situation (Food Security cluster);
- Preventing disease outbreaks and ensuring capacity to respond to health emergencies (water, sanitation, and hygiene [WASH] and health clusters);
- Re-opening schools and ensuring access to primary education (Education cluster);
- Responding to the urgent needs of the most vulnerable (Camp Coordination / Camp Management [CCCM] cluster, NFI);
- Ensuring physical access to the most vulnerable, and continuing inter-cluster assessments (Logistics cluster); and,
- Understanding the early recovery needs of the affected population and prioritising recovery interventions (Early Recovery cluster).

### 3. RESPONSE PLANS

Priority needs and sectors have been identified through consultations between the cluster leads and cluster members, after reviewing available assessment data and response capacities. Similarly project submissions have been jointly reviewed by partners and aim to complement activities and available resources of the KRCS and other NGO partners.

Initial assessment data has been difficult to collect due to access limitations. The CERF component, which was approved on January 10, aimed to address priority life-saving needs for those displaced and most affected by the post-election violence. However, to avoid further deepening the gap between the affected ethnic groups, the emergency response must be accompanied in parallel by assistance to restore destroyed livelihoods for all ethnic groups affected.

#### 3.1 CAMP COORDINATION AND CAMP MANAGEMENT (CCCM)

**Cluster Lead:** United Nations High Commissioner for Refugees (UNHCR)

**Cluster Members:** Cooperative for Assistance and Relief Everywhere (CARE), Deutsche Gesellschaft für Technische Zusammenarbeit (GTZ), International Organization for Migration (IOM), International Rescue Committee (IRC), Norwegian Refugee Council (NRC), World Concern

**Objective 1: IDPs hosted in camps receive effective and well-coordinated humanitarian services to meet their protection and assistance needs.**

Ensure an informed protection and assistance situation in all camps including the humanitarian gaps, leading to a coordinated and effective delivery of humanitarian services in all IDP camps across Kenya. This will include safe and well-planned camp set up, camp management, where appropriate camp consolidation and closure. Systematic participatory assessments, information gathering on, and analysis of humanitarian needs and a well coordinated camp response to the identified needs will also be included.

**Objective 2: IDPs hosted in camps participate in all aspects of camp life through a community and rights-based approach.**

Ensure that a community and rights-based approach is applied in all camps and sites hosting displaced persons with the systematic participation of IDPs, which is the basis in identifying protection and assistance situation and overall humanitarian response including designing, implementation, monitoring and evaluation of services.

#### **Strategy**

Working under the overall supervision and support of the Office of the President (National Operations Centre / NOC) and the Ministry of Special Programmes, which are the government entities responsible for designation of IDP sites, the KRCS, UNHCR and Camp Management agencies will implement camp coordination and camp management in all camps / sites hosting IDPs in Kenya. In accordance with the Guiding Principles on Internal Displacement and in line with the stated policy of the government, all IDPs hosted in camps or sites will enjoy the same rights as all citizens. In particular, this strategy shall maintain the following:

- Establishment of camps will only be a last resort consistent with Government policy;
- An effort will be made to ensure all sites are mainstreamed in Government administrative structures, have access to humanitarian services, and that safe and sustainable exit strategies are put in place;
- Engage all stakeholders, including Government, UN, NGOs, international organisations, and the displaced community, to ensure the delivery of a comprehensive and holistic coordination and management of IDP sites;
- Cluster members have agreed upon the geographical distribution of camp management activities. Given the large number of dispersed, small sites/camps, cluster members agreed to use mobile units for camp management where necessary;
- The camp administrators, coordinators, and managers will work together to seek to ensure that common standards and guidelines are applied to assistance provided in sites/camps;
- Ensure risk reduction approach is applied in the design and provision of services in IDP sites/camps;

- Ensure mainstreaming of cross-cutting issues, including gender, HIV/AIDS, the environment, and peace-building activities.

### Output

- International standards of protection and assistance for IDP camps across Kenya maintained.
- Delivery of humanitarian services in each camp or site is well coordinated.
- Systematic participation of the IDP community in each camp or site based on community and rights-based approach, using participatory assessments with women, men, girls and boys of all backgrounds is achieved.
- Host communities in and around sites or camps are systematically engaged.
- An effective information management system to gather, analyse, and disseminate information at the inter- and intra-site/camp levels is established.
- The need for humanitarian actors to maintain the highest standards according to the Humanitarian Charter in all camps is advocated for and guidelines disseminated.

### Geographical Distribution of Camp Management Agencies

**Kenya Red Cross Society (KRCS):** Camp management in Nairobi and other areas which require camp management. Areas where KRCS will require support will be covered by the following agencies:

<b>NRC and IOM:</b>	Eldoret and surrounding areas covering 100,000 IDPs.
<b>GTZ:</b>	Nakuru, Molo, Njoro covering 20,000 IDPs.
<b>World Concern:</b>	Narok and surrounding areas covering 3,000 IDPs.
<b>IRC:</b>	Kitale and surrounding areas covering 25,000 IDPs.
<b>CARE:</b>	Kericho and various sites across Nyanza Province covering 20,000 IDPs.
<b>Gaps, all provinces:</b>	UNHCR supports other partners covering some 45,000 IDPs.

Camp Coordination and Camp Management (CCCM)		
Agency	Project	\$
UNHCR KEN-08/CSS01	<p><b>Project Title: Emergency camp management and camp administration support to the Government of Kenya, KRCS and other partners.</b></p> <p><b>Objective:</b> IDP population receives coordinated delivery of humanitarian services within every IDP site or camp based on a community and rights-based approach, which aims at the safe, organised and well-planned camp / site set-up, camp management and camp consolidation and, if feasible, camp closure. Camp management ensures that IDPs participate in the identification of their humanitarian needs and implementation of projects responding to those needs.</p> <p>UNHCR also strengthens and supports the camp administration role of the Government of Kenya in all IDP sites across the country to ensure that IDP sites are mainstreamed within the national plan for civil and public services on an equal basis as all other citizens.</p> <p>UNHCR provides camp management support to the KRCS and other NGOs to cover IDP sites which have not been covered by the available partners.</p> <p><b>Beneficiaries:</b> Total number: 50,000. Women: To be defined in liaison with Office of the President (National Operations Centre [NOC]). Children: To be defined in liaison with NOC.</p> <p><b>Partners:</b> The Government of Kenya (NOC and district authorities), KRCS, and other camp management agencies.</p>	<p><b>628,967</b></p> <p><i>Less CERF commitment 206,285</i></p> <p><b>Net requirements 422,682</b></p>

## KENYA

Camp Coordination and Camp Management (CCCM)		
Agency	Project	\$
UNHCR KEN-08/CSS02	<p><b>Project Title: Emergency IDP profiling to determine numbers and protection needs of IDPs hosted in sites.</b></p> <p><b>Objective:</b> IDP population receives coordinated delivery of humanitarian services within every IDP site or camp based on a community and rights-based approach, which aims at the safe, organised and well-planned camp / site set-up, camp management and camp consolidation and, if feasible, camp closure. This is based on protection needs of the IDPs identified by IDP profiling, which is carried out jointly with the Protection Cluster in accordance with the Guiding Principles on Internal Displacement and other technical expertise in line with the inter-agency IDP profiling guidelines.</p> <p><b>Beneficiaries:</b> Total number: 250,000. Women: To be defined in liaison with Office of the President (NOC). Children: To be defined in liaison with NOC.</p> <p><b>Partners:</b> The Government of Kenya (NOC), KRCS, Protection Cluster and other stakeholders.</p>	110,210 <sup>5</sup>
UNHCR KEN-08/CSS03	<p><b>Project Title: Emergency camp coordination for all camps / sites hosting IDPs.</b></p> <p><b>Objective:</b> IDP population receives coordinated delivery of humanitarian services within every IDP site or camp based on a community and rights-based approach, which aims at the safe, organised and well-planned camp / site set-up, camp management and camp consolidation and, if feasible, camp closure. UNHCR coordinates the overall camp responses jointly with the Government of Kenya to ensure that humanitarian services are equitably delivered in all camps in accordance with international standards.</p> <p><b>Beneficiaries:</b> Total number: 250,000. Women: To be defined in liaison with Office of the President (NOC). Children: To be defined in liaison with NOC.</p> <p><b>Partners:</b> The Government of Kenya (NOC), KRCS and humanitarian actors and service providers in the sites.</p>	107,000 <sup>6</sup> <i>Less CERF commitment 80,000</i> <b>Net requirements 27,000</b>
GTZ KEN-08/CSS04	<p><b>Project Title: Emergency camp management for sites hosting Kenyan IDPs in Nakuru, Molo, Njoro and surrounding areas.</b></p> <p><b>Objective</b> IDP population receives coordinated delivery of humanitarian services within every IDP site or camp based on a community and rights-based approach, which aims at the safe, organised and well-planned camp / site set-up, camp management and camp consolidation and if feasible camp closure. Camp management will ensure IDPs participate in the identification of their humanitarian needs and implementation of projects responding to those needs.</p> <p>Support protection and the restoration of peace, livelihood and promotion of return through rehabilitation of social and economic structures in Nakuru, Molo, Njoro and other surrounding sites.</p> <p><b>Beneficiaries:</b> Total number: 20,000. Women: To be defined in liaison with Office of the President (NOC). Children: To be defined in liaison with NOC.</p> <p><b>Partners:</b> The Government of Kenya (NOC), KRCS, UNHCR and humanitarian service providers in the sites.</p>	200,000

<sup>5</sup> Subject to the approval of UNHCR's Budget Committee.

<sup>6</sup> Subject to the approval of UNHCR's Budget Committee.



**KENYA**

<b>Camp Coordination and Camp Management (CCCM)</b>		
<b>Agency</b>	<b>Project</b>	<b>\$</b>
<p><b>IOM</b> <b>KEN-08/CSS05</b></p>	<p><b>Project Title: Emergency camp management for Kenyan IDPs at Eldoret showground site and other surrounding areas.</b></p> <p><b>Objective:</b> IDP population receives coordinated delivery of humanitarian services within every IDP site or camp based on a community and rights-based approach, which aims at the safe, organised and well-planned camp / site set-up, camp management and camp consolidation and if feasible camp closure. Camp management will ensure IDPs participate in the identification of their humanitarian needs and implementation of projects responding to those needs.</p> <p>IOM is currently functioning in Eldoret and has been designated by the Cluster lead, UNHCR, as the camp manager in the Eldoret Showground site. Build and expand role as camp manager in Eldoret Show grounds and extend to other agreed areas to support IDPs in the Uasin Gishu and North Rift Valley Districts by coordinating delivery of services, engaging the IDP community in identifying and prioritising humanitarian needs and conducting systematic participatory assessments to collect data profiling the IDP populations. Continue providing support to IDPs in the Eldoret Showground area and those additional IDPs seeking refuge in non-traditional accommodation sites (administration areas, schools and churches).</p> <p><b>Beneficiaries:</b> Beneficiaries 50,000 IDPs. Women: To be defined in liaison with Office of the President (NOC). Children: To be defined in liaison with NOC.</p> <p><b>Partners:</b> Government of Kenya (NOC), KRCS, UNHCR, Uasin Gishu District Administration and other humanitarian actors providing services in the IDP sites.</p>	<p style="text-align: right;"><b>450,000</b></p> <p style="text-align: right;"><i>Less CERF commitment 218,582</i></p> <p style="text-align: right;"><b>Net requirements 231,418</b></p>
<p><b>World Concern</b> <b>KEN-08/CSS06</b></p>	<p><b>Project Title: Emergency camp management for sites in Narok hosting Kenyan IDPs.</b></p> <p><b>Objective:</b> IDP population receives coordinated delivery of humanitarian services within every IDP site or camp based on a community and rights-based approach, which aims at the safe, organised and well-planned camp / site set-up, camp management and camp consolidation and if feasible camp closure. Camp management will ensure IDPs participate in the identification of their humanitarian needs and implementation of projects responding to those needs in sites in Narok.</p> <p><b>Beneficiaries:</b> Total number: 3,030. Women: To be defined in liaison with Office of the President (NOC). Children: To be defined in liaison with NOC.</p> <p><b>Partners:</b> Government of Kenya (NOC), UNHCR, KRCS and other humanitarian actors providing services to IDPs hosted in sites in Narok district.</p>	<p style="text-align: right;"><b>100,000</b></p>

## KENYA

Camp Coordination and Camp Management (CCCM)		
Agency	Project	\$
<b>CARE International</b> <b>KEN-08/CSS07</b>	<p><b>Project Title: Emergency camp management for Kenyan IDPs hosted in sites in Kericho district and across Nyanza Province.</b></p> <p><b>Objectives:</b> IDP population receives coordinated delivery of humanitarian services within every IDP site or camp based on a community and rights-based approach, which aims at the safe, organised and well-planned camp / site set-up, camp management and camp consolidation and if feasible camp closure. Camp management will ensure IDPs participate in the identification of their humanitarian needs and implementation of projects responding to those needs in sites across Nyanza Province and in Kericho District.</p> <p><b>Beneficiaries:</b> 20,000 people (4,000 households)  Women: To be defined in liaison with Office of the President (NOC).  Children: To be defined in liaison with NOC.</p> <p><b>Partners:</b> Government of Kenya (NOC), UNHCR, KRCS and other humanitarian actors providing services to IDPs hosted in sites.</p>	<b>440,000</b>
<b>International Rescue Committee (IRC)</b> <b>KEN-08/CSS08</b>	<p><b>Project Title: Emergency camp management for Kenyan IDPs hosted in sites in Kitale and surrounding areas.</b></p> <p><b>Objectives:</b> IDP population receives coordinated delivery of humanitarian services within every IDP site or camp based on a community and rights-based approach, which aims at the safe, organised and well-planned camp / site set-up, camp management and camp consolidation and if feasible camp closure. Camp management will ensure IDPs participate in the identification of their humanitarian needs and implementation of projects responding to those needs in sites across various sites in Kitale and surrounding areas.</p> <p><b>Beneficiaries:</b> 25,000 people.  Women: To be defined in liaison with Office of the President (NOC).  Children: To be defined in liaison with NOC.</p> <p><b>Partners:</b> Government of Kenya (NOC), UNHCR, KRCS and other humanitarian actors providing services to IDPs hosted in sites.</p>	<b>250,000</b>
<b>Norwegian Refugee Council (NRC)</b> <b>KEN-08/CSS09</b>	<p><b>Project Title: Emergency camp management for Kenyan IDPs hosted in sites in Eldoret and surrounding areas.</b></p> <p><b>Objectives:</b> IDP population receives coordinated delivery of humanitarian services within every IDP site or camp based on a community and rights-based approach, which aims at the safe, organised and well-planned site/camp set-up, camp management, consolidation and (if feasible) closure. Camp management will ensure IDPs participate in the identification of their humanitarian needs and implementation of projects responding to those needs in sites across various sites in Kitale and surrounding areas.</p> <p>Following recent NRC-CARE joint assessment in western Kenya, including Rift Valley, the worst affected province by the recent violence, NRC aims to ensure camp management and coordination of humanitarian assistance in sites around Eldoret (mainly Burnt Forest, where people are likely not to move, Cathedral (Eldoret town) and Turbo) to increase physical and social protection, to enhance living conditions to the IDPs in the camp and to contribute to find a durable solution.</p> <p><b>Beneficiaries:</b> Approx. 6,000 families (50,000 p.) – six-month project. Number of women and children: To be defined in liaison with Office of the President (NOC).</p> <p><b>Partners:</b> Government of Kenya (NOC), UNHCR, KRCS and other humanitarian actors providing services to IDPs hosted in sites.</p>	<b>450,000</b>

### 3.2 EARLY RECOVERY

**Cluster Lead:** United Nations Development Programme (UNDP), UNICEF, UN HABITAT,  
**Cluster Members:** Agency for Cooperation and Research in Development (ACORD), CARE International, Christian Aid, Food and Agriculture Organization (FAO), International Labour Organization (ILO), International Medical Corps (IMC), IRC, Oxfam GB, United Nations Industrial Development Organization (UNIDO), World Concern, World Relief, World Vision (WV) Kenya

#### Objectives

Augment ongoing emergency assistance operations in Kenya by building on humanitarian programmes to ensure that their inputs become assets for long-term development and thereby fostering the self-reliance of Kenyan populations and helping rebuild livelihoods, promoting spontaneous recovery initiatives, and establishing the foundations of longer-term recovery.

#### Strategy

Recognising that Kenyans require more than immediate life-saving support, early recovery programming works to restore basic social services, infrastructure, livelihood opportunities and governance capacity. The priorities are to produce immediate results for vulnerable populations and to promote opportunities for recovery. To achieve this, the foundation of recovery must be initiated in the humanitarian phase. These Early Recovery projects have been included into this first version of the Appeal on the basis that they have been the result of assessments or at least reasonable inference; they must begin now in order to have the best chance of success; and they are resilient to the changes in evolution of the crisis (for instance the three scenarios above in Section 2.1).

The Early Recovery projects are based on the best analysis of early estimates, information from district authorities and NGOs on the ground, and from those assessments it has been possible to undertake. It is accepted that further detailed assessments are required, not least to ensure that this cluster's objectives are fully incorporated into the Government's longer-term programmes for the affected areas including ensuring strategic complementarities and consistency with the humanitarian efforts while preparing the ground for a sustainable long-term rebuilding of peace, reconciliation and development. Presently the cluster members are undertaking rapid assessments for protection, shelter and camp management in the Rift Valley targeting the towns of, and in and around, Eldoret and Nakuru. Early needs assessment and planning for recovery will take into account the different needs, resources and vulnerabilities of women and men. This planning will involve relevant national and international stakeholders and enables women's organisations to participate fully in all phases of recovery.

Early Recovery should be nationally owned and led, and every effort will be made to encourage and support the Government to increase the level of ownership and lead early recovery. The Government has the overall responsibility for coordination of relief in response to the post-election violence and, moreover, has the full longer-term responsibility to ensure that the Kenyan citizens' human rights, human security and rights under the Kenyan Constitution are secured. The fact the humanitarian crisis erupted in a country where development initiatives and projects dominate was also a factor in designing the Early Recovery response. The Government has very strong capacities when it comes to dealing with frequent droughts and resulting food insecurity; however, these capacities are all focused on, or located in, quite different parts of the country, and adapting them to this type of humanitarian crisis is not easy in that it requires a different set of response capacities to those habitually used.

Government capacity will therefore need to be supported to lead Early Recovery planning and programming, providing support based on local knowledge and practices. The self-help efforts and capacities of the affected population will be strengthened, to contribute actively to rehabilitation and reconstruction. Community approaches will be promoted to restore basic levels of security, ensuring that community recovery and rehabilitation activities do not generate discriminatory practices or secondary risks by identifying negative coping mechanisms. It is within this framework of understanding that UNCT has developed these projects for the Flash Appeal.

In coordination with the other clusters, access to essential services will be re-established or facilitated, and environmental assets will be restored. Seeds, tools and other goods and services will be distributed to help revive socioeconomic activities among women and men; basic levels of collective and human security will be restored, and the rule of law strengthened. There are strong linkages

between shelter cluster and early recovery whose cluster leads will work together to ensure collaboration.

Early recovery is a multi-dimensional process (as opposed to a sector) and needs to be organised differently from the way other sector-based clusters function. As a common concern it cannot be limited to the work of one cluster. Early recovery capacity (in the form of an Early Recovery Adviser or ERA) will be added to the office of the Resident/Humanitarian Coordinator (RC/HC). The ERA will report to the RC/HC and will be responsible for supporting the work of all clusters in the early recovery process. The Early Recovery Cluster will in addition respond in a strategic manner to early recovery needs not covered by the other clusters. A Cluster Coordinator will be deployed to ensure a more coherent and effective response by mobilising UN agencies, International and national organisations and NGOs. The Early Recovery Cluster will particularly focus on:

- Capacity-building of relevant institutions within government at various levels and revamping the capacity of the UNCT;
- Peace-building, reconciliation and mediation;
- Rehabilitation of schools in affected areas;
- Support return, relocation and reintegration of IDPs;
- Enhancement of security of the affected population;
- Sustainable livelihoods;
- Voluntary resettlement of affected population;
- Food security;
- Advocacy and communication programmes;
- Strengthening existing coordination, monitoring and evaluation mechanisms.

#### **Outputs**

- Government coordination plans developed and implemented.
- Government – UN integrated interagency Early Recovery needs assessment undertaken and responses coordinated.
- Early Recovery strategic framework produced and funded in the affected communities.
- Development of and secured funding for, a Government Peace / Reconciliation / Mediation programme for the affected communities.
- Capacity-building of local actors improved to ensure that community members and key stakeholders have the knowledge and skills necessary and participate in peace and conflict mitigation mechanisms.
- Lessons learned about the current crisis documented and used for influencing human rights policy changes.
- More informed community leaders in conflict transformation and with capacity for tolerance.
- Conducive environment for truth, justice and reconciliation created, including targeting the media in order for it to play an active and constructive role.
- Community support systems established to assist vulnerable persons in the rehabilitation/reconstruction of sustainable livelihoods.
- District peace committees strengthened.
- Community social contracts signed to commit groups to peaceful resolution of disputes and prevention of outbreaks of violence.

## KENYA

Early Recovery		
Agency	Project	\$
<p><b>UNDP</b> <b>KEN-08/ER/I01</b></p>	<p><b>Project Title: Enhancing the emergency response capacities of the Kenyan authorities.</b></p> <p><b>Goal:</b> Government agencies capable of coordinating the emergency response and rapidly resuming their functions for longer-term development of the areas affected.</p> <p><b>Objectives</b></p> <ul style="list-style-type: none"> <li>• Recruitment and deployment of experts in early recovery, database management, peace-building / conflict resolution / mediation / communication for social development in government institutions at national and regional level.</li> <li>• Provide affective and comprehensive coordination of the emergency response including strengthening existing monitoring and evaluation mechanisms.</li> <li>• Promote coordinated planning and programming providing support that is based on local knowledge and practices.</li> <li>• Establish the foundations for longer-term recovery through: <ul style="list-style-type: none"> <li>- Early Recovery needs assessment(s), planning and resource mobilisation (within and external to the government structures) for recovery; and restore national and local systems including identification of persons (and required re-training) to restore state capacities particularly in the affected areas to manage and direct the development phase.</li> </ul> </li> <li>• Promote the longer-term plan and means of implementation for establishment of a Government of Kenya peace and reconciliation programme for the targeted affected population.</li> <li>• Support advocacy and communication activities (information, education, and communication [IEC]).</li> </ul> <p><b>Beneficiaries:</b> 250,000 displaced persons and residential populations of more than one million.</p> <p><b>Partners:</b> Government of Kenya National Disaster Operations Centre, and the Government of Kenya Committee on Reconciliation, UN agencies and NGOs.</p>	<p><b>500,000</b></p>
<p><b>FAO</b> <b>KEN-08/ER/I02</b></p>	<p><b>Project Title: Livelihood support to crisis-affected rural households in the Western and Rift Valley provinces.</b></p> <p><b>Objective:</b> Support agricultural and livestock production of vulnerable rural households affected by the crisis.</p> <p><b>Beneficiaries:</b> 40,000 households.</p> <p><b>Partners:</b> Ministries of Agriculture, livestock, health, water and education; Arid lands project, Department of Veterinary services, Kenya Veterinary Association, Vétérinaires sans Frontières (VSF-Belgium), Oxfam, FEWSNET, WV, WFP, and UNICEF, CRS, seed companies, agro stockists, KRCS.</p>	<p><b>500,000</b></p>

## KENYA

Early Recovery		
Agency	Project	\$
Oxfam GB KEN-08/ER/I03	<p><b>Project Title: Peace-building and conflict mitigation early response project.</b></p> <p><b>Objectives</b></p> <ul style="list-style-type: none"> <li>• Support through grants and capacity building, the ongoing and new peace-building and conflict mitigation initiatives in affected areas.</li> <li>• Support local partner initiatives to bring youth into mainstream peace-building.</li> <li>• Initiate and support psycho-social response initiatives that link to other peace-building work and support the training of new counsellors.</li> <li>• Strengthen capacity of District Peace Committees in the affected areas for community mobilisation.</li> <li>• Promotion of national healing and reconciliation.</li> </ul> <p><b>Beneficiaries:</b> 120,000 persons (30,000 women; 40,000 children).</p> <p><b>Partners:</b> UNDP, Office of the President- Secretariat of the National steering Committee on Peace-building and Conflict Resolution, PeaceNet.</p>	750,000
CARE International / International Medical Corps KEN-08/ER/I04AB	<p><b>Project Title: Livelihoods recovery and stabilisation for rural and urban population affected by post-election violence</b></p> <p><b>Objectives</b></p> <p><b>1. Rural Population</b></p> <ul style="list-style-type: none"> <li>• Increased food production through provision of appropriate seeds and tools.</li> <li>• Re-settlement of IDPS in affected areas including peace-building and reconciliation.</li> </ul> <p><b>2. Urban Population (informal settlements)</b></p> <ul style="list-style-type: none"> <li>• Provision of support and/or facilitation of safe return or resettlement process.</li> <li>• Provision of seed capital for re-engagement in income generating activities and promotion of group savings and loan scheme (long-term).</li> </ul> <p><b>Beneficiaries:</b> – 100,000.</p> <p><b>Partners:</b> – UNDP, OXFAM GB, UNHCR, KRCS, Ministry of Agriculture, Ministry of Commerce and Trade, Ministry of Special Programmes (Office of the President).</p>	1,000,000 CARE: 500,000 IMC: 500,000
ACORD KEN-08/ER/I05	<p><b>Project title: Re-establishment of shelter and livelihoods and peace-building assistance in western Kenya.</b></p> <p><b>Objectives:</b> Distribution of shelter and business infrastructure kits; distribution of agricultural inputs; research into gender-related impacts of post-election violence; production of didactic materials for peace-building; convening community peace-building meetings; establishment of community social contracts for peaceful resolution of disputes; monitoring and evaluation and final audit.</p> <p><b>Beneficiaries:</b> Direct beneficiaries: some 4,000-6,000 persons; Indirect beneficiaries: around 24,000 persons.</p> <p><b>Partners:</b> Local partners, community-based organisations and community members (to be identified following assessment of capacities).</p>	400,000

## KENYA

Early Recovery		
Agency	Project	\$
<p><b>International Medical Corps (IMC)</b></p> <p><b>KEN-08/ER/I06</b></p>	<p><b>Project title: Provision of livelihood support.</b></p> <p><b>Goal:</b> to mitigate the effect of Post-Election violence in Kibera slum and Rift Valley regions.</p> <p><b>Objectives</b></p> <ol style="list-style-type: none"> <li>1. Provision of temporary wage employment through “cash for work” initiative and seed money as small business grants to those whose businesses got burnt.</li> <li>2. Provision of psycho-social support counselling to IDPs and those affected and are in the camps and within MoH health facilities;</li> <li>3. Financially support IDP women living in Kibera and Rift Valley Regions through existing groups (e.g. people living with HIV/AIDS [PLWHA]) at individual basis to start up income generating activities.</li> </ol> <p><b>Beneficiaries:</b> IDPs, women, youth (total 35,000 individuals) - 4,000 IDPs in Kibera and 30, 000 IDPs in Rift valley Individuals who have lost businesses in Kibera slum – 1,000 Women and youths within Kibera slum – 2,000.</p> <p><b>Partner:</b> Ministry of Health (MoH).</p>	<p><b>200,000</b></p>
<p><b>World Vision Kenya (WVK)</b></p> <p><b>KEN-08/ER/I07</b></p>	<p><b>Project Title: Provision of emergency seeds and tools.</b></p> <p><b>Objective:</b> Timely access to farming tools and seeds to the affected households in readiness for the next long rains in April.</p> <p><b>Beneficiaries:</b> 5,000 Households (30,000 people) affected from WVK – Area Development Projects in Nyanza, Eldoret and Nakuru areas.</p>	<p><b>300,000</b></p>
<p><b>International Rescue Committee (IRC)</b></p> <p><b>KEN-08/ER/I08</b></p>	<p><b>Project Title: Early recovery health and WASH projects for returning post-election IDPs.</b></p> <p><b>Objective:</b> To assist returning IDPs re-establish their former lives by contributing to the rehabilitation and re-equipping/re-stocking of health posts, rehabilitating and constructing new (as necessary) water points and sanitation facilities, and continuing hygiene promotion activities.</p> <p><b>Beneficiaries:</b> 170,000.</p> <p><b>Partners:</b> Government of Kenya, MAP, Christian Aid, IDP and host communities.</p>	<p><b>185,000</b></p>
<p><b>World Concern</b></p> <p><b>KEN-08/ER/I09</b></p>	<p><b>Project Title: Restoration of agricultural and small infrastructure to support rapid recovery in Narok District.</b></p> <p><b>Objectives:</b> Assessment of agricultural, pastoral and small business capacity. Support for flow of agricultural inputs (seed and tool fairs) to ensure a full planting before the long rains. Restocking and rebuilding small businesses to ensure the availability of essential goods and services to levels capable of sustaining the population in Narok North and South.</p> <p><b>Beneficiaries:</b> Total number: 5,000 Women: 2,000; Children: 2,600.</p> <p><b>Partners:</b> UNDP, local authorities Narok North and South, Ministry of Agriculture, National Alliance of Churches, local churches, Kenya Agency to Development of Enterprise and Technology (KADET) Microfinance Institution (MFI).</p>	<p><b>100,000</b></p>

## KENYA

Early Recovery		
Agency	Project	\$
IOM KEN-08/ER/I10	<p><b>Project Title: Return, relocation and reintegration of IDPs.</b></p> <p><b>Objectives:</b> Capitalising on IOM's extensive experience in assisting the return of displaced persons, IOM will support the National Operations Center, the District Commissioner and UNHCR in the relocation, return and resettlement of the most vulnerable IDPs in Uasin Gishu and North Rift Valley Districts and other parts of the country. IOM will arrange logistical assessments of the areas of returns with representatives of the communities, logistical arrangement for the return the IDPs with their belongings, small community peace-building projects, emergency employment projects and, in collaboration with the United Nations Human Settlements Programme (UN HABITAT), design and distribute shelter reintegration packages.</p> <p><b>Beneficiaries:</b> 15,000 IDPs.</p> <p><b>Partners:</b> UNHCR, Government of Kenya National Operations Centre, UN HABITAT, local NGOs and faith-based organisations (FBO) in the area of eventual settlement.</p>	750,000
UN-HABITAT KEN-08/ER/I11	<p><b>Project Title: Immediate support for the return, reintegration and resettlement of the displaced populations.</b></p> <p><b>Objectives:</b> To develop and pilot a coherent and voluntary resettlement strategy of affected communities based on the needs assessed. UN HABITAT will concentrate on urban areas (Nairobi, Mombasa, Kisumu, Nakuru and Eldoret) working together with National authorities, Civil Society and NGOs, to respond to the identified needs and build the capacity of affected communities. The programme will provide technical assistance and small grants to resettle displaced households with security of tenure in the original locations or in new sites as appropriate.</p> <p><b>Beneficiaries:</b> Initially and directly 20,000 affected persons. From the assessment, the most vulnerable populations including women, youth and the disabled as well as landless will be targeted to ensure equitable access to the assistance. Indirectly entire affected communities</p> <p><b>Partners:</b> The programme will be implemented in collaboration with UNHCR who will focus on rural areas and monitor the protection aspects of shelter provision and with IOM who will provide logistical support for procurement, storage and distribution of building materials; NGOs/FBOs (Habitat for Humanity, Shelter Forum), local administrative structures and the private sector will be associated as implementing partners.</p>	1,200,000
UNDP KEN-08/ER/I12	<p><b>Project Title: Coordination of Early Recovery</b></p> <p><b>Objective:</b> Bring together as early as possible in the recovery process a broad range of organisations to support in a coordinated and integrated way national actors with the aim of putting in place the conditions for sustainable recovery.</p> <p><b>Main Action</b></p> <ul style="list-style-type: none"> <li>▪ Strategic planning.</li> <li>▪ Inter-cluster integrated approach to early recovery.</li> <li>▪ Cluster coordination (including information, advocacy, resource mobilisation).</li> </ul> <p><b>Beneficiaries:</b> Early Recovery Cluster; RC; IASC country team, government bodies; community representatives.</p> <p><b>Partners:</b> National and international counterparts.</p>	500,000



### 3.3 EDUCATION

**Cluster Lead:** UNICEF

**Cluster Members:** CARE, GTZ, IOM, IRC, NRC, World Concern

#### Objectives

To ensure continuing access to education for at least 200,000 children affected by the crisis and promote psycho-social recovery and promotion of peace and reconciliation in schools.

#### Strategy

It is vital to ensure that learning opportunity is not lost for children in the current crisis and that they are not traumatised by this experience. At least 4,448 primary schools are in the affected areas, with a student population of 2,154,863. Assessments now underway will clarify the extent of impact on students.

The Ministry of Education (MoE) is deploying some displaced teachers into the IDP camps; however, there will be need to employ temporary teachers to complement this effort. Education officials in the affected areas have been mandated by the government to set up temporary classes even in churches and social halls to cater for children whose schools were destroyed. The Government promised to provide enough security and learning materials in such areas for the smooth running of the classes. This is after assurance from many partners of their help.

As agreed with the Education Emergency committee, key strategies for ensuring education continuity and recovery include the following:

- Provision of temporary classrooms (tents) and teaching/learning materials for children in IDP centres who are not accessing local schools, including Education kits and Recreational kits;
- Training for teachers and School Management Committees to ensure integration of IDP children, to promote tolerance and citizenship, and to support psycho-social counselling among IDP and host community children;
- Production of emergency materials promoting education for tolerance and citizenship to support teaching/learning and engagement of communities in support of schools;
- Conduct assessments of the impact of the emergency on education, schools and children to enable targeted and strategic follow up;
- Provision of lighting in the tents to enable study at night;
- Support for the Ministry of Education coordination of the emergency response.

#### Humanitarian Actions

UNICEF will support the National Emergency Education Committee (MoE) through KRCS and in collaboration with Save the Children-United Kingdom (SC-UK) to ensure children's learning continues through the provision of essential Teaching and Learning materials. The Free Primary Education grants being provided to schools cannot support the current crisis as most teaching and learning materials already in schools have been destroyed by the violence. About \$632,000 of this budget will go to buying teaching and learning materials which are the most essential. In collaboration with National Emergency Education Committee UNICEF intends to distribute the teaching and learning materials to individual schools through respective District Education Offices and KRCS.

#### Roles and Responsibilities in supporting MoE

UNICEF as Cluster coordinator will:

- Ensure continued information sharing among partners;
- Support and guide assessment tools and reports harmonisation;
- UNICEF and SC-UK to both provide tents, Education and recreation Kits, training for teachers and school managers on peace education;
- UNICEF and SC-UK to both advocate for peace and for flexible policies in favour of children (i.e. uniforms and learning material);
- KRCS to distribute supplies to schools;
- UNHCR will provide support staff (national officer, B level [NOB] and general service, level 6 [GS6]). and fund sensitisation assessments;
- UNIDO will provide emergency power through renewable energy sources to provide lighting to tents that will be used as temporary educational centres/schools, provide support through information and communication technologies (ICTs) to keep school-aged children engaged in

educational activities, provide LED non-polluting Renewable Energy powered lamps for night reading at camps and temporary settlements, and will also engage in projecting normal class room activities from nearby schools to the camps through the support of ICT technology and wireless local loop technology.

### Outcome

IDP children and children in affected communities will have continued access to education and develop skills in peaceful co-existence and peace-building.

Education		
Agency	Project	\$
UNICEF KEN-08/E01	<p><b>Project Title: Bringing emergency-affected children back to school and accessing peace and reconciliation education.</b></p> <p><b>Objectives</b></p> <p>(i) To help fulfil the education rights of at least 200,000 primary school children affected by the post-elections violence in Kenya.</p> <p>(ii) (a) To have a clear understanding of the impact of the emergency on children; and, (b) to generate knowledge that will yield lessons to help promote tolerance and peaceful co-existence among children, teachers and communities from different ethnic groups. This effort will be supported by communication messages and material and will be monitored through monthly field visits and reporting.</p> <p><b>Beneficiaries:</b> 240, 000 primary school Children; 7,200 teachers, Head teachers and SMCs; and the community members around them.</p> <p><b>Partners: MoE, KRCS Kenya, SC-UK, UNHCR, UNIDO</b></p>	1,520,800

### 3.4 EMERGENCY TELECOMMUNICATIONS

**Cluster Leads: WFP and UNICEF**

**Cluster Members: WFP, UNICEF, UNHCR, The United Nations Office at Nairobi (UNON), NetHope**

The Emergency Telecommunications Cluster project in Kenya seeks to ensure: i) the implementation of security communications network; and, ii) the provisioning of data-communications services for UN agencies and NGOs, in support of the humanitarian missions. The objectives of the project include implementation of telecommunications services for new office structures; training of staff; strengthening and maintaining the existing inter-agency telecommunications infrastructure, to support the humanitarian relief operations. It also aims at harmonising the telecommunications activities within the humanitarian community to ensure effective service delivery, while avoiding duplication of systems and maximising the use of existing resources (telecommunications staff, equipment and services).

Effective telecommunications is a key factor in the safety and security and operational efficiency of the relief operations in the affected areas and must be an integral part of the planning and implementation of field operations.

#### Objectives

- Establish or enhance telecommunication networks in three operational areas, as well as Nairobi, to facilitate relief operations for UN agencies and NGOs, for a period of six months.
- Train staff in efficient and appropriate use of telecommunications equipment and services.
- Maintain the existing inter-agency telecommunications systems, networks and equipment necessary for efficient coordination and operational implementation.
- Harmonise the activities within the humanitarian community to ensure effective telecommunications while avoiding duplication of systems and maximising the use of local telecommunications resources.
- Ensure the implementation of a security communications network and data communication services for UN Agencies and NGOs in support of the humanitarian missions.

**KENYA**

<b>Emergency Telecommunications Cluster</b>		
<b>Agency</b>	<b>Project</b>	<b>\$</b>
<b>UNICEF</b>  <b>KEN-08/CSS10</b>	<b>Project: Inter-agency data communications for Kenya emergency operations.</b>  <b>Objectives</b> <ul style="list-style-type: none"> <li>• Provide agencies and NGOs with efficient and reliable Data Communications Infrastructure and Services.</li> <li>• Internet access service provision for UN Agencies and NGOs.</li> <li>• Procurement of fixed low-cost VSAT (iDirect) systems for three locations, portable satellite equipment, local area network (LAN) equipment, LAN cabling, wireless Access Points, UPS and power stabilisation equipment, civil engineering for the VSAT system, installation materials and equipment installation.</li> <li>• ICT staff to maintain the system for up to six months.</li> </ul> <b>Beneficiaries:</b> UN agencies and NGOs involved in relief operations for populations in the affected areas.  <b>Partners:</b> WFP, implementing NGOs.	<b>292,000</b>
<b>WFP</b>  <b>KEN-08/CSS11</b>	<b>Project: Setting up common security telecommunications services.</b>  <b>Objectives</b> <ul style="list-style-type: none"> <li>• Provision and implementation of common security telecommunication system.</li> <li>• Timely operational response and coordination of the inter-agency/NGO security telecommunications.</li> <li>• Ensure that all UN agencies, their implementing partners and participating NGOs' radio operators, security teams, drivers and staff are capable of using the established telecommunication network.</li> </ul> <b>Beneficiaries:</b> UN agencies and NGOs.  <b>Partners:</b> UNICEF, NGOs.	<b>858,378</b>

### **3.5 FOOD ASSISTANCE**

#### **Needs Analysis**

Based on the preliminary assessments made by the KRCS, reports by the NOC within the Office of the President and individual UN agencies, some 250,000 persons displaced or otherwise affected by the post-elections crisis in Kenya are in need of temporary food and non-food assistance. This number is, however, very fluid as many displaced people are still moving out of the affected areas to other locations, where their short and medium term needs still need to be ascertained.

The actual number of people displaced from the Nairobi slums is so far reported by the NOC as 12,494. However, many people in these settlements have reduced access to food due to disrupted commercial food supplies, a significant rise in prices, limited mobility and uncertain/disrupted sources of income. Their needs are identified in close collaboration with the network of the National Alliance of Churches and JamiiBora, coordinated by the KRCS.

#### **Response**

The WFP, with the Government's main implementing partner the KRCS, local authorities and other partners (UN, NGOs, FBOs), continues to conduct rapid assessments and provides immediate response to acute needs. Typically, full rations sufficient to cover basic food needs for two weeks are being delivered and distributed through KRCS and other partners WFP staff are on the ground in Kisumu, Eldoret (main centre with four teams), Nairobi and Mombasa to ensure maximum flexibility and rapid response.

As a short-term response, WFP is ensuring that full rations composed of cereals, pulses, vegetable oil and corn soya blend (CSB) are provided to all displaced people. These commodities are released

from WFP's existing stocks, which need to be urgently replenished by local purchases and additional shipments, to ensure that food deliveries to 700,000 people still affected by the drought in the north and north-eastern areas, to 1.1 million children in 3,800 schools and some 68,000 HIV/AIDS affected people do not experience major disruptions. The Office of the President/Special Programmes (OP/SP) has so far pledged some 1,800 MTs of cereals and small quantities of pulses and vegetable oil, which are mainly released to the KRCS and through District Offices in all affected areas.

The medium-term humanitarian response will depend on the individual or collective decisions of displaced families. Some may return to their homes and homesteads, with assurances of security and support from the Government of Kenya; others may maintain their decisions to leave to more secure areas elsewhere in the country, which is the current trend. In either case, most of the displaced people and families are likely to require temporary support and material assistance in re-establishing themselves. WFP will adapt or modify its support strategy, based on its own frequent needs assessments, as well as in-depth multi-sectoral assessments as they become feasible when the situation has stabilised.

### Objective

Provide food assistance for 250,000 persons displaced or otherwise affected by post-electoral violence in Western Kenya, in Nairobi high-density settlements and in coastal areas, for a period of three months. (This three-month horizon will be reviewed in the flash appeal revision.) Initially, most displaced are assumed to have limited purchase power, and no or limited access to commercial supplies. The initial daily ration is therefore based on a food basket providing 2,110 Kcal.

### Expected Output

Appropriate food basket provided for a targeted population and uninterrupted flow of food assistance ensured during the crisis period.

### Impact

- Nutritional status of the affected populations maintained despite disrupted commercial food supply chain and reduced access to food.
- Moderate malnutrition in children under five and pregnant/nursing mothers remain under the emergency level.

Food		
Agency	Project	\$
WFP KEN-08/F01	<p><b>Project Title:</b> EMOP 10374.0 - Food assistance to drought-affected people in Kenya (Budget Revision 12 covers populations displaced or affected by post-election crisis in Kenya).</p> <p><b>Objective:</b> Provide food assistance for persons displaced or affected by the post-election violence in Kenya for up to three months, to protect their nutritional status from deterioration due to displacement and loss of assets; provide micro-nutrient rich commodities through health facilities to address moderate malnutrition.</p> <p><b>Beneficiaries:</b> 250,000.</p> <p><b>Partners:</b> KRCS, Government of Kenya, UNICEF, NGOs.</p>	<p><b>10,204,932</b></p> <p><i>Less CERF commitment</i> <i>3,353,681</i></p> <p><b>Net requirements</b> <b>6,851,251</b></p>

## 3.6 NUTRITION

### Objectives

1. Prevent and manage malnutrition.
2. Coordination, assessment, monitoring and surveillance of the situation to inform appropriate response.

### Strategy

The Nutrition Sector plans to procure essential nutrition supplies, support assessment and monitoring of the affected populations and provide technical support to prevent and manage malnutrition among displaced and other vulnerable populations in the worst affected areas. Approximately 250,000 displaced persons are staying in camps. Hundreds of thousands more are staying with host

households who are now nutritionally vulnerable and in many cases not easily registered to receive relief assistance. An estimated 500,000 persons have been directly affected. Therefore, the sector plans to target support to approximately 200,000 children and 60,000 pregnant and lactating mothers which includes host communities and slums.

The response will be primarily undertaken through the Ministry of Health, with full support of WFP, UNICEF, and other implementing NGOs. Potential partners in the nutrition sector who have been consulted with in the preparation of this appeal include SC, Action Against Hunger (AAH), Concern, Medical Emergency Relief International (MERLIN) and Christian Children's Fund (CCF). All have funds to commence basic activities and will liaise with MoH and UNICEF for additional support as defined in this proposal. This model of operation is already in use in the existing emergency response in Kenya.

UNICEF will continue its role in support to coordination within the nutrition sector in Kenya and will ensure that core Cluster functions are incorporated in existing Government of Kenya structures.

### **Humanitarian Actions**

- Supplementary and / or complementary foods (high protein, high energy, fortified, both ready-to-eat and blended porridge) to prevent malnutrition among nutritionally vulnerable including food insecure and those with special nutritional needs e.g. children, pregnant and lactating women, children and women with communicable diseases including HIV in full collaboration with WFP.
- Equipment for family, group and health facility-based feeding.
- Therapeutic food, guidance and technical support for management of moderate and severe malnutrition.
- Support to MoH and NGOs for immediate scale-up of detection and management of severe malnutrition at health facilities and community level, ensuring health workers are trained in the management of malnutrition, implement standard practices, and support district health systems.
- Support to special issues related to breastfeeding in emergencies.
- Micronutrient supplements and fortification where indicated.
- Monitoring, assessment, analysis and communication of situation related to nutrition.
- Technical support for planning and coordination with WFP, KRCS and partners to reach displaced and vulnerable populations with nutritionally appropriate food.
- Strengthen essential nutrition actions in affected areas as part of transitional programming.

### **Expected Output**

- A coordinated, comprehensive, high quality and appropriate set of interventions will be implemented.
- Appropriate supplies and technical support will be in place and personnel will be supported to manage and implement the programme according to global standards.
- The intervention will be guided, monitored and adapted by an efficient assessment and monitoring system.

### **Impact**

- The affected population will be reached with a full package of essential actions appropriate for their needs including supplementation with specialised food products and micronutrients, screening for malnutrition to ensure early detection of malnutrition, appropriate management of malnutrition.
- Levels of malnutrition in the population will remain stable.
- Mortality and morbidity related to moderate or acute malnutrition will not increase.

**KENYA**

<b>Nutrition</b>		
<b>Agency</b>	<b>Project</b>	<b>\$</b>
<b>UNICEF</b> <b>KEN-08/H01</b>	<p><b>Project Title: Prevention and management of malnutrition.</b></p> <p><b>Objectives:</b> Identify and address factors which increase vulnerability to malnutrition through supplementation and fortification as indicated; Ensure training and mentoring of personnel to screen, detect and manage malnutrition; Provide appropriate nutritional products, and equipment for management of malnutrition.</p> <p><b>Beneficiaries:</b> 200,000 children and 60,000 pregnant and lactating mothers.</p> <p><b>Partners.</b> MoH, UNICEF, WFP, WHO and NGOs.</p>	<b>1,500,000</b>
<b>UNICEF</b> <b>KEN-08/H02</b>	<p><b>Project Title: Assessment, surveillance, coordination and communication.</b></p> <p><b>Objective:</b> Assess and monitor the situation through support to an information system, surveillance and communication to inform and monitor an appropriate response.</p> <p><b>Beneficiaries:</b> 200,000 children and 60,000 pregnant and lactating mothers.</p> <p><b>Partners.</b> MoH, UNICEF, WFP, WHO and NGOs.</p>	<b>500,000</b>
<b>IMC</b> <b>KEN-08/H03</b>	<p><b>Project Title: Provision of nutritional support in Trans Nzoia.</b></p> <p><b>Objectives:</b> Prevention and management of malnutrition.</p> <p><b>Activities:</b> Nutrition screening, Provision of supplementary food, Capacity building for health providers for child-to-child (CTC) network.</p> <p><b>Beneficiaries:</b> IDPs, children under five, PLWHA, tuberculous patients, pregnant and lactating women – 15,000 individuals.</p>	<b>200,000</b>

### **3.7 PROTECTION CLUSTER**

UNHCR assumed leadership and coordination of IDP Protection cluster on January 7, 2008. An inter-agency protection working composed of UN agencies and NGOs has been established in Nairobi. Similar structures are being established in Eldoret, Nakuru and Kisumu. The following objectives were set out for the cluster:

**Objective 1: A monitoring system of IDP communities, including population movement, and a collection/processing of information system established and maintained.**

Establish a coordinated structure for the tracking and profiling of IDPs and affected populations and for the immediate identification of their protection concerns. Collection of systematic and consolidated base-line data is essential for ongoing evaluation of the protection situation and will facilitate the ability to adjust protection interventions in accordance with developments.

**Objective 2: Protection concerns of displaced persons are adequately responded to through timely government concerted interventions.**

In close collaboration with relevant Government structures, organise protection interventions in response to the protection concerns of internally displaced persons and other affected persons, with particular attention to those with specific needs, including especially prevention of and response to sexual and gender-based violence, unaccompanied and separated children, cases of disappearances, elderly and persons with disabilities.

**Strategy**

Post-election violence caused considerable internal displacement which has triggered immediate protection concerns. A protection cluster coordination structure has been established to ensure close inter-agency coordination. The protection cluster will ensure protection concerns are mainstreamed in the other sectoral clusters. The humanitarian response will be executed in collaboration with and in

support of the Government and the humanitarian response structure set up through the Kenyan Red Cross. Cooperation with civil society, churches and faith-based organisations is essential in the protection response. All activities need to be guided by assessments that rely on meaningful participation by the internally displaced and other affected persons, particularly host communities.

Immediate priorities consist of establishing protection field presence able to monitor population movement, and register cases of human rights abuses or violations, rendering quick assessments on urgent protection needs, with special attention to those groups with specific needs. A network needs to be established allowing for the identification of and subsequent immediate response to basic and immediate needs of individuals and communities through a community-based approach.

### **Humanitarian Action**

Immediate protection intervention will focus on the prevention of further displacement. Concrete solutions for those seeking safety will be pursued in close coordination with local and national authorities. A population tracking and profiling structure will be established, and protection monitoring field presence organised. In cases of onward movement or consolidation of sites organised by the Government, voluntariness will be verified, taking into account the rights and participation of those affected. A capacity will be developed to offer transportation to the most vulnerable. Survivors of human rights abuses, including those of sexual violence will be identified and common referral procedures established for response. Psycho-social support will be made available to internally displaced and others affected by the violence. Safe spaces will be established. Displacement has triggered separation of families and a consolidated response especially for unaccompanied and separated children will be developed, including registration and tracing. For families who think their relatives are killed during the events, a procedure of registration and search in hospitals and morgues will be put in place in coordination with Kenyan Red Cross. Interventions should also look at the impact of the violence on those that are not displaced, either because they could not due to mobility restrictions, or those hosting IDPs. An in-depth analysis needs to be undertaken on the implications of the displacement on land ownership and tenancy rights with a view to protect IDPs rights to Housing, Land and Property (HLP). Community-based initiatives for conflict resolution and peace-building will be identified and pursued.

### **Expected Output and Impact**

- Protection cluster established in all areas of operations, with full participation of all stakeholders.
- Mobile protection monitoring teams deployed and operational.
- Tracking and mapping system of population movement established and maintained.
- Profiling of population conducted.
- Consolidated data collection, management and analysis.
- IDPs with special needs identified.
- Community-based psycho-social support provided.
- Develop recommendations for improving efforts to address GBV and work with partners to ensure implementation of those recommendations.
- Safe spaces and child-friendly spaces established.
- Unaccompanied and separated children registered.
- Complementary to the KRCS and International Committee of the Red Cross (ICRC), tracing activities conducted.
- Training and capacity on protection standards for local institutions provided.
- Cases of human rights abuses and violations registered and referred to Kenyan National Commission for Human Rights.
- Cases of disappearances registered and referred to Kenyan Red Cross for search in health structures.
- Cases of property loss registered, documented and submitted to relevant authorities.
- Information centres and legal aid clinics established and maintained.
- Development of community reconciliation and conflict resolution activities conducted.
- Monitoring IDPs rights to HLP and rights to return, voluntary resettlement / compensation / restitutions

## KENYA

Protection		
Agency	Project	\$
UNHCR KEN-08/P/HR/RL01	<p><b>Project Title: Mainstreaming of HIV/AIDS in all sectors of emergency response.</b></p> <p><b>Objectives:</b> Establishment of priority needs, ensure through advocacy and communication strategies prevention and reduction of stigmatisation. Ensure PLWHA on Anti-retroviral Therapy (ART) have continued access to care, including Anti-retroviral treatment. Ensure consistent implementation of Inter-Agency Standing Committee (IASC) Guidelines. Ensure sexual and gender-based violence prevention and response projects address HIV prevention.</p> <p><b>Beneficiaries:</b> 250,000 IDPs.</p>	30,000
UNHCR KEN-08/P/HR/RL02	<p><b>Project Title: Protection monitoring, assessment and intervention.</b></p> <p><b>Objectives:</b> Establish an effective field monitoring capacity for continuous assessment of protection needs of IDPs and affected populations, including systematic monitoring of areas of origin of the displaced persons. Assessment of the situation of victims of human rights abuses. Assessments on potential for return. Based on assessment findings ensure immediate interventions with particular focus on the protection of groups with special needs, the prevention of further displacement and forced movement and violation of HLP rights (in partnership with UN HABITAT). Identify and respond to opportunities for community conflict resolution activities. Review national legislation as it relates to internal displacement.</p> <p><b>Beneficiaries:</b> 250,000 internally displaced and affected persons.</p>	<p>821,225</p> <p><i>Less CERF commitment</i> 131,610</p> <p><b>Net requirements</b> 689,615</p>
UNHCR KEN-08/P/HR/RL03	<p><b>Project Title: Tracking and profiling of IDPs.</b></p> <p><b>Objectives:</b> Establish a mechanism for comprehensive and systematic collection, management and analysis of data on the number and location of IDPs, including assistance to and coordination of existing IDP tracking efforts and the establishment of information collection networks.</p> <p><b>Beneficiaries:</b> 250,000 internally displaced and affected persons.</p>	<p>553,725</p> <p><i>Less CERF commitment</i> 131,610</p> <p><b>Net requirements:</b> 422,115</p>
UNHCR KEN-08/P/HR/RL04	<p><b>Project Title: Management of the Protection Cluster.</b></p> <p><b>Objectives:</b> Ensure a predictable, coherent and effective response to the internal displacement by mobilising groups of agencies, organisations and NGOs to respond in a strategic manner to protection related issues. This comprises of the establishment and maintenance of inter-agency coordination structures, in close coordination with national and local authorities, State institutions, and local civil society. Ensure a coherent strategic action plan, development and consistent application of protection standards, advocacy and resource mobilisation, training and capacity building.</p> <p><b>Beneficiaries:</b> 250,000 internally displaced and affected persons.</p>	107,000
International Rescue Committee (IRC) KEN-08/P/HR/RL05	<p><b>Project Title: Protection support to post-election IDPs.</b></p> <p><b>Objective:</b> To improve access to protection services including legal aid, GBV prevention and response, and psycho-social activities to IDPs and host communities affected by post-election violence in the Rift Valley and Nairobi Provinces.</p> <p><b>Beneficiaries:</b> 40,000.</p> <p><b>Partners:</b> Government of Kenya, Children's Department; Women's Rights Awareness Programme (WRAP); Kituo Cha Sheria; African Network for the Prevention and Protection Against Child Abuse and Neglect (ANPPCAN); IDP and Host Communities.</p>	200,000



## KENYA

Protection		
Agency	Project	\$
UNICEF KEN-08/P/HR/RL06	<p><b>Project Title: Psycho-social support.</b></p> <p><b>Objective:</b> To ensure provision of appropriate community-based psycho-social support, as per the IASC Guidelines on Mental Health and Psycho-social Well Being, through training of community-based service providers, including teachers (in cooperation with education). Child-friendly spaces/safe spaces will be established to address recreation and psycho-social needs.</p> <p><b>Beneficiaries:</b> 250,000 displaced children and women and members of neighbouring affected communities.</p> <p><b>Partners:</b> Trans-cultural Psycho-social Organisation (TPO), KRCS, NGOs/CBOs.</p>	200,000
UNICEF KEN-08/P/HR/RL07	<p><b>Project Title: Prevention and response to separated children/unaccompanied minors.</b></p> <p><b>Objectives:</b> Prevent the separation of children from their caregivers, and provide messages on what to do in case of separation, through a comprehensive communication campaign with the Kenyan Red Cross and other partners (including the education sector); Ensure referral mechanism to appropriate care facilities among child protection partners are in place and strengthen community-based fostering mechanisms; Ensure child protection partners are familiar with the IASC guidelines governing the delivery of an appropriate response – particularly in regard to very young children. (These activities are viewed as complementary to the activities of the ICRC, which is working with the KRCS on tracing and database management.)</p> <p><b>Beneficiaries:</b> Entire displaced population est. 250,000.</p> <p><b>Partners:</b> KRCS, ICRC, Children's Department Government of Kenya, NGOs/CBOs.</p>	200,000
UNICEF KEN-08/P/HR/RL08	<p><b>Project Title: Monitoring and Reporting of child rights violations.</b></p> <p><b>Objective:</b> To ensure that grave child rights violations and the impact on delivery of services to children is monitored in areas affected by post-electoral violence in western Kenya and Nairobi, as per SC Res. 1612, and used for advocacy and violence prevention with local authorities, national authorities, political actors and other partners.</p> <p><b>Beneficiaries:</b> 200,000 displaced children and women and members of neighbouring affected communities.</p> <p><b>Partners:</b> Kenya National Council of Churches, Peacenet.</p>	100,000
UNICEF KEN-08/P/HR/RL09	<p><b>Project Title: Child and adolescent participation in protection and community rehabilitation.</b></p> <p><b>Objective:</b> Ensure that peace-building initiatives/conflict resolution and life skills (HIV/AIDS) are incorporated into the activities of selected youth centres, particularly in Western Kenya and in Nairobi, to give children and adolescents the necessary skills to protect themselves, but also to participate in community rehabilitation.</p> <p><b>Beneficiaries:</b> 20,000 displaced children and adolescents and members of communities affected by violence/conflict.</p> <p><b>Partners:</b> Government of Kenya, CBOs/NGOs.</p>	100,000

**KENYA**

<b>Protection</b>		
<b>Agency</b>	<b>Project</b>	<b>\$</b>
<p><b>UNICEF / UNFPA</b></p> <p><b>KEN-08/P/HR/RL10AB</b></p>	<p><b>Project Title: Gender-based violence emergency prevention and response.</b></p> <p><b>Timeline:</b> Six months.</p> <p><b>Objectives:</b> Acting according to its mandate as lead agency for coordinating GBV prevention and response in emergencies, UNFPA will facilitate and coordinate rapid implementation of multi-sectoral GBV programming in key emergency settings in Kenya through the provision of technical leadership and coalition-building among implementing partners and other key stakeholders; Where identified from joint GBV assessment missions, UNFPA and UNICEF will support capacity building of service providers to provide comprehensive and ethical response to survivors, including training on caring for survivors to improving referrals to existing services and strengthening capacity to care for rape survivors where such services are weak/non-existent.</p> <p><b>Beneficiaries:</b> 250,000 IDPs in the 42 Government of Kenya designated sites in Kenya and 500,000 affected persons (estimating that 150,000 to 250,000 are women and girls).</p> <p><b>Partners:</b> KRCS, Nairobi Women’s Hospital, Kenya Media Network, CSOs: CDN, ADN, FHOK, MUMCOP, Maendeleo Ya Wanawake (MYW), Tasaru Ntomonok Initiative (TNI), Samburu Aid in Africa SAIDIA, International Federation of Women Lawyers (FIDA), Council of Imams and Preachers of Kenya (CIPK), CCF.</p> <p><b>Other Key Ministries / Parastatals:</b> Ministry of Youth Affairs (MOYA), MoH, Ministry of Justice, Coast Development Authority (CDA).</p>	<p style="text-align: right;"><b>557,000</b></p> <p>UNICEF: 200,000 UNFPA: 357,000</p> <p style="text-align: right;"><i>Less CERF commitment (UNFPA) 107,000</i></p> <p style="text-align: right;"><b>Net requirements 450,000</b></p>
<p><b>IOM</b></p> <p><b>KEN-08/P/HR/RL11</b></p>	<p><b>Project Title: Emergency Protection and Response for Vulnerable Stranded Internally Displaced Persons</b></p> <p><b>Objective:</b> At the request of the Government of Kenya National Operations Centre (NOC), IOM will assemble a Rapid Response Transportation Unit with the logistical capacity to rapidly respond to the acute transportation needs of affected groups of IDPs without the means to relocate from insecure and unstable locations to safer areas. This Rapid Response Transportation Unit will provide immediate and escorted transportation for voluntary movements as well as attend to any immediate medical needs of the displaced persons participating in movements.</p> <p><b>Beneficiaries:</b> 20,000 displaced individuals</p> <p><b>Partners:</b> UNHCR, Government of Kenya NOC &amp; Government of Kenya District Administration</p>	<p style="text-align: right;"><b>643,868</b></p> <p style="text-align: right;"><i>Less CERF commitment 443,868</i></p> <p style="text-align: right;"><b>Net requirements 200,000</b></p>
<p><b>World Vision Kenya</b></p> <p><b>KEN-08/P/HR/RL12</b></p>	<p><b>Project Title: Protection of children and vulnerable groups.</b></p> <p><b>Objectives:</b> Assessment of the situation of children and vulnerable groups; awareness to camp management, children and IDPs on protection of children; establishment of child-friendly places, provision of child recreation and playing materials.</p> <p><b>Beneficiaries:</b> 14,500 children.</p> <p><b>Partners:</b> None.</p>	<p style="text-align: right;"><b>95,831</b></p>

### 3.8 SHELTER AND NON-FOOD ITEMS

#### Objective 1

To provide sufficient basic domestic and hygiene items (indicator: % of population who received NFI assistance) to IDPs and other affected persons.

#### Objective 2

To ensure access to adequate physical protection, decent living conditions and proper shelter (% of population with adequate shelter).

#### Strategy

Post-Election violence has led to the displacement of some 250,000 persons. The overwhelming majority have sought refuge in public centres such as churches, police stations and schools. Initial assessments confirmed that the material conditions of the displaced are extremely precarious as people fled their homes in a rush without being able to carry any personal belongings and household items. Even though there is no clear assessment as yet on the level of destruction of homes, it is assumed that over 50% of the houses of those who fled need to be repaired or reconstructed. More detailed shelter needs will need to be assessed.

During the initial phase of the emergency response, agencies and organisations such as the KRCS, UNICEF, ICRC and Caritas have been able to distribute and to pre-position up to some 32,000 family kits, mostly in the Eldoret area. KRCS has indicated that NFI needs in the area of Eldoret have been properly covered and greater attention should be given to the Nairobi area.

While emergency shelter needs have been fairly well covered in the area of Eldoret, the issue of site planning needs to be urgently and effectively addressed, especially as people are being relocated to new sites and also in the event that some of the displaced end-up remaining in these locations longer than initially expected. Needs related to site planning will be addressed under the Camp Coordination and Camp Management sector.

The Cluster will aim to ensure ongoing monitoring of distributions of NFIs and shelter kits and continuous verification of the needs of beneficiaries and eventually facilitate the replacement of items deteriorated. The Cluster will ensure that all families are targeted, distribution is conducted by partners through the head of family, and IDPs actively participate in constructing/setting up their temporary shelters. Technical assistance will be provided as needed. Although preliminary assessments indicate that persons with specific needs appear to be well integrated within the extended families, in case in-depth assessments indicate need for specific shelter support, the cluster will ensure the needs of the most vulnerable are addressed through case-by-case interventions.

In the context of the UN response to the Kenya IDP crisis, a shelter cluster was established under the lead of UNHCR. The cluster will work closely with the KRCS and the government especially the NOC which has been tasked to coordinate the overall humanitarian response. Cluster interventions at the district level will be coordinated through the district committees.

The targeted population will be as follows: 100,000 persons (20,000 families) for NFI distribution; 300,000 persons (40,000 families) for contingency; and, 150,000 persons (25,000 families) for transitional shelter.

#### Output

- Family kit distributed to up to 40,000 families (family kit consists of: two blankets two jerry cans of ten litres; one kitchen sets; soap; one plastic tarpaulin; one mosquito nets; sanitary pads).
- House construction kit distributed to up to 25,000 families.
- NFIs for some 300,000 families stockpiled in-country for contingency purposes.
- Systematic monitoring of shelter/NFI situation at each site regularly conducted.
- Information on key aspects of the shelter/NFI sector collected, processed and shared with the common inter-cluster information management system.
- Detailed shelter damages and needs assessed.
- Regular cluster meetings and coordination meetings with government/KRCS at central and field level conducted.

## KENYA

Shelter/NFIs		
Agency	Project	\$
<p><b>United Nations High Commissioner for Refugees (UNHCR)</b></p> <p><b>KEN-08/S/NF01</b></p>	<p><b>Project Title: Procurement and distribution of NFIs to assist displaced persons in Kenya including contingency stockpile for any eventual new emergency.</b></p> <p><b>Objectives:</b> Items are procured and distributed to cover the needs of displaced persons in Kenya. An initial stock for 100,000 persons is currently being distributed and covered with funds from CERF, while additional items for some 10,000 persons will be procured to respond to potential new displacement. Shelter kits will also be distributed.</p> <p><b>Beneficiaries:</b> 150,000 persons (30,000 families).</p> <p><b>Partners</b> Government of Kenya, NOC, KRCS.</p>	<p><b>1,047,197</b></p> <p><i>Less CERF commitment</i> <i>872,664</i></p> <p><b>Net requirements</b> <b>174,533</b></p>
<p><b>United Nations High Commissioner for Refugees (UNHCR)</b></p> <p><b>KEN-08/S/NF02</b></p>	<p><b>Project Title: Procurement and distribution of transition shelter kit to assist displaced persons in Kenya willing to return to former place of residence in rural areas.</b></p> <p><b>Objective:</b> Should conditions improve, UNHCR in close coordination with governmental authorities and KRCS will conduct assessments of level of shelter destructions and will design/distribute shelter kits allowing people to return to and re-establish themselves in their place of original residence.</p> <p><b>Beneficiaries:</b> 60,000 persons (12,000 families).</p> <p><b>Partners</b> Government of Kenya, NOC, KRC and others.</p>	<p><b>2,953,200</b></p>
<p><b>United Nations High Commissioner for Refugees (UNHCR)</b></p> <p><b>KEN-08/S/NF03</b></p>	<p><b>Project Title: Management of Shelter Cluster.</b></p> <p><b>Objectives:</b> Ensure a predictable, coherent and effective response to the internal displacement by mobilising groups of agencies, organisations and NGOs to respond in a strategic manner to shelter/NFI related issues. This comprises of the establishment and maintenance of inter-agency coordination structures, in close coordination with national and local authorities, State institutions, and local civil society; Ensure a coherent strategic action plan, development and consistent application of standards, advocacy and resource mobilisation, training and capacity building.</p>	<p><b>107,500</b></p>
<p><b>International Rescue Committee (IRC)</b></p> <p><b>KEN-08/S/NF04</b></p>	<p><b>Project Title: Distribution of essential household goods in post-election IDP sites.</b></p> <p><b>Objective:</b> To improve the health and well-being of post-election IDPs and host communities in the Rift Valley and Nairobi Provinces through the distribution of essential household items.</p> <p><b>Beneficiaries:</b> 20,000 persons (4,000 families).</p> <p><b>Partners</b> Government of Kenya, NOC; UNHCR; IDP and host communities.</p>	<p><b>125,000</b></p>
<p><b>CARE International</b></p> <p><b>KEN-08/S/NF05</b></p>	<p><b>Project Title: Provision of NFIs and temporary shelter material to population affected by post-election violence.</b></p> <p><b>Objectives:</b> Assessment of damages due to post-election violence; Support for the distribution of NFIs to most vulnerable communities; Provision of hygiene kits to women; Provision of plastic sheeting or tarpaulins for use as temporary shelter.</p> <p><b>Beneficiaries:</b> 90,000 people (18,000 families).</p> <p><b>Partners:</b> NRC, IRC, CRS, KRC, UNICEF, UNHCR, MoH, Ministry of Special Projects (Office of the President).</p>	<p><b>315,000</b></p>

**KENYA**

<b>Shelter/NFIs</b>		
<b>Agency</b>	<b>Project</b>	<b>\$</b>
<b>UNICEF</b>  <b>KEN-08/S/NF06</b>	<p><b>Project Title: Shelter and household items support to conflicts' affected children and women.</b></p> <p><b>Objectives:</b> To mitigate the level of vulnerability of the affected populations, especially children and women, by ensuring proper shelter and improved hygienic conditions during the displacement.</p> <p><b>Beneficiaries:</b> 50,000 persons (10,000 families).</p>	<b>550,000</b>
<b>NRC</b>  <b>KEN-08/S/NF07</b>	<p><b>Project Title: Emergency shelter assistance to the displaced in Kenya: Basic temporary shelter and NFI.</b></p> <p><b>Objective:</b> Following recent NRC-CARE joint assessment in western Kenya, including Rift Valley, the worst affected province by the recent violence, NRC aims to provide emergency assistance to the displaced population through provision of basic Temporary Shelter (Plastic Sheeting and Sticks) and distribution of NFI family kits with a focus in and around Eldoret (Burnt Forest, where people are likely not to move, Cathedral (Eldoret town), Turbo and Molo). In Rongai (Nakuru) and Nairobi (displaced from Mathare and Kibera slums), NRC will focus only on NFI distribution.</p> <p><b>Beneficiaries:</b> Approx. 9,000 families (45,000 persons), including: 4,000 families (20,000 persons) for basic Temporary Shelter; and, 5,000 families (25,000 persons) for NFI Distribution.</p> <p><b>Partners:</b> Authorities, KRCS and Shelter Cluster Partners (lead agency UNHCR).</p>	<b>1,068,750</b>
<b>UN-HABITAT</b>  <b>KEN-08/S/NF08</b>	<p><b>Project Title: Assessment of Shelter damages and needs and provision of technical advice.</b></p> <p><b>Objective:</b> Establish the extent of damage and needs in housing, land and property and provide technical advice in shelter delivery that will jump start the early recovery.</p> <p><b>Beneficiaries:</b> Entire affected populations, governments, and shelter cluster members.</p> <p><b>Partners:</b> Affected communities, governments, UNHCR, IOM and other shelter cluster partners and ER partners.</p>	<b>230,000</b>

### **3.9 HEALTH**

#### **Needs Analysis**

Violence including sexual violence has a direct impact on the (physical and psychological) health and psycho-social well being of the people. The disruption of health care service delivery (both curative and preventative) is also affecting health. For example, there have already been reports of patients on ART and TB care unable to access their treatment. Recent assessments conducted in the country have identified emergency trauma management including psycho-social care, provision of primary health care and essential health kits (trauma, reproductive health kits including post exposure prophylaxis), as the most urgent health care. The epicentre of the current crisis has also the highest HIV and TB prevalence in the country. Any disruption in the management of these public health problems will have very serious consequences in the long run.

The health care delivery system has come under severe strain. The system lacks adequate staff and supplies (including drugs, equipment and blood transfusions) to deal with the increasing number of trauma patients. In the areas of highest tension, the lack of sufficient human resources is further compromised by lack of security. Some health workers have also been displaced and the few in the most affected areas are too afraid to report to duty. In addition, there is poor health information detailing the numbers of injuries and deaths and health surveillance data. Many partners are in the field and co-ordination and leadership in the health sector has become a priority.

The health cluster has been immediately re-activated. The Central MoH in collaboration with the World Health Organization (WHO) and other health partners had developed a comprehensive response plan which is currently being implemented, with on strong humanitarian coordination among the principal stakeholders, including UN agencies, Red Cross, the NGOs and CBOs on the ground.

### **Objective**

The main objectives are to reduce avoidable mortality and morbidity, and to minimise the complications of rape, other forms of GBV, and psycho-social trauma among the most vulnerable population (the wounded, sick, children and pregnant women, rape victims, disabled and the elderly).

### **Strategy**

The strategy is to address synergistically the most urgent health threats of the vulnerable populations, and to ensure continuity of basic health care and public health support. The International health partners will assist the national, local authorities, KRC, and national NGOs to:

- Assess and monitor regularly with health partners the health situation and disseminate regularly information for an effective response to gaps;
- Respond to urgent health needs of those directly affected by conflict predict and respond to diseases of epidemic potential in affected communities and displaced population;
- Ensure a coordinated and cohesive, immediate and medium-term response by: i) strengthening of emergency and primary health care to wounded and displaced populations; ii) active disease surveillance and early warning systems for outbreak response; iii) facilitating access to quality and comprehensive health care especially for the displaced population.

### **Cluster Lead**

WHO is the cluster lead: together with and through health cluster partners and MoH, the Organisation will ensure that critical health information is available for emergency action, strengthen coordination of emergency health activities, to identify gaps and fill them, with priority given to increased measles vaccination coverage and general preparedness against outbreaks, and support the capacities of local partners., thus ensuring that essential primary health care services are accessible to the most vulnerable.

### **Expected Outcomes**

- Communicable diseases detected and responded to in a timely manner.
- Health response coordinated among partners on the ground.
- Emergency health response gaps identified and minimum life-saving health package provided.
- Emergency obstetric services and antenatal care readily available and accessible to women in affected communities.
- Priority health threats of the displaced communities identified and monitored regularly, information disseminated for purposes of early warning and effective response.
- Ensured access to continuous ARV and TB treatment for affected people already on treatment before the onset of the conflict.
- Improved emergency response to the health needs of the displaced and injured vulnerable population within local systems and among health partners.

### **Indicators (with specific targets)**

The key indicator here is life-saving emergency health care to over 500,000 displaced and injured victims:

- No of prompt health updates provided and disseminated;
- Number of children immunised against measles and vitamin A;
- No of joint emergency health Cluster planning, monitoring and coordinating held;
- Number of ART treatments sustained.

**KENYA**

<b>Health</b>		
<b>Agency</b>	<b>Project</b>	<b>\$</b>
<p style="text-align: center;"><b>UNICEF</b></p> <p style="text-align: center;"><b>KEN-08/H04</b></p>	<p><b>Project Title: Health needs of internally displaced families and host families affected by post election violence in Kenya.</b></p> <p><b>Timeline:</b> Six months.</p> <p><b>Objectives:</b> Support the MoH to provide essential health services including treatment for HIV/AIDS and TB to IDPs and host communities particularly women and children in areas of Kenya affected by violence.</p> <p><b>Out of the total project cost, \$232,725 has already been received from CERF.</b></p> <p><b>Strategy:</b> The major problem now facing the MoH is that of public health and ensuring that all Kenyans, particularly IDPs have access to routine essential health services thereby minimising outbreaks of communicable diseases. An essential principle of any strategy must be to ensure equitable access of all Kenyans to services so as not to increase the tension between different communities. The MoH has established an emergency co ordination structure within the existing MoH system and is requesting all partners to use this structure to provide support therefore UNICEF will work primarily with and support the MoH to deliver the required services to all Kenyans affected either directly or indirectly by the violence but in areas where MoH is not operating we will support other partners such as Médecins sans Frontières (MSF), SC.</p> <p><b>Main Humanitarian Action</b></p> <p><b>Immediate:</b></p> <ul style="list-style-type: none"> <li>• Support to hiring a 100 additional health workers;</li> <li>• Procurement of long lasting insecticide treated nets for Internally Displaced Families;</li> <li>• Procurement of essential medicines to treat and minimise outbreaks of communicable diseases supported by communication/ health promotion;</li> <li>• Support to mobile outreach services.</li> </ul> <p><b>Longer-term ( 3- 6 months):</b> Support to providing essential health services to affected population (direct and indirectly affected), particularly mothers and children.</p> <p><b>Impact / Outcomes:</b></p> <ul style="list-style-type: none"> <li>• Minimum outbreaks of communicable diseases;</li> <li>• Prompt responses to outbreaks of cholera or other infectious diseases;</li> <li>• Minimum numbers of malaria cases reported;</li> <li>• National Immunisation coverage maintained.</li> </ul> <p><b>Beneficiaries;</b> 250,000 IDPs and possibly 500,000.</p> <p><b>Partners: MoH, NGOs e.g. (MSF, SC, etc).</b></p>	<p><b>Total project:</b> <b>972,725</b></p> <p><i>Less CERF commitment</i> 232,725</p> <p><b>New requirements</b> <b>740,000</b></p>

Health		
Agency	Project	\$
WHO KEN-08/H05	<p><b>Project title: Emergency response to post-election crisis.</b></p> <p><b>Time line:</b> Six months.</p> <p><b>Objectives:</b> The main objective is to reduce avoidable mortality and morbidity. In the current situation this means minimising the complications of rape and other forms of gender-based violence, as well as the psycho-social traumas deriving from the conflict among the most vulnerable population (the wounded, sick, children and pregnant women, rape victims, disabled and the elderly); and to ensure continuity of basic health care and public health support.</p> <p><b>Strategy:</b> Working with and through health cluster partners and MoH, WHO will ensure that critical health information is available for emergency action, increase measles vaccination coverage and general preparedness against outbreaks, strengthen coordination of emergency health activities, to identify gaps and fill them, and support the capacities of local partners., thus ensuring that essential primary health care services are accessible to the most vulnerable.</p> <p><b>Main Humanitarian Action</b></p> <ul style="list-style-type: none"> <li>• Decentralise technical expertise and assist partners in the field at the epicentres of the crisis.</li> <li>• Strengthen disrupted emergency disease surveillance, early warning and health information especially for the displaced persons and communities (guidelines, logistics, communication and laboratory support etc).</li> <li>• Ensure emergency immunisation against measles (vaccines, syringes, staff incentives, local transport: Technical support to planning (EPI Unit).</li> <li>• Respond promptly to communicable disease outbreaks and other health emergencies among vulnerable population.</li> <li>• Increasing local technical person hours to attend to excess patient load (10 doctors to strengthen the health response including surveillance, clinical treatment and referrals) –in the emergency period.</li> <li>• Continuity of Anti-retroviral drugs (ARVs) for 5,000 people for three months, anti-TB, opportunistic infections prophylaxis and treatment for displaced populations and where services have been disrupted through repairing health systems to maintain continuum of care especially among displaced people.</li> <li>• Provide psycho-social support and management for trauma, rape and other forms of GBV, HIV (counselling, trauma counselling, post-exposure prophylaxis [PEP] kits, etc.).</li> <li>• Make available appropriate kits, essential drugs and logistics support for referral, static and mobile services (<b>Procurement of basic supplies:</b> Eight inter-agency emergency health kits, (covers 3,000,000 population for three months or 120,000 for one month), five international diarrhoea and dysentery kits (IDDKs) (500 severe cases), five Trauma A + B (500 interventions).</li> </ul> <p><b>Beneficiaries;</b> 250,000 IDPs and 500,000 affected population.</p> <p><b>Partners:</b> Health Cluster Partners, MoH, KRCS, Provincial and District Health Management Teams (DHMT).</p>	<p><b>1,410,000</b></p> <p><i>Less CERF commit ment 295,700</i></p> <p><b>Net require ments 1,114,300</b></p>



## KENYA

Health		
Agency	Project	\$
UNFPA KEN-08/H06	<p><b>Project Title: Reproductive Health Coordination and Services.</b></p> <p><b>Timeline:</b> Six months.</p> <p><b>Objectives:</b> To increase the availability of integrated and quality Sexual and Reproductive Health (SRH) response and HIV/AIDS prevention services in the 42 IDP camps designated by the Government of Kenya in Nyanza, Western, Rift Valley, Central, Nairobi and Coast Provinces and through outreach services.</p> <p><b>Strategy:</b> Working through local and international partners to ensure provision of quality SRH information and services including the prevention of HIV/AIDS among conflict-affected population in Kenya.</p> <p><b>Main Humanitarian Action</b></p> <ul style="list-style-type: none"> <li>• Coordination of reproductive health activities with the Ministry of Health.</li> <li>• Support regular and rapid reproductive health needs assessments and documentation.</li> <li>• Provision of quality sexual and reproductive health services through ensuring the availability (including procurement) of the Minimum Initial Service Package (MISP): of clean delivery kits, midwifery kits, post rape treatment kits (including PEP), antibiotics for the treatment of Sexually Transmitted Infections (STIs), essential contraceptive commodities including condoms in the health posts in IDP sites and throughout outreach health activities.</li> <li>• Refresher training of service providers on the clinical management of sexual violence.</li> <li>• Support the reopening of MoH structures in the affected areas (especially in the five main slums of Nairobi) by mobilising nurses, community midwives (for three months) and community-based distributors and equipping with essential health facilities delivery equipment, and inform the communities on available services.</li> <li>• Provision of hygiene kits (including sanitary materials) for the displaced and those affected in the slums of Nairobi.</li> <li>• Monitoring and evaluation and support to the MoH in the supervision of the emergency activities.</li> </ul> <p><b>Beneficiaries;</b> 500,000 affected population (especially targeting young people and women).</p> <p><b>Partners:</b> CDN, ADN, FHOK, MUMCOP, SAIDIA, CIPK, KRCS, MSK, Nairobi Women's Hospital and the MoH.</p>	<p><b>Total: 650,064</b></p> <p><i>Less CERF commitment 106,504</i></p> <p><b>New requirements 543,560</b></p>
IOM KEN-08/H07	<p><b>Project Title: Emergency Psychosocial Response for IDPs in Kenya</b></p> <p><b>Objective:</b> Conduct a rapid assessment of psychosocial needs, provide training and support for counsellors including specialised training in child therapy, establishment of counselling centres.</p> <p><b>Beneficiaries:</b> 170,000 displaced individuals (includes men, women and children) in Rift Valley Province.</p> <p><b>Partners:</b> Kenya Association of Professional Counsellors (KAPC), MoH Division of Mental Health and Division of Health Promotion.</p>	<p><b>180,000</b></p>

Health		
Agency	Project	\$
<b>IMC</b>  <b>KEN-08/H08</b>	<b>Project Title: Provision of health services.</b>  <b>Time frame:</b> Six months.  <b>Objectives:</b> Provision of integrated clinical and primary services to the affected populations including, treatment of general ailments, primary/preventive health services, reproductive health services, community health education.  <b>Strategy:</b> Providing integrated mobile clinic services in Kibera and Rift Valley region to provide curative, preventive (immunisation, nets, hygiene, health promotion through community health education) and rehabilitative (psycho-social support and trauma management) services to the affected populations.  <b>Activities</b> <ul style="list-style-type: none"> <li>• Public health services in the camps and affected areas.</li> <li>• Clinical services in camps and affected areas.</li> <li>• Clinical services in facilities.</li> <li>• Clinical services including outreach and mobile services affected areas.</li> <li>• Health promotion.</li> <li>• Disease surveillance.</li> <li>• Logistics (supplies and operations).</li> </ul> <b>Beneficiaries</b> IDPs, children under fives, women of reproductive age, PLWHAs, TB patients – 55,000 individuals.  <b>Partner:</b> MoH.	<b>250,000</b>

### 3.10 WATER AND ENVIRONMENTAL SANITATION

#### (UNICEF Cluster Lead)

##### 1. Context and Humanitarian Consequences

Up to 255,000 Kenyans have been displaced following post-election violence in the Western, Rift Valley, Nyanza and the Coast provinces of Kenya. This followed the disputed Presidential election results for the December 27, 2007 general election held in Kenya. More than 496 people have been killed in the violence. Many of the displaced continue to shelter in Police stations, churches, schools and other public facilities across the region. While some violence has been experienced in these regions during the past elections, the scale and severity of the current post-election violence is unprecedented. Kenya is looking at medium to long-term displacement of large populations.

Recent international efforts at mediation between the Government and opposition parties have collapsed setting the stage for further escalation of civil unrest especially in Western Region of Kenya. The opposition has now said it will seek other means of dealing with the Government.

Recent assessment reports by various agencies show that many of the displaced living in police stations and church compounds have very poor access to safe water and sanitation facilities. The Government has indicated that it will move the displaced from police stations and schools to Government land and other public utilities such as ASK Show grounds. This means many resettlement areas may not have water sources in place including sanitation facilities.

##### 2. Humanitarian Consequences and Needs Analysis

More than 496 people are reported to have been killed while over 255,000 people have been displaced. Many are in flight while others are in transit centres pondering their next move. Many of the victims are women and children currently seeking protective shelter in police stations, church compounds and other government institutions. Many of these transit centres do not have sufficient water sources to meet the demands of the IDPs. There is a serious risk of outbreak of water borne

diseases in many areas if movement for humanitarian assistance is not expedited and the assistance does not become available soon.

Many IDP centres are congested with limited sanitation facilities. Many people are relieving themselves in the compounds especially at night for fear of attacks if they walked to the latrines. Where water is available, storage facilities are lacking, IDPs do not have containers for collection and storage of water, water is not sufficient quality.

The Water and Sanitation Coordination Committee (WESCOORD) co-chaired by Ministry of Water and Irrigation (MoWI) and UNICEF has held a meeting of all sector actors including donors, international and local NGOs to harmonise sector response and coordinate sector interventions. All future assessments will be coordinated under WESCOORD coordination and will be done in a multi-agency approach. Lead agencies have been designated in some areas. For example, the African Medical and Research Foundation (AMREF) will lead the sanitation and hygiene response in the IDP camp in Jamhuri, Nairobi pending a comprehensive review. The following initial response actions have been taken to stabilise some centres:

- Completed an initial assessment of IDPs situation in Nairobi, Eldoret, Nakuru and surrounding areas;
- Provided following materials to Eldoret IDP camps: 4,680 20 litre jerry cans; bar soap – 5,000 pieces; rakes – 200; shovels– 100; wheelbarrows – 50; pick axes – 50; ten litre buckets – 4,000; water storage tanks- 4 collapsible tanks (35,000 litres); one 5,000 litre rigid tank; PUR Sachets- 750,000; Chlorine tablets- 750,000;
- Water trucking to various IDP centres by Ministry of Water;
- Rehabilitation of the Ministry of Water Borehole at Jamhuri for the IDPs;
- Installation of eight additional water points for Jamhuri IDPs;
- Six 5,000 litre tanks delivered to boost water storage in IDP centres in Central Province (Tigoni police station, Kaimbiu Chief camp, Kiramithu in Limuru);
- Construction of 20 ventilated improved pit (VIP) latrines in Jamhuri by Action Against Hunger (AAH);
- Deployed three technical staff to Nakuru, Nairobi, Eldoret and Kisumu to provide technical support to agencies and coordinate UNICEF interventions. One L3 Water and Environmental Sanitation (WES) officer from Regional Office for Eastern and Southern Africa (ESARO) to support the UNICEF Kenya Country Office response.

## **Response Plans**

### **Objectives**

The objectives of these responses are to: (1) ensure all IDPs have access to a minimum of 15 litres of drinking water per person per day; and, (2) ensure all IDPs have access to safe sanitation at the ratio of 20 persons per latrine.

As the UN lead agency for the water and sanitation sector, UNICEF will continue to work with the Government Ministries in charge of Water, Health and Education, the WFP and other UN agencies as well as various key international and national NGOs with an aim to contribute to the reduction in water and sanitation-related diseases by providing access to adequate quantities of safe water and proper sanitation facilities for the population affected by the disaster.

### **Strategies and Actions for the Next Six Months**

UNICEF intervention in the water and sanitation sector will start by focusing on the water trucking in stressed areas, rehabilitation of water systems where non-functional, and development of sources where non-existent especially in the areas to where IDPs may be moved. UNICEF will work through the national structures for coordination to maximise impact of interventions.

- Support emergency water trucking in stressed areas coordinated with food distribution by the WFP for IDPs. Water storage and collection vessels will be provided including reservoir tanks and water bladders, as well as jerry cans. An estimated 100,000 people and children, ranked to be most vulnerable population, will be provided with at least ten litres of safe drinking water for three months.
- Construct sanitation facilities in IDP camps to reduce the risks of WES disease outbreaks and improve on dignity of the affected population.

**KENYA**

- Provide hygiene and sanitation promotion messages to prevent WES diseases.
- Provide water quality testing kits, along with chemicals, to ensure that water quality monitoring is assured.
- Develop new water sources where existing systems are unavailable.

**Expected Impact**

- IDPs have access to reliable safe water and sanitation facilities and adopt safe hygiene and sanitation practices that prevent diseases.
- The outbreak and spread of infectious diseases are prevented.

**Table of proposed coverage per site**

SITE / AREA	ORGANISATIONS
Kisumu	World Vision (watsan), Oxfam (hygiene promotion), ActionAid (provide Ecolooos, water tanks, transport, supply of chemicals)
Nyamira	World Vision (watsan)
Nairobi	World Vision (watsan)
Mombasa	World Vision (watsan), ActionAid (provide Ecolooos, water tanks, transport, supply of chemicals)
Eldoret	CRS (watsan), Oxfam (hygiene promotion)
Nakuru	IRC (watsan), ActionAid (provide Ecolooos, water tanks, transport, supply of chemicals)
Noigam	CRS (watsan)
Turbo	CRS (watsan)
Burnt Forest	CRS (watsan)
Mole	IRC (watsan)

**Projects**

Water and Sanitation		
Agency	Project	\$
<b>UNICEF</b>  <b>KEN-08/WS01</b>	<p><b>Project Title: Provision of safe water and sanitation to IDPs in clash- affected areas.</b></p> <p><b>Objectives:</b> Assessment of water and sanitation needs of the affected population; Support for water trucking needs, including provision of water storage facilities such as bladder tanks; Emergency rehabilitation and repairs to water systems; Provision of purification chemicals for water treatment; provision of household water treatment chemicals/tablets; water storage containers and hygiene promotion and communication strategy to support programme objectives UNICEF cluster lead coordination role.</p> <p><b>Beneficiaries:</b> 100,000 persons (33,000 women, 50,000 children and 17, 000 men).</p> <p><b>Partners:</b> WV, KRCS, Oxfam GB, IRC, CRS, Action Aid, Ministry of Water, MoH, MoE, Office of the President, Arid Lands Project.</p>	<p><b>1,656,432</b></p> <p><b>Less CERF commitment</b> <b>842,625</b></p> <p><b>Govern. of Korea - 100,000</b></p> <p><b>Net requirements</b> <b>713,807</b></p>
<b>OXFAM GB</b>  <b>KEN-08/WS02</b>	<p><b>Project Title: Hygiene promotion in the IDP camps in Kisumu and Eldoret.</b></p> <p><b>Objective:</b> Support hygiene promotion activities for IDPs- hygiene promotion messages, hand washing and facilities, supply of soaps and garbage disposal and cleaning services.</p> <p><b>Beneficiaries:</b> 25,000 persons (7,000 women, 12,500 children and 5,000 men).</p>	<p><b>250,000</b></p>
<b>World Vision Kenya</b>  <b>KEN-08/WS03</b>	<p><b>Project Title: Provision of safe water and sanitation in Kisumu, Nyamira, Nairobi and Mombasa.</b></p> <p><b>Objective:</b> Water supply in camps, provision of storage tanks.</p> <p><b>Beneficiaries:</b> 30,000 persons (10,000 women, 15,000 children 5,000 men).</p> <p><b>Partner:</b> KRCS.</p>	<p><b>300,000</b></p>

**KENYA**

<b>Water and Sanitation</b>		
<b>Agency</b>	<b>Project</b>	<b>\$</b>
<b>Action Aid Kenya</b>  <b>KEN-08/WS04</b>	<b>Project Title: Provision of Ecolooos, water tanks, transport and supply of chemicals in Kisumu, Nakuru and Mombasa.</b>  <b>Objectives:</b> Support installation of eco friendly sanitation facilities- Eco Loos, improve storage water facilities, supply of chemicals and transport operations.  <b>Beneficiaries:</b> 25,000 persons ( 8,000 women, 12,500 children and 4,500 men)  <b>Partners:</b> KRCS.	<b>300,000</b>
<b>CRS</b>  <b>KEN-08/WS05</b>	<b>Project Title: Provision of safe water and sanitation in Noigam, show ground in Eldoret, Turbo and burnt forest.</b>  <b>Objective:</b> Support latrine construction, washing and bathing facilities.  <b>Beneficiaries:</b> 50,000 Persons 1(6,500 women, 25,000 children and 9,000 men).	<b>400,000</b>
<b>IRC</b>  <b>KEN-08/WS06</b>	<b>Project Title: Water and sanitation to post-election IDPs in Molo, Nakuru.</b>  <b>Objective:</b> Construction of water and sanitation facilities, hygiene promotion and education and supply of essential hygiene items.  <b>Beneficiaries:</b> 25,000 persons (7,000 women, 12,500 children and 5,000 men).  <b>Partner:</b> KRCS.	<b>250,000</b>

**Roles and Responsibilities**

UNICEF is the WASH Cluster lead for this emergency response and will take on the following roles and responsibilities:

- In collaboration with the State Authorities, the main purpose of the Water, Sanitation and Hygiene (WASH) Cluster Coordinator post is to provide leadership and facilitate the processes that will ensure a well coordinated, coherent, strategic, and effective WASH response in Kenya by a mobilised and adequately resourced groups of agencies, organisations, NGOs, local communities etc;
- Ensure inclusion of key WASH humanitarian partners in a way that respects their mandates and programme priorities;
- Act as focal point for inquiries on the WASH cluster's response plans and operations;
- Ensure appropriate coordination between all WASH humanitarian partners (national and international NGOs, the International Red Cross/Red Crescent Movement, etc...) through establishment/maintenance of appropriate WASH Cluster/sector coordination mechanisms, including working groups at the national and, if necessary, local level;
- Secure commitments from WASH humanitarian partners in responding to needs and filling gaps, ensuring an appropriate distribution of responsibilities within the WASH group, with clearly defined focal points for specific issues where necessary;
- Ensure the complementarity of different WASH humanitarian actors' actions;
- Promote WASH emergency response actions while at the same time considering WASH within early recovery planning as well as prevention and risk reduction concerns;
- Ensure effective links with other cluster/sector groups;
- Ensure that WASH coordination mechanisms are adapted over time to reflect the capacities of local actors and the engagement of development partners;
- Represent the interests of the WASH Cluster/sector in discussions with the Humanitarian Coordinator and other stakeholders on prioritisation, resource mobilisation and advocacy;
- Maintain information on all current and potential WASH partners, their capacities and areas of work (including Who, What, Where and by When).

### 3.11 LOGISTICS

#### Needs Analysis

The current violence in Kenya following the Kenya General Election on 30 December has led to the displacement of thousands of people who are now in need of humanitarian assistance. These vulnerable people will be further affected during this period of crisis by poor market stocks and the disruption of commercial logistics and distribution systems.

Through this Special Operation, WFP will provide the humanitarian community with essential logistics services aimed at filling current gaps in the supply chain. This special operation will have two components. The first immediate component will provide road transport and warehousing support in order to facilitate the relief deliveries to the people in need. The second component, air support, will be implemented in two phases: the first phase – also to be considered as an immediate requirement - will consist of the initial air assessment, while a second phase - if required - will consist of hiring a heavy duty helicopter, in order to reach those inaccessible by surface transport means.

Due to the limited duration of this operation, WFP will provide these services at no cost to the users. Furthermore, WFP will launch a platform for logistical coordination through the establishment of the logistics cluster.

#### Response Plan

##### Component 1 – Road Transport and Warehousing

1. Logistics Cluster coordination mechanisms will be established to facilitate logistical coordination and to identify and alleviate eventual gaps and bottlenecks. A Logistics Cluster Coordinator will be deployed to facilitate this task.
2. WFP will hire road transport capacity to transfer essential relief supplies on behalf of humanitarian community out of the established centres. Due to the limited duration of this project, WFP will provide both transport and warehousing support at no costs to the users. WFP will seek donor support to fund these activities.
3. WFP has currently adequate warehousing capacity for food items under its regular projects. Additional warehousing capacity will however be required to support other UN agencies and NGOs present at Eldoret with the storage of NFIs.

##### Component 2 – Air Support (phased approach)

1. During phase 1, WFP/United Nations Humanitarian Air Service (UNHAS) will charter or loan from the WFP's ongoing operation in Sudan one helicopter to be used to conduct assessments and – if necessary - ferry relief supplies to isolated communities.
2. Through the second phase of this project WFP/UNHAS may charter two MI-8 MTV helicopters able to transport up to 14 passengers or up to 2.5 MTs of cargo to be based at Eldoret Airport. The second phase will only be activated should the need arise.
3. The air component of the project will be phased out as soon as the situation reverts to normal with secure road access to the affected population in question and air operations no longer are required.

The total project cost for this Special Operation is estimated at \$2,035,875 as detailed in the budget. However, it is to be noted that WFP's key needs consist of component one in addition to the first phase of component two for a total estimated cost of \$617,150.

#### Objectives

- Identify and support the population in areas of difficult access and other groups at risk in the western region of Kenya through the provision of air support.
- Conduct aerial assessments; ensure essential staff movement and guarantee that medical evacuation (MEDEVAC) can be carried out through the provision of helicopter support.
- Support other UN agencies and NGOs in their humanitarian efforts by offering them warehouse and transport capacity.
- Ensure adequate logistical coordination amongst the humanitarian actors.

Logistics		
Agency	Project	\$
WFP KEN-08/CSS12	<p><b>Project Title: Humanitarian air and logistics augmentation to support the humanitarian community's assistance of the displaced population in Kenya.</b></p> <p><b>Objectives</b></p> <ul style="list-style-type: none"> <li>Identify and support the population in areas of difficult access and other groups at risk in the western region of Kenya through the provision of air support.</li> <li>Conduct aerial assessments; ensure essential staff movement and guarantee that MEDEVAC can be carried out through the provision of helicopter support.</li> <li>Support other UN agencies and NGOs in their humanitarian efforts by offering them warehouse and transport capacity;</li> <li>Ensure adequate logistical coordination amongst the humanitarian actors.</li> </ul> <p><b>Beneficiaries:</b> n/a</p> <p><b>Partners:</b> All humanitarian actors.</p>	617,150

### 3.12 COORDINATION

Under the auspices of the Expanded Disaster Management Team (which corresponds to an IASC Country Team), Clusters were established to facilitate the emergency response coordination. It was agreed that existing sectoral working groups would merge with the clusters, accepting the responsibility for global sectoral/cluster lead responsibilities in coordinating each sector. Once national coordination structures were re-activated, the clusters would merge with these existing groups and support the Government in coordinating the response of the international community. Over the next six months, international agencies will continue to work closely with Government partners as well as the KRCS to provide humanitarian relief and support early recovery efforts through the established sectoral coordination.

Immediate humanitarian needs for food, shelter, NFIs, medical assistance, clean water, and sanitation and the protection of affected populations have been identified, and are being addressed by numerous actors on the ground. In parallel, strategies for rebuilding livelihoods are also being developed. The coordination structure in place will continue to manage sectoral response of this emergency, and possibly beyond well into the recovery stage.

#### Objectives

- Maintain an overview of the humanitarian response including the needs and gaps per sector.
- Support the government coordination through effective coordination of the international response and inter-sectoral coordination.
- Improve information sharing and management during this emergency response.

#### Strategy

The UN in Kenya had already developed and was implementing a humanitarian strategy and had a functioning joint UN team on humanitarian response and disaster management. This was coordinated through the Office of the UNRC. On January 10, the Emergency Relief Coordinator, after consultation with the IASC, designated the Resident Coordinator as Humanitarian Coordinator in support of humanitarian leadership during this emergency. Humanitarian coordination will now be undertaken based on the recommended elements of humanitarian reform which involves the use of cluster working groups and the engagement of NGO and IO partners in regular policy, planning and response coordination of emergencies.

#### Response Plan

Capacities within the RC/HC's office will be strengthened in keeping with the newly delivered mandate. This includes an upgrade in the capacities within OCHA Kenya office to provide enhanced support to the RC/HC in her humanitarian coordination functions.

A temporary OCHA-led coordination office in Eldoret will help bridge the information gap and establish clusters at the field level during the emergency period. The field office will build coordination mechanisms keeping in view key objectives of the humanitarian response, without creating parallel mechanisms to those already established by the Government in light of the current response.

A Situation Centre will provide overall information management services for all partners and will collate cluster-based information on one web-based repository. Analysed data by each cluster will then be processed on maps for broader information dissemination on a geographical view. A monitoring and evaluation component will ensure the response is on course and delivering according to national priorities outlined by the Government of Kenya.

**TOTAL APPEAL FOR COORDINATION CLUSTER: \$500,000**

<b>Coordination</b>		
<b>Agency</b>	<b>Project</b>	<b>\$</b>
<b>United Nations RC/HC Office  KEN-08/CSS13</b>	<p><b>Project: Coordination of humanitarian action in Kenya.</b></p> <p><b>Objectives</b></p> <ul style="list-style-type: none"> <li>Strengthening the RC/HC function and building coordination linkages with all stakeholders including the National Disasters Operation Centre (NDOC) by providing coordination services and facilitating the delivery of overall humanitarian response for both relief and recovery, at national level and at field level.</li> <li>Service oriented coordination efforts will also reinforce active information flow between all stakeholders in the humanitarian community, including the Government of Kenya, flag overall humanitarian needs, identify gaps and develop synergies between cross cutting themes.</li> </ul> <p><b>Beneficiaries:</b> Government, aid agencies, and ultimately 500,000 persons affected by the violence.</p> <p><b>Partners:</b> Government of Kenya, OCHA, UN agencies and NGOs.</p>	<p><b>200,000</b></p>
<b>OCHA  KEN-08/CSS14</b>	<p><b>Project: Emergency response coordination.</b></p> <p><b>Objectives</b></p> <ul style="list-style-type: none"> <li>Set-up OCHA field office in Eldoret to support coordination mechanisms and maintain an overview of the humanitarian response.</li> <li>Building capacity for information/knowledge management through mapping, and creating a website as a platform to enhance information sharing during the emergency in the field and in Nairobi.</li> </ul> <p><b>Beneficiaries:</b> Government, aid agencies, and ultimately 500,000 persons affected by the violence.</p> <p><b>Partners:</b> Government of Kenya, UNICEF, UN agencies and NGOs.</p>	<p><b>300,000</b></p>

#### **4. ROLES AND RESPONSIBILITIES**

Overall Coordination is the responsibility of the Kenyan Government National Disaster Operations Centre based in Nairobi. The major sectors of Health and Nutrition, Education, Water and Sanitation and Food Aid have specific government coordinators led by responsible Ministries.

The United Nations Office of the Resident and Humanitarian Coordinator is the overall coordinator for the United Nations response and support to the Kenyan Government. Cluster leads and working groups have been determined and are chaired by the respective UN responsible agencies (Education – UNICEF, Food Aid – WFP, Protection – UNHCR, Early Recovery – UNDP, etc.)



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## KENYA

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At the time of the general revision of this flash appeal (usually to be conducted within one month of the flash appeal date) fuller information as to the Government of Kenya's plans and programmes will be incorporated into the Early Recovery response crystallising and better targeting the project support to the Government.

**Table III: Kenya Emergency Humanitarian Response Plan 2008**

List of Projects (grouped by cluster)

as of 16 January 2008

<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by the respective appealing organisation.

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Project Code	Appealing Organisation	Project Title	Original Requirements (US\$)
<b>CAMP COORDINATION AND CAMP MANAGEMENT</b>			
KEN-08/CSS01	UNHCR	Emergency Camp Management and Camp Administration Support to the Government of Kenya, Kenya Red Cross Society and Other Partners	628,967
KEN-08/CSS02	UNHCR	Emergency IDP Profiling to Determine Numbers and Protection Profiles of IDPs Hosted in Sites	110,210
KEN-08/CSS03	UNHCR	Emergency Camp Coordination for All Camps / Sites Hosting IDPs	107,000
KEN-08/CSS04	GTZ	Emergency Camp Management for Sites Hosting Kenyan IDPs in Nakuru, Molo, Njoro and Surrounding Areas	200,000
KEN-08/CSS05	IOM	Emergency Camp Management for Kenyan IDPs at Eldoret Showground Site and Other Surrounding Areas	450,000
KEN-08/CSS06	World Concern	Emergency Camp Management for Sites in Narok Hosting Kenyan IDPs	100,000
KEN-08/CSS07	CARE	Emergency Camp Management for Kenyan IDPs Hosted in Sites in Kericho District and Across Nyanza Province	440,000
KEN-08/CSS08	IRC	Emergency Camp Management for Kenyan IDPs Hosted in Sites in Kitale and Surrounding Areas	250,000
KEN-08/CSS09	NRC	Emergency Camp Management for Kenyan IDPs Hosted in Sites in Eldoret and Surrounding Areas	450,000
<b>Subtotal for CAMP COORDINATION AND CAMP MANAGEMENT</b>			<b>2,736,177</b>
<b>COORDINATION</b>			
KEN-08/CSS13	ORCHC	Coordination of Humanitarian Action in Kenya	200,000
KEN-08/CSS14	OCHA	Emergency Response Coordination	300,000
<b>Subtotal for COORDINATION</b>			<b>500,000</b>

The list of projects and the figures for their funding requirements in this document are a snapshot as of 16 January 2008. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service ([www.reliefweb.int/fts](http://www.reliefweb.int/fts)).

**Table III: Kenya Emergency Humanitarian Response Plan 2008**

List of Projects (grouped by cluster)

as of 16 January 2008

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Compiled by OCHA on the basis of information provided by the respective appealing organisation.

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Project Code	Appealing Organisation	Project Title	Original Requirements (US\$)
<b>EARLY RECOVERY</b>			
KEN-08/ER/I01	UNDP	Enhancing the Emergency Response Capacities of the Kenyan Authorities	500,000
KEN-08/ER/I02	FAO	Livelihood Support to Crisis Affected Rural Household in the Western and Rift Valley Provinces	500,000
KEN-08/ER/I03	OXFAM UK	Peace Building and Conflict Mitigation Early Response Project	750,000
KEN-08/ER/I04A	CARE	Livelihoods Recovery and Stabilization for Rural and Urban Population Affected by Post-Election Violence	500,000
KEN-08/ER/I04B	IMC	Livelihoods Recovery and Stabilization for Rural and Urban Population Affected by Post-Election Violence	500,000
KEN-08/ER/I05	ACORD	Re-establishment of Shelter and Livelihoods and Peace-Building Assistance in Western Kenya	400,000
KEN-08/ER/I06	IMC	Provision of Livelihood Support	200,000
KEN-08/ER/I07	WVK	Provision of Emergency Seeds and Tools	300,000
KEN-08/ER/I08	IRC	Early Recovery Health and WASH Projects for Returning Post-Election IDPs	185,000
KEN-08/ER/I09	World Concern	Restoration of Agricultural and Small Infrastructure to Support Rapid Recovery in Narok District	100,000
KEN-08/ER/I10	IOM	Return, Relocation and Reintegration of IDPs	750,000
KEN-08/ER/I11	UN-HABITAT	Immediate Support the Return, Reintegration and Resettlement of the Displaced Populations	1,200,000
KEN-08/ER/I12	UNDP	Coordination of Early Recovery	500,000
<b>Subtotal for EARLY RECOVERY</b>			<b>6,385,000</b>
<b>EDUCATION</b>			
KEN-08/E01	UNICEF	Bringing Emergency-Affected Children Back to School and Accessing Peace and Reconciliation Education	1,520,800
<b>Subtotal for EDUCATION</b>			<b>1,520,800</b>
<b>EMERGENCY TELECOMMUNICATIONS</b>			
KEN-08/CSS10	UNICEF	Inter-Agency Data Communications for Kenya Emergency Operations	292,000
KEN-08/CSS11	WFP	Setting up Common Security Telecommunications Services	858,378
<b>Subtotal for EMERGENCY TELECOMMUNICATIONS</b>			<b>1,150,378</b>
<b>FOOD</b>			
KEN-08/F01	WFP	Food Assistance to Drought-Affected People in Kenya (Budget Revision 12 Covers Populations Displaced or Affected by Post-Election Crisis in Kenya) [EMOP 10374.0]	10,204,932
<b>Subtotal for FOOD</b>			<b>10,204,932</b>

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**Table III: Kenya Emergency Humanitarian Response Plan 2008**  
 List of Projects (grouped by cluster)  
 as of 16 January 2008  
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Compiled by OCHA on the basis of information provided by the respective appealing organisation.

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Project Code	Appealing Organisation	Project Title	Original Requirements (US\$)
<b>HEALTH</b>			
KEN-08/H04	UNICEF	Health Needs of Internally Displaced Families and Host Families affected by Post Election Violence in Kenya	972,725
KEN-08/H05	WHO	Emergency Response to Post Election Crisis	1,410,000
KEN-08/H06	UNFPA	Reproductive Health Coordination and Services	650,064
KEN-08/H07	IOM	Emergency Psycho-Social Response for IDPs in Kenya	180,000
KEN-08/H08	IMC	Provision of Health Services	250,000
<b>Subtotal for HEALTH</b>			<b>3,462,789</b>
<b>LOGISTICS</b>			
KEN-08/CSS12	WFP	Humanitarian Air and Logistics Augmentation to Support the Humanitarian Community's Assistance of the Displaced Population in Kenya	617,150
<b>Subtotal for LOGISTICS</b>			<b>617,150</b>
<b>NUTRITION</b>			
KEN-08/H01	UNICEF	Prevention and management of malnutrition	1,500,000
KEN-08/H02	UNICEF	Assessment, Surveillance, Coordination and Communication	500,000
KEN-08/H03	IMC	Provision of Nutritional Support in Trans Nzoia	200,000
<b>Subtotal for NUTRITION</b>			<b>2,200,000</b>

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**Table III: Kenya Emergency Humanitarian Response Plan 2008**

List of Projects (grouped by cluster)

as of 16 January 2008

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Compiled by OCHA on the basis of information provided by the respective appealing organisation.

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Project Code	Appealing Organisation	Project Title	Original Requirements (US\$)
<b>PROTECTION</b>			
KEN-08/P/HR/RL01	UNHCR	Mainstreaming of HIV/AIDS in all Sectors of Emergency Response	30,000
KEN-08/P/HR/RL02	UNHCR	Protection Monitoring, Assessment and Intervention	821,225
KEN-08/P/HR/RL03	UNHCR	Tracking and Profiling of Internally Displaced Persons	553,725
KEN-08/P/HR/RL04	UNHCR	Management of the Protection Cluster	107,000
KEN-08/P/HR/RL05	IRC	Protection Support to Post-Election IDPs	200,000
KEN-08/P/HR/RL06	UNICEF	Psycho-Social Support	200,000
KEN-08/P/HR/RL07	UNICEF	Prevention and Response to Separated Children/Unaccompanied Minors	200,000
KEN-08/P/HR/RL08	UNICEF	Monitoring and Reporting of Child Rights Violations	100,000
KEN-08/P/HR/RL09	UNICEF	Child and Adolescent Participation in Protection and Community Rehabilitation	100,000
KEN-08/P/HR/RL10A	UNICEF	Gender-based Violence Emergency Prevention and Response	200,000
KEN-08/P/HR/RL10B	UNFPA	Gender-based Violence Emergency Prevention and Response	357,000
KEN-08/P/HR/RL11	IOM	Emergency Protection and Response for Vulnerable Stranded Internally Displaced Persons	643,868
KEN-08/P/HR/RL12	WVK	Protection of Children and Vulnerable Groups	95,831
<b>Subtotal for PROTECTION</b>			<b>3,608,649</b>
<b>SHELTER AND NON-FOOD ITEMS</b>			
KEN-08/S/NF01	UNHCR	Procurement and Distribution of Non-Food Items to Assist Displaced Persons in Kenya Including Contingency Stockpile for Any Eventual New Emergency	1,047,197
KEN-08/S/NF02	UNHCR	Procurement and Distribution of Transition Shelter Kit to Assist Displaced Persons in Kenya Willing to Return to Former Place of Residence in Rural Areas	2,953,200
KEN-08/S/NF03	UNHCR	Management of Shelter Cluster	107,500
KEN-08/S/NF04	IRC	Distribution of Essential Household Goods in Post-Election IDP Sites	125,000
KEN-08/S/NF05	CARE	Provision of NFIs and Temporary Shelter Material to Population Affected by Post-Election Violence	315,000
KEN-08/S/NF06	UNICEF	Shelter and Household Items Support to Conflicts' Affected Children and Women	550,000
KEN-08/S/NF07	NRC	Emergency Shelter Assistance to the Displaced in Kenya: Basic Temporary Shelter and NFI	1,068,750
KEN-08/S/NF08	UN-HABITAT	Assessment of Shelter Damages and Needs and Provision of Technical Advice	230,000
<b>Subtotal for SHELTER AND NON-FOOD ITEMS</b>			<b>6,396,647</b>

The list of projects and the figures for their funding requirements in this document are a snapshot as of 16 January 2008. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service ([www.reliefweb.int/fts](http://www.reliefweb.int/fts)).

**Table III: Kenya Emergency Humanitarian Response Plan 2008**

List of Projects (grouped by cluster)  
as of 16 January 2008  
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Compiled by OCHA on the basis of information provided by the respective appealing organisation.

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Project Code	Appealing Organisation	Project Title	Original Requirements (US\$)
<b>WATER AND ENVIRONMENTAL SANITATION</b>			
KEN-08/WS01	UNICEF	Provision of Safe Water and Sanitation to IDPs in Clash Affected Areas	1,656,432
KEN-08/WS02	OXFAM UK	Hygiene Promotion in the IDP Camps in Kisumu and Eldoret	250,000
KEN-08/WS03	WVK	Provision of Safe Water and Sanitation in Kisumu, Nyamira, Nairobi and Mombasa	300,000
KEN-08/WS04	AAK	Provision of Ecolooos , Water Tanks, Transport and Supply of Chemicals in Kisumu, Nakuru and Mombasa	300,000
KEN-08/WS05	CRS	Provision of Safe Water and Sanitation in Noigam, Show Ground in Eldoret, Turbo and Burnt Forest	400,000
KEN-08/WS06	IRC	Water and Sanitation to Post-Election IDPs in Molo, Nakuru	250,000
<b>Subtotal for WATER AND ENVIRONMENTAL SANITATION</b>			<b>3,156,432</b>
<b>Grand Total</b>			<b>41,938,954</b>

The list of projects and the figures for their funding requirements in this document are a snapshot as of 16 January 2008. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service ([www.reliefweb.int/fts](http://www.reliefweb.int/fts)).

**Table IV: Kenya Emergency Humanitarian Response Plan 2008**

Summary of Requirements - by Sector  
as of 16 January 2008  
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by the respective appealing organisation.

<b>Sector Name</b>	<b>Original Requirements (US\$)</b>
COORDINATION AND SUPPORT SERVICES	5,003,705
ECONOMIC RECOVERY AND INFRASTRUCTURE	6,385,000
EDUCATION	1,520,800
FOOD	10,204,932
HEALTH	5,662,789
PROTECTION/HUMAN RIGHTS/RULE OF LAW	3,608,649
SHELTER AND NON-FOOD ITEMS	6,396,647
WATER AND SANITATION	3,156,432
<b>Grand Total</b>	<b>41,938,954</b>

The list of projects and the figures for their funding requirements in this document are a snapshot as of 16 January 2008. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service ([www.reliefweb.int/fts](http://www.reliefweb.int/fts)).

## ANNEX I.

## ACRONYMS AND ABBREVIATIONS

AAH	Action Against Hunger
AAK	Action Aid Kenya
ACK	Anglican Church of Kenya
ACORD	Agency for Cooperation and Research in Development
ADN	Archdiocese of Nairobi
AIDS	Acquired Immuno-deficiency Syndrome
ALRMP	Arid Lands Resource Management Project
AMREF	African Medical and Research Foundation
ANPPCAN	African Network for the Prevention and Protection Against Child Abuse and Neglect
ART	Anti-retroviral Therapy
BCPR	Bureau of Crisis Prevention and Recovery
CA	Christian Aid
CARE	Cooperative for Assistance and Relief Everywhere (International)
Caritas Kenya	Catholic Church
CBO	Community-based Organisation
CCCM	Camp Coordination and Camp Management
CCF	Christian Children's Fund
CDA	Coastal Development Authority
CDN	Catholic Diocese of Nakuru
CERF	Central Emergency Response Fund
CIPK	Council of Imams and Preachers of Kenya
CRS	Catholic Relief Services
CSB	Corn Soya Blend
CTC	Child to Child
DC	District Commissioner
DHMT	District Health Management Team
DHP	Division of Health Promotion
DMH	Division of Mental Health
DPHO	District Public Health Office
DRC	Democratic Republic of the Congo
EPI	Expanded Programme on Immunisation
ER	Early recovery
ERA	Early Recovery Adviser
ESARO	Regional Office for Eastern and Southern Africa
FAO	Food and Agriculture Organization
FBO	Faith-based organization
FHOK	Family Health Options Kenya
FIDA	International Federation of Women Lawyers
GBV	Gender-based Violence
GTZ	Deutsche Gesellschaft für Technische Zusammenarbeit
HC	Humanitarian Coordinator
HIV	Human Immuno-deficiency Virus
HLP	Housing, Land, and Property
IASC	Inter-Agency Standing Committee
ICRC	International Committee of the Red Cross
ICT	Information and Communication Technologies
IDCCS	Inter Diocesan Christian Community Services
IDP	Internally Displaced Person
IEC	Information, Education, and Communication
IGA	Income-generating Activities
ILO	International Labour Organization
IMC	International Medical Corps
IOM	International Organization for Migration
IRC	International Rescue Committee



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**KENYA**

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KADET	Kenya Agency to Development of Enterprise and Technology
KAPC	Kenya Association of Professional Counsellors
KMN	Kenya Media Network
KRCS	Kenya Red Cross Society
LAN	Local Area Network
LED	Light Emitting Diode
MEDEVAC	Medical Evacuation
MERLIN	Medical Emergency Relief International
MFI	Microfinance Institution
MISP	Minimum Initial Service Package
MoE	Ministry of Energy/Ministry of Education
MoH	Ministry of Health
MoJ	Ministry of Justice
MoSP	Ministry of Special Programmes
MoWI	Ministry of Water and Irrigation
MoYA	Ministry of Youth Affairs
MSF	Médecins sans Frontières
MSK	Marie Stopes Kenya
MUMCOP	Mumias Muslim Community Outreach Programme
MYW	Maendeleo ya Wanawake
NAC	National Alliance of Churches
NACC	National AIDS Control Council
NCKK	National Council of Churches of Kenya
NDOC (NOC)	National Disasters Operation Centre
NGO	Non Governmental Organisation
NOC	National Operations Centre
NRC	Norwegian Refugee Council
NSCPBCR	National Steering committee on Peace-building and Conflict Resolution
NWH	Nairobi Women's Hospital
OCHA	Office for the Coordination of Humanitarian Affairs
ODM	Orange Democratic Movement
PeaceNet	Peace and Development Network of Kenya
PEP	Post-exposure Prophylaxis
PHMT	Provincial Health Management Team
PLWHA	People Living with HIV/AIDS
PNU	Party of National Unity
SC	Save the Children
SF	Shelter Forum
SGBV	Sexual and Gender-Based Violence
SMC	Student Mobilisation Centre
STI	Sexually Transmitted Infection
TB	Tuberculosis
TNI	Tasaru Ntomonok Initiative
TPO	Trans-cultural Psycho-social Organization
UNCT	United Nations Country Team
UNDP	United Nations Development Programme
UNDSS	United Nations Department of Safety and Security
UNFPA	United Nations Population Fund
UN-HABITAT	United Nations Human Settlements Programme
UNHAS	United Nations Humanitarian Air Service
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
UNIDO	United Nations Industrial Development Organization
UNON	The United Nations Office at Nairobi
US	United States
VIP	Ventilated Improved Pit
VSF	Vétérinaires sans Frontières
WC	World Concern

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**KENYA**

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WES	Water and Environmental Sanitation
WESCOORD	Water and Sanitation Coordination Committee
WFP	World Food Programme
WHO	World Health Organization
WR	World Relief
WRAP	Women's Rights Awareness Programme
WVK	World Vision Kenya

## Consolidated Appeals Process (CAP)

The CAP is a tool for aid organisations to jointly plan, coordinate, implement and monitor their response to disasters and emergencies, and to appeal for funds together instead of competitively.

It is the forum for developing a strategic approach to humanitarian action, focusing on close cooperation between host governments, donors, non-governmental organisations (NGOs), the International Red Cross and Red Crescent Movement, International Organization for Migration (IOM), and United Nations agencies. As such, it presents a snapshot of the situation and response plans, and is an inclusive and coordinated programme cycle of:

- Strategic planning leading to a Common Humanitarian Action Plan (CHAP);
- Resource mobilisation leading to a Consolidated Appeal or a Flash Appeal;
- Coordinated programme implementation;
- Joint monitoring and evaluation;
- Revision, if necessary;
- Reporting on results.

The CHAP is the core of the CAP – a strategic plan for humanitarian response in a given country or region, including the following elements:

- A common analysis of the context in which humanitarian action takes place;
- An assessment of needs;
- Best, worst, and most likely scenarios;
- A clear statement of longer-term objectives and goals;
- Prioritised response plans, including a detailed mapping of projects to cover all needs;
- A framework for monitoring the strategy and revising it if necessary.

The CHAP is the core of a Consolidated Appeal or, when crises break out or natural disasters strike, a Flash Appeal. Under the leadership of the Humanitarian Coordinator, and in consultation with host Governments and donors, the CHAP is developed at the field level by the Humanitarian Country Team. This team includes IASC members and standing invitees (UN agencies, the International Organisation for Migration, the International Red Cross and Red Crescent Movement, and NGOs that belong to ICVA, Interaction, or SCHR), but non-IASC members, such as national NGOs, can also be included.

The Humanitarian Coordinator is responsible for the annual preparation of the consolidated appeal document. The document is launched globally near the end of each year to enhance advocacy and resource mobilisation. An update, known as the Mid-Year Review, is presented to donors the following July.

Donors generally fund appealing agencies directly in response to project proposals listed in appeals. The **Financial Tracking Service (FTS)**, managed by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), is a database of appeal funding needs and worldwide donor contributions, and can be found on [www.reliefweb.int/fts](http://www.reliefweb.int/fts).

***In sum, the CAP is how aid agencies join forces to provide people in need the best available protection and assistance, on time.***

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