



PEOPLE IN NEED (burden of acute malnutrition)
- ASAL, URBAN & refugee

Before the Crisis

404,100

Children Under five (370,300) and Pregnant and Lactating women (33,800)

Targets before crisis as of August 2016

256,200

Children Under five (222,400) and Pregnant and Lactating women (33,800)



NUMBER OF PARTNERS

20+



PEOPLE IN NEED (burden of acute malnutrition) - ASAL, URBAN & refugee

During the crisis

483,200

412,297 under fives and 43,452 pregnant and lactating women with acute malnutrition

Target as of May 2017 (75% SAM 50% MAM)

299,200

Children Under five (255,800) and Pregnant and Lactating women (43,400)

Target for Prevention – Blanket supplementary feeding

553,258

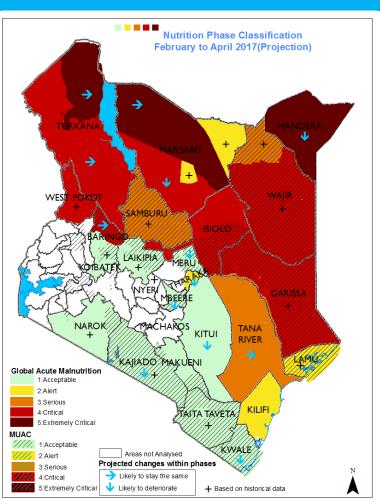
Children Under five (452,324); Pregnant and Lactating women (100,934)

REQUIRMENTS (US\$)

Primary evaluation:

Current nutrition situation in Kenya

Turkana June 2017 Results:

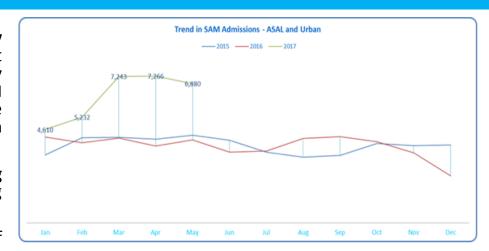


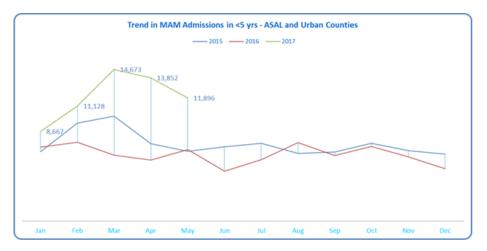
KEY HIGHLIGHTS

- Mid season food security assessment conducted in May 2017
- Increased admissions noted across all Arid and Semi Arid Counties indicating both a deteriorating situation and increased response activities
- Nutrition surveys underway in July 2017 to update the IPC maps and overall situation in relation to the performance of the Long rains season. Turkana Survey done in June 2017 and significant deterioration noted.
 - •Turkana North GAM 34.1% SAM 8.6%
 - •Turkana South GAM 37% SAM 12%
 - •Turkana Central GAM 31.4% SAM 8%
 - •Turkana West GAM 23.4% SAM 6.4%
- Multiple disease outbreaks continue: Cholera: active in 8 counties (Garissa, Nairobi, Muranga, Turkana, Kiambu, Nakuru, Vihiga & Mombasa); Measles: 14 measles cases (zero deaths) reported refugee camps: Dengue Fever: Mombasa county (795 cases) and Wajir county (67 cases): Kala azar: Marsabit county (52 cases with one death) and Wajir county (99 cases with 4 deaths)
 Title of Presentation UNICEF for every child

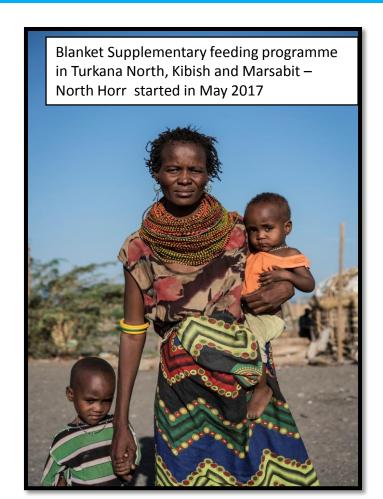
Current Nutrition Sector Response in Kenya

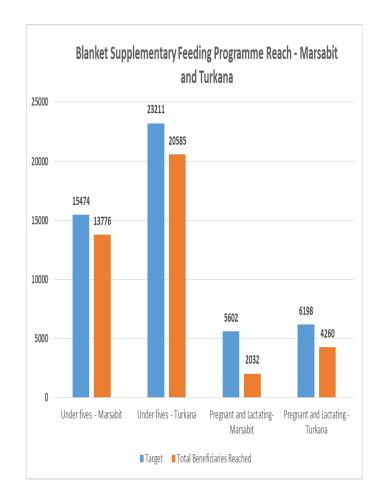
- A total of 37,121 severely and 71,461 moderately malnourished children were admitted for treatment in the 5 month period between January and May 2017. Out of these 31,322 SAM and 60,396 MAM were admitted in ASAL and Urban counties while 5,799 SAM and 11,067 MAM were admissions in refugee camps.
- 34,354 out of a target 43,452 pregnant and lactating women have been reached over the same reporting period
- The increased admissions is attributed to scale up of outreach services through mobile clinics with qualified personnel moving out to cover catchment areas that are hard to reach
- Integrated health and nutrition outreach programme on going in 17 ASAL counties reaching even more children and women with diverse services including vaccination , supplementation with key micronutrients – Vitamin A, IFAS, , treatment of common ailments and other diagnostics as well as Ante natal care





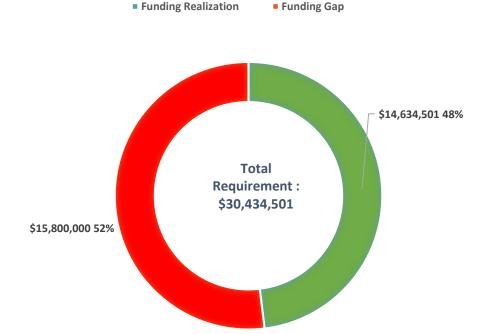
Blanket Supplementary Feeding Prevention Programme 2017





Blanket Supplementary Feeding

BLANKET SUPPLEMENTARY FEEDING PROGRAMME REALIZATION STATUS JULY 2017



- Cost estimate was based on February 2017
 estimate, that was for 4 .5 counties until October 2017
- Current situation warrants a further extension of the BSFP until end of year at the earliest.
 Additional counties will need to be covered based on the results of the current round of nutrition surveys and the prevailing food security situation
- Current gap to October is 15.8 Million USD, until December the gap is 11 Million USD THIS IS THE GAP for only 4.5 COUNTIES

Current Nutrition Sector response in Kenya





Coordination scale up:

- National level: Sector wide including with other key Ministries, agencies, Donors, Implementing partners
- National and County level engagement enhanced: weekly updates and reports from County and bi weekly follow up calls with the Counties to monitor the situation
- Monthly MOH Convened Emergency Advisory Committee Meeting that is complemented by a weekly follow up by a smaller focal group comprised of MOH, KRCS, UNICEF & WFP

Supply Chain Scale Up

- Regular analysis, planning and prepositioning of supplies for treatment and prevention
 - ✓ RUTF pipeline secure until December 2017 for SAM children
 - ✓ RUSF pipeline secure until December 2017 for MAM children
 - ✓ CSB pipeline: current stock: GOK has 20,000 bags of CSB @ 25 kgs, this is 5 mts, for 30,000 PLW we need 225mts . MAJOR FUNDING GAP. For MAM women
 - ✓ Super cereal plus for BSFP pipeline secure until END JULY 2017 : MAJOR FUNDING GAP FOR TURKANA AND OTHER COUNTIES





Strategic Nutrition Priorities

- Revision of the Sector preparedness and response plan to estimate the gap based on the current situation
- Continue scale up of integrated health and nutrition outreach programmes across the most affected counties: including strategy review in lieu of health workers strike
- Continue / enhance supply chain monitoring, enhance efforts on proper forecasting and ordering to avoid any stock outs
- Resource mobilization for full funding and roll out of Blanket supplementary feeding until December 2017
- Monitoring and responding to electoral related conflict given the period in Kenya
- Continued surveillance including regular situation updates and feedback within the levels of government with strong linkage to response
- Engage in strategic advocacy, using evidence: Cost of diet has been very useful in lobbying the increase of cash transfer values in affected counties and in agitating/lobbying for a stronger food sector response





Challenges in Realizing Strategic Nutrition Priorities

- Health workers unrest: frequent disruption of services, and where they are offered, reporting of information is not optimal
- Electioneering period: shift in gears
- Slow pace in funding realization for the blanket supplementary feeding programme
- Inadequate food sector response in the most affected counties, vis a vis cash response and its optimization





Gaps

Highlight key gaps:

- **Human Resources:** To be determined, however, surge teams being recruited by partners to boost Ministry of Health capacity for service delivery. Further costing to be reflected in the response plan
- Financial Resources: To Be determined in the current response plan update
- Supplies: Provisional Gap of 26.8 M for BSFP for 4.5 counties, Gap of 2 M USD for SFP that covers
 Pregnant and Lactating Women





Key Asks to GNC Partners

- Support resourcing of the sector response plan
- Support advocacy priorities of the sector
- Liaison with country teams (especially for INGOS) in conforming to sector coordination arrangements



