



Joint Assessment Mission – Kenya Refugee Operation

Dadaab (23 - 27 June 2014) and Kakuma (30 June – 1 July 2014) Refugee camps

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Executive Summary

The 2014 WFP and UNHCR Joint Assessment Mission (JAM) was undertaken in both Dadaab and Kakuma refugee camps in Kenya; 23rd – 27th June 2014 for Dadaab and 30th June – 3rd July 2014 for Kakuma. Dadaab refugee complex is located within the Garissa County, North East of Kenya while Kakuma refugee camp is located within the Turkana County, North West of Kenya. The host communities in Dadaab and Kakuma are predominantly pastoralists given the harsh climatic conditions that characterize these counties.

The two refugee camps were initially established, almost simultaneously, around 1991 to provide temporary shelter to asylum seekers fleeing war in Somalia and Sudan respectively.

In accordance with its unique mandate for the provision of international protection to refugees, UNHCR is the lead agency coordinating humanitarian activities in the two refugee camps and works closely with the Government of Kenya through the Department for Refugee Affairs (DRA), which has an overall responsibility for the provision of protection and assistance to refugees in Kenya. World Food Programme (WFP) has the mandate of feeding all refugees and other persons of concern to UNHCR in the camps, including those recognized and/or registered by the Government of Kenya. The main cooperating partners for UNHCR and WFP are national and international Non-Governmental Organizations (NGOs) who support in implementation of various programmes. The NGOs include: Cooperative Assistance Relief Everywhere (CARE), Norwegian Refugee Council (NRC), Danish Refugee Council (DRC), International Rescue Committee (IRC), Islamic Relief Worldwide Kenya (IRK), Jesuit Refugee Service (JRS), Lutheran World Federation (LWF), National Council of Churches of Kenya (NCCCK), Rural Reconstruction Development Organisation (RRDO), Windle Trust Kenya (WTK) and World Vision among others.

Since the establishment of the camps, Kenya has seen a continuous influx of refugees. At the time of the current JAM, Kenya had 569,453 refugees and asylum seekers hosted in Dadaab (356,879) and Kakuma (162,482) camps,¹ and also in Nairobi (50,092). The majority of the refugees are from Somalia followed by those from South Sudan. This is as a result of a protracted civil conflict and generalised violence in the Horn of Africa and the Great Lakes region dating back to the early 1990s, which compelled many Somalis and South Sudanese, as well as refugees from other neighbouring countries to flee their countries into Kenya.

Every two successive years, WFP and UNHCR undertake an assessment of the food security and nutrition situation in both Dadaab and Kakuma camps jointly with donors, the Government of Kenya, NGO partners and the refugees themselves. The key findings of this participatory process feed into the elaboration of the subsequent

¹ UNHCR. Population updates, 2014

Joint Plan of Action (JPA), which facilitates implementation of the JAM recommendations. The previous one took place in 2012 and the 2014 JAM takes stock of what has been accomplished with regard to the recommendations then.

This JAM took place against the backdrop of significant events. In 2013, a Tripartite Agreement was signed by the Government of Kenya (GoK), the Federal Government of Somalia (FGoS) and the United Nations High Commissioner for Refugees (UNHCR), outlining responsibilities of the parties to ensure a voluntary repatriation process for Somali refugees from Kenya under the auspices of a Tripartite Commission. In Kakuma camp, the influx of new asylum seekers from South Sudan has been witnessed since mid-December 2013 after generalised violence broke out in the country. The signing of the tripartite agreement for voluntary repatriation of Somali refugees and the influx of the South Sudanese refugees had an impact separately in both Dadaab and Kakuma camps in relation to security, livelihoods and future programming. In early 2014, the Government of Kenya (GoK) launched a security operation targeting illegal immigrants in Nairobi and other urban centres dubbed '*Usalama Watch*'.² This has impacted on urban refugees, with many of them compelled to move to Dadaab and Kakuma camps after great disruption of their livelihoods and family ties in the urban areas.

Following are some major milestones, since the 2012 JAM, relating to Kenya Refugee Operation:

1. Establishment of a new food distribution structures in Kambioos camp of Dadaab, fulfilling 2012 JAM recommendations
2. Piloting of alternative transfer modality (Fresh Food Voucher - FFV in Dadaab)
3. Undertaking of refugee verification exercise in Dadaab, and biometrics food distribution system for both Kakuma and Dadaab camps
4. Major evaluations and assessments (WFP PRRO 200174 Operation Evaluation, Refugee Camps Markets Survey, FFV pilot project evaluation, Comprehensive Needs Assessment - CNA among others)
5. South Sudan crisis: influx of South Sudanese
6. Signature of the Tripartite Agreement for the repatriation of Somali refugees

² Independent Policing Oversight Authority 2014. *Monitoring on Operation Sanitization Eastleigh, publicly known as usalama watch*.

1 Summary of Key Recommendations

Note: more details on the key recommendations and additional operational recommendations are elaborated within each thematic area.

Food security and coping mechanisms

1. WFP should maintain and as far as possible improve the current food basket.
2. Introduce alternative transfer modalities on incremental basis, particularly the voucher system, taking into consideration any protection concerns that may arise.
3. WFP and UNHCR should continue with the use of new food collection procedures and address operational issues as far as possible.
4. WFP and UNHCR to lead all stakeholders in conducting comprehensive vulnerability assessment and mapping to inform possibility of targeting for differentiated assistance while ensuring that all protection concerns are addressed (see also under coordination section below).
5. WFP to construct permanent FDP structures in Kambioos, Ifo2 and Kakuma 4 as well as continuous renovation of existing distribution points.
6. WFP to endeavour to provide at least 50% of cereals in milled form or provide milling capacity.
7. Enhancement of monitoring of efficiency and effectiveness (network systems, alternate food collectors) of biometrics system in food distribution.
8. Incremental introduction of alternative transfer modality (cash or voucher) to replace portion of cereals.
9. UNHCR/WFP to review Complementary Food provisions with view of demonstrating impact, re-adjusting for better targeting and ensuring smooth supply.
10. Considering increasing food costs and challenges of resourcing, it is plausible that sorghum may continue being part of the food basket for the refugees in Kenya. However, WFP should endeavour to provide the preferred white sorghum variety that does not turn black on cooking.

Logistics and warehousing, NFIs and roads

1. WFP and UNHCR should undertake joint resource mobilization for inter-camp roads rehabilitation and maintenance.
2. UNHCR and WFP to lobby with the National Government to improve road conditions along the main supply corridors to the refugee camps, and where possible seek strategic partnerships in accomplishing this task.
3. A market assessment on the transport pricing rates by local transporters be conducted in Garissa and Turkana Counties and incorporated in the contingency or operations continuity plans of the two Sub Offices.

Health and nutrition

1. Strengthen BSFP's (6-23 months) effective linkage to growth monitoring and ensure proper utilization of products.

2. Scale up Maternal Infant and Young Child Nutrition (MIYCN) program implementation and ensure it is integrated in health and nutrition programmes.
3. Incorporate anaemia screening and referral in growth monitoring process.
4. Pending the finalization of the new IMAM guidelines, UNHCR and WFP should review the practice in the region and also in Kenya and support partners to report appropriately; owing to conflicting criteria between the national IMAM guidelines and the UNHCR/WFP guidelines, both agencies should work towards a harmonized criterion to avoid premature discharges of beneficiaries.
5. Need to include chronically ill cases (diabetes/hypertensive cases) as part of the target groups for FFV as an alternative food delivery modality to allow for diversity and freedom of choice, which is currently lacking for this caseload.
6. Support of Chronically ill and severely malnourished cases by UNHCR and WFP should be expanded beyond Multi Drug Resistant Tuberculosis patients with severe acute malnutrition (SAM).
7. The BSFP programme for children between 6-23 months should be sustained.
8. UNHCR/WFP/Partners to ensure that the distribution of SUPERCEREAL PLUS is linked to growth monitoring of the child's nutritional status coupled with counselling on appropriate infant feeding at health facilities in order to realize better outcomes of the programme.
9. UNHCR/WFP and partners to enhance information campaigns on proper utilization of the Super cereal product to boost awareness/knowledge amongst the beneficiaries.
10. In Dadaab camp, the current delivery model for BSFP at the FDPs should be revised, if programme outcomes are to be achieved. The programme should be preferably shifted to the health posts to allow for integration with other nutrition activities like growth monitoring and health education. In case this is not feasible, the current practice can continue but with a soft condition to prove that mothers have attended growth monitoring and health education sessions at the health posts.
11. In Kakuma, the mode of delivery of product should remain at the health clinic. Logistic staff for commodity management should be increased while the nutrition teams are left to improve the effectiveness of GMP and IYCN programmes.
12. In Dadaab, growth monitoring and nutrition counselling infant and young child nutrition (IYCN) programmes at the health post should be reviewed and fully integrated into the existing nutrition programmes for optimal mother, infant and young child nutrition (MIYCN) practices with focus on proper use of the energy and nutrient – dense Super Cereal Plus. MIYCN structures need to be strengthened at both community and facility levels for effective BSFP programme implementation. Staffing structures and numbers should be addressed.
13. UNHCR and partners should review the minimum staffing requirement for the nutrition programmes and ensure that funding is prioritized for critical nutrition services in management of acute malnutrition among children and

chronic cases. This will also guarantee sustainability of MIYCN programme in Dadaab after the Action Contre La Faim (ACF) withdrawal.

14. Establishment of a stabilization centre for management of children with complicated severe acute malnutrition in Kambioos sub-camp to improve access and early treatment of severe acute malnutrition with complications.
15. UNHCR and partners to scale up the MIYCN programme implementation in all camps in Kakuma and Dadaab. All the established existing mother-to-mother-support groups should be maintained and the referral mechanism in place should be kept active.
16. Visual screening and referral of children with symptoms of anaemia among children (6-23 months) be incorporated into growth monitoring at the health posts. This should reduce the prevalence of moderate and severe cases while IYCN programmes will focus on optimal feeding *to mild cases of anaemia*.

Education and School Meals Programme

1. Retain the current School Meals Programme (SMP), but replace the Take Home Ration Component (THR) with other enabling complementary services for girls.
2. WFP/UNHCR/partner's should conduct an internal or external evaluation to determine impact of SMP.
3. Mainstream complementary education programs (Accelerated Learning Programme - ALP and Alternative Basic Education - ABE) into regular schools so that the learners may benefit from complementary services such as SMP.
4. WFP and UNHCR to (1) rehabilitate the dilapidated kitchens in specific schools and (2) ensure the establishment of new schools is accompanied with the construction of kitchen facilities to guarantee the commencement of school meals programme with the opening of new schools.
5. WFP and UNHCR to undertake an assessment for both the Take Home Ration and the School Meals Programme to determine their impact on girls' attendance as well as the overall attendance for both boys and girls.

Environment, cooking energy, water and sanitation

1. UNHCR/WFP to develop energy strategy and roll out mixed cooking energy solution as part of the energy strategy.
2. UNHCR and WFP to scale up distribution of energy saving stoves in Dadaab and Kakuma
3. UNHCR to ensure that an environmental management strategy for Kakuma is elaborated as is the case for Dadaab. These must be aligned with the Garissa and Turkana County governments environment protection plans.
4. UNHCR to work with County Public Health Units to ensure meat inspection is undertaken in both camps.
5. UNHCR to maintain the current mechanism of recruiting the WASH committee in order to create ownership and sustainability of WASH outcomes and practices.

Coordination: refugee influx, Voluntary repatriation and self-reliance

1. WFP and UNHCR to undertake vulnerability assessment with a view to implementing differentiated assistance in the next 2-3 years depending on the outcome of the assessment.
2. Strengthen livelihood support to the refugees to reduce over-dependence on humanitarian assistance.
3. UNHCR to undertake population verification in Kakuma as soon as the situation with new arrivals stabilises.
4. UNHCR/DRA to fast-track registration of new born babies in Dadaab.
5. Opening another camp in Kakuma incorporating a self-reliance approach to be pursued by UNHCR and DRA without which further pressure will be exerted on the fragile ecosystem as well as on the livelihoods of refugees and the Turkana host communities in the vicinity of the camp.
6. UNHCR and the civil society to continue advocating with the national government on refugee freedom of movement to facilitate self-reliance and livelihood opportunities.
7. Food for Assets (FFA) projects should be redesigned and integrated within the county development plans for Garissa and Turkana counties respectively; with clear objectives and outcomes in the next WFP PRRO.
8. UNHCR should harmonize registration and inclusion of new born babies into feeding manifests in Dadaab camp.
9. WFP and UNHCR should through active involvement of refugee community revise the biometric food collection methodologies especially as regards designation of alternate food collectors. This should be tailored to meet the unique circumstances of the disabled, the sick, the elderly and others with special needs.
10. UNHCR and DRA should improve on coordination and information sharing regarding registration process with refugees, including any structured schedules.

Host community and security issues

1. Host community respondents interviewed during the JAM process described FFA as a valued project with immediate and long-term benefits to the community.
2. A re-designed food for assets project integrated within the county development plans of Garissa and Turkana counties, with clear objectives and outcomes should be part of the next WFP PRRO.
3. The use of armed escorts will continue to play pivotal role in support of operations and delivery of services in Dadaab.

2 Methodology

The 2014 WFP and UNHCR Joint Assessment Mission (JAM) set out to assess the overall service provision including supply of food and non-food items as well as their impact on food security and nutrition status of the beneficiaries in both Dadaab and Kakuma refugee camps. The mission comprised donor representatives, staff from WFP, UNHCR, Government of Kenya and various national and international NGOs undertaking various specialized assistance programmes within the refugee camps.

2.1 Data Collection and Design

The mission commenced with an extensive review of the relevant secondary data sources and documentation such as major assessment reports, regular field based situation reports as well as policy documents from WFP, UNHCR and the GOK that have a direct or indirect relevance to the refugee situation in Kenya. In addition, a review of data collection tools was undertaken to ensure their relevance to the context of both Kakuma and Dadaab.

The JAM undertook the first field exercise in Dadaab between 23rd and 27th June 2014 and was followed by a similar exercise in Kakuma refugee camp between 30th June and 3rd July 2014. The aim of the field exercise was to collect qualitative data on the current service provision with more focus on supply and usage of food and non-food items within the context of the refugee operations. The field visit involved observations, structured and semi structured interviews with refugee households, key informant interviews, and focus group discussions (FGDs). At the end of each field day, a plenary session, involving technical, management and field-based staff, was held with a view to interrogating the emerging findings and tentative recommendations. The plenary sessions also played a role in data verification and validation to ensure that findings emerging from the primary data collection were appropriately triangulated with the existing documentation.

2.2 Data Analysis

Both primary and secondary data were then presented and analysed in six thematic areas as outlined in the Terms of Reference (see annex) for the WFP and UNHCR 2014 JAM, as well as in accordance with the WFP and UNHCR Joint Assessment Mission guidelines.³ The thematic areas were classified as follows:

1. Contextual Issue 1: Food security and coping mechanisms
2. Contextual Issue 2: Logistics, Warehousing, Non-Food Items, roads and Markets
3. Contextual Issue 3: Health and Nutrition, Education and School Feeding
4. Contextual Issue 4: Environment, Cooking Energy, Water and Sanitation

³ WFP and UNHCR (2013). Joint Assessment Missions: A practical Guide to Planning and Implementation.

5. Contextual Issue 5: Coordination: Refugee registration, numbers, New Arrivals and Durable solutions
6. Contextual Issue 6: Host Community and Security

The first day of each of the field visits to both Dadaab and Kakuma involved training for all the enumerators on data collection tools based on each of the identified thematic areas. Data collection tools were designed, reviewed and tailored to ensure that gender and protection related issues were mainstreamed in all the thematic areas.

2.3 Limitations of the Methodology

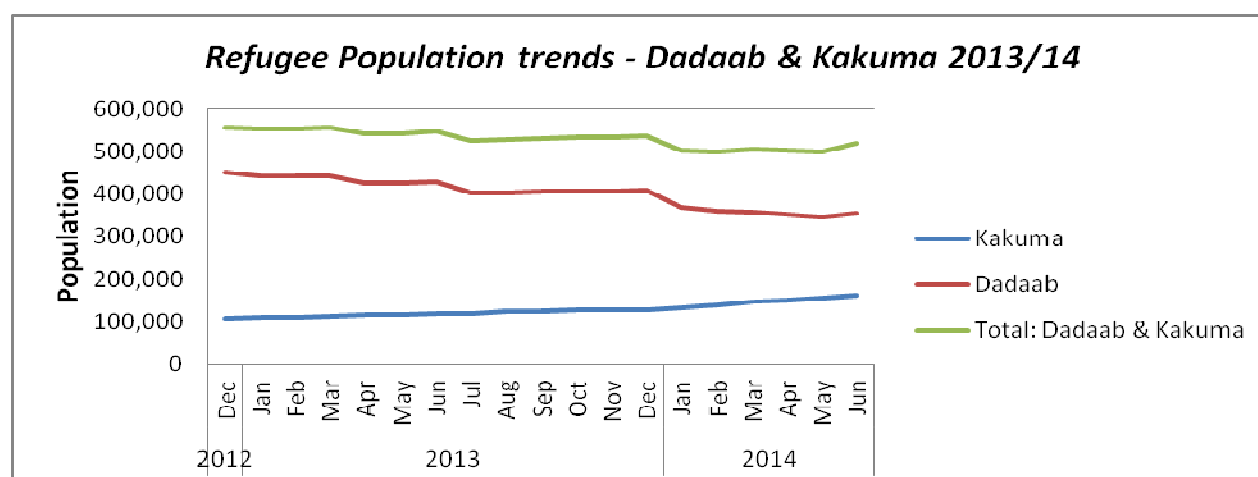
The JAM team identified the following limitations to the methodology:

1. In both camps, the joint assessment mission was undertaken before the annual nutrition survey. Hence the most recent nutrition survey data available related to the December 2013 nutrition survey undertaken. This meant that the available refugee data was incomparable with that of the host community. The GAM in Garissa has increased from 12.0% in 2013 to 14.6% in June 2014 and in Turkana west, it has increased from 9.7% to 17.4% in June 2014. The GAM rates in Dadaab camps were below 10% in August 2013. In addition, the lack of a 2014 nutrition survey meant reliance on the 2013 global acute malnutrition rates (GAM).
2. The security situation in Dadaab curtailed the ability of the enumerators to conduct interviews at the household level.

3 Demographic Information, Programmes and Partners

3.1 Camp Population Trends

At the time of the current JAM, the refugee population in both Dadaab and Kakuma refugee camps stands at 519,361. Out of these, 69% (356,879) of the refugees reside in Dadaab camps while 31% (162,482) of refugees are living in the Kakuma refugee camp.⁴ The introduction of biometrics in food distribution has a knock-on effect on the feeding population in both camps. Kakuma has registered a steady population growth primarily because of the influx from South Sudan. On the other hand Dadaab has experienced a decrease in population as documented in verification exercise and biometrics food distribution system. The graph below provides population trends for the period between the month of December 2012 and June 2014.⁵



3.2 Food Assistance to the Refugees: Programmes and Partners

A number of food assistance programmes such as the general food distribution (GFD), targeted curative programmes and blanket supplementary feeding programmes (BSFP) have helped to maintain adequate nutrition and food security among the refugees living in Kakuma and Dadaab camps. Food assistance is mainly provided by WFP. However, UNHCR also plays a vital role in provision of complementary food to children 6-59 months on a monthly basis. All these programmes are relevant in sustaining the refugees, considering the encampment and restricted movement policy by the Government of Kenya on the refugees.⁶ The table below shows a summary of food assistance and nutrition programmes in Dadaab and Kakuma refugee camps as well as support to the hosting communities.

⁴UNHCR. Population updates, 2014.

⁵ For a thorough analysis of the impact of biometrics on the feeding population see Contextual issue 5: Coordination, Refugees Influx, Repatriation and Population below.

⁶ TANGO. Operation Evaluation Kenya, PRRO 200174, Food Assistance to Refugees: An evaluation of WFP's Operation.

Table 1: Programme details

Programme details					Highest Pop Fed, 2014		
Programme	Partner Dadaab	Partner Kakuma	Ration scale: g/p/d	Kilocalories/p/d	Kakuma	Dadaab	Total
General Food Distribution (GFD)	CARE NRC	World Vision NRC	Cereals – 420 Pulses – 60 Supercereal - 40 Veg. Oil -35 Salt - 5	2,100	141,596	369,656	511,252
Blanket Supplementary Feeding (BSFP) 6-23 months	CARE NRC	IRC	Supercereal plus 215	846	6,660	19,208	25,868
School Meals Programme (SMP)	CARE IRK LWF	LWF	Supercereal – 80 Veg Oil – 10	445	41,916	86,925	128,841
SMP – Take Home Rations	CARE IRK LWF	LWF	Sugar – 500g per month	66	0	35,290	35,290
Food For Training (FFT)	NRC	St. Claire, Don Bosco	Cereals – 130 Pulses – 30 Veg. Oil -10 Salt - 5	667	502	986	1,488
Fresh Food Voucher (FFV)	IRC IRK KRCS DRC	No programme	Meat Voucher 830/= Veg/fruit voucher 240/=	-	N/A	10,940	10,940
MCH & N (Pregnant and lactating mothers)	IRC IRK MSF KRCS	IRC	Supercereal 80 Veg oil 15	433	3,456	19,989	23,445
Supplementary feeding MAM (<5 years)	IRC IRK MSF KRCS	IRC	Plumpy sup - 92g/p/d	500	1,618	9,475	11,093
Supplementary feeding PLW MAM	IRC IRK MSF KRCS	IRC	Supercereal 250 V/oil 25	1160	79	610	689
Outpatient Therapeutic Programme (OTP) – curative – SAM- (OTP) for 6 months-5 years by UNHCR	IRC IRK MSF KRCS	IRC	150 sachets per child (estimate)	550kcal/100g			
Therapeutic Feeding Programme/Care givers	IRC IRK MSF KRCS	IRC	Cereals – 420 Pulses – 60 CSB+ - 40 Veg Oil -35 Salt - 5	2,100	199	211	410
Hospital Feeding (in patients)	IRC IRK MSF KRCS	IRC	Cereals – 420 Pulses – 60 CSB+ - 40 Veg Oil - 35 Salt - 5	2,100	1,322	371	1,693
Special cases (TB, HIV)	IRC IRK MSF KRCS	IRC	CSB+ - 140 Veg Oil - 10	648	406	772	1,178
Food For Assets	GRP	TRP	Cereals – 375 Pulses – 60 Veg Oil - 30 Salt - 5	1,733	13,590	32,000	48,590

3.3 Contextual Issue 1: Food Security and Coping Mechanisms

As defined in the World Food Summit (1996), food security is achieved when all people at all times have access to food for healthy and active living, taking cognizance of nutritional value and the people's dietary needs.⁷ Analysing food security is premised on three key pillars: food availability, food access and food utilization.⁸

The JAM team examined food security situation in both Dadaab and Kakuma Refugee camps including coping mechanisms employed by the refugees - if and when practiced - by looking at the following key sub-areas:

- i) Access to food by refugees and any potential gaps
- ii) Blanket supplementary feeding programme (BSFP) delivery modalities
- iii) Complementary food provision to the refugees
- iv) Possibility of delivering food assistance through alternative transfer modalities such as cash and/or vouchers
- v) Livelihood opportunities that refugees have and practice.

3.3.1 On-going Food Assistance Programme

Since the inception of the two camps in 1991, food assistance provided by WFP and partners has been the main source of food. Refugees' livelihoods and coping mechanisms are compromised by the challenges such as Government's movement restriction policy and harsh climatic conditions of the camps: semi-arid and high food insecure regions where both camps are located.⁹ The harsh climate affects local food production by the host community, which undermines the market systems. This situation is also compounded by the fact that the camps are located in security risk areas.

The JAM team noted in both camps that the situation has not changed regarding refugees' dependency on food aid. WFP's food assistance remains the lifeline for the majority of refugees through various food-based programmes such as the general food distribution (GFD), supplementary feeding programmes (SFP), school meals programme (SMP), food-for-training (FFT) as well as surrounding host communities' project interventions known as Food for Assets (FFA). Through these programmes, WFP distributes approximately 10,000 metric tons of assorted food commodities every month in both Dadaab and Kakuma camps.¹⁰

Food is distributed through the GFD in two cycles that fall during the first and third weeks of each month. Refugees collect food at the Final Distribution Points (FDPs),

⁷ WFP. Emergency Food Security Assessment Handbook, 2009.

⁸ WFP. Food and Nutrition Handbook (n.d.)

⁹ TANGO International. PRRO 200174 Operation Evaluation Kenya. Food Assistance to Refugees: An Evaluation of WFP's Operation.

¹⁰ UNHCR. Kenya Comprehensive Refugee Programme, 2014.

which are situated in each of the camps. Ifo, Dagahaley and Hagadera camps in Dadaab have more durable FDP structures just like in Kakuma 1 and 3. However, camps established over the last three years, including the more recently established camps such as Ifo 2 and Kambioos in Dadaab and Kakuma 4 have temporary FDP structures. The JAM team established that while the temporary structures in the latter camps do not impede refugees' access to food, food quality may be compromised during collection and transportation to households as the refugees mostly drag the sacks containing the food along the FDP corridors which are covered by old tarpaulin materials thus increasing the risk of the loose soil particles contaminating the food. In both Dadaab and Kakuma, some of the semi-permanent structures are also in a state of disrepair, posing risks to the refugees as they collect their food in both Dadaab and Kakuma. In spite of these challenges, food collection processes, including use of biometrics is working well. It is also important to note that WFP made significant efforts and established FDP in Kambioos in June 2013 as per the 2012 JAM recommendations. This was after UNHCR worked with the Government to establish a police post in Kambioos camp, which was a prerequisite for the establishment of an FDP. Discussions with the WFP Sub-Office management in Dadaab indicated that plans were already finalized for construction of a permanent FDP at Ifo 2 with the work expected to commence as soon as possible.

Recommendation 1: JAM recommends the construction of permanent FDP structures in Kambioos, Ifo2 and Kakuma 4 as well as continuous renovation of existing distribution points.

Whereas food ration provided during the GFD is meant to last a family a whole cycle of about 15 days, the JAM found that this was not the case. One of the recurrent finding is that in both Dadaab and Kakuma, food security varies from HH to HH. Some household were found to consume larger quantities whenever food is available (immediately after collecting food).¹¹ At the same time, the sale of some portion of the ration for other unmet HH needs especially cooking fuel and non-food items (NFIs), milling and transport costs of food from FDP to the households and sharing food with unregistered members further undermines the propensity of households' food rations to last for the full cycle. In both Dadaab and Kakuma, households interviewed reported that the food from the GFD lasts between 7- 12 days and not distribution cycle of 15 days. Smaller households were found to experience more food strain, with some reporting that food runs out within seven days after the GFD. This mirrors findings by nutrition surveys and other studies in the camps.¹²

¹¹ The Sphere Project (2004) recommends a minimum food required of 2,100 kilocalories for camp situations.

¹² UNHCR. Dadaab Nutrition survey, 2013.

Figure 1 Average household expenditure in Kakuma (source FSOM 09/13)

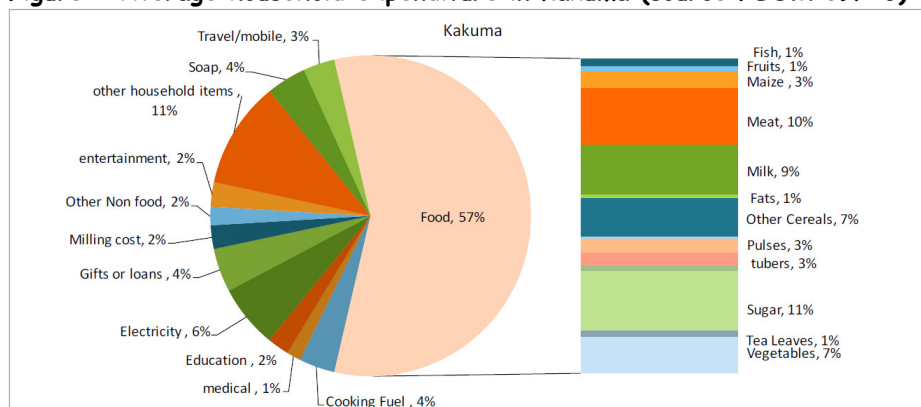
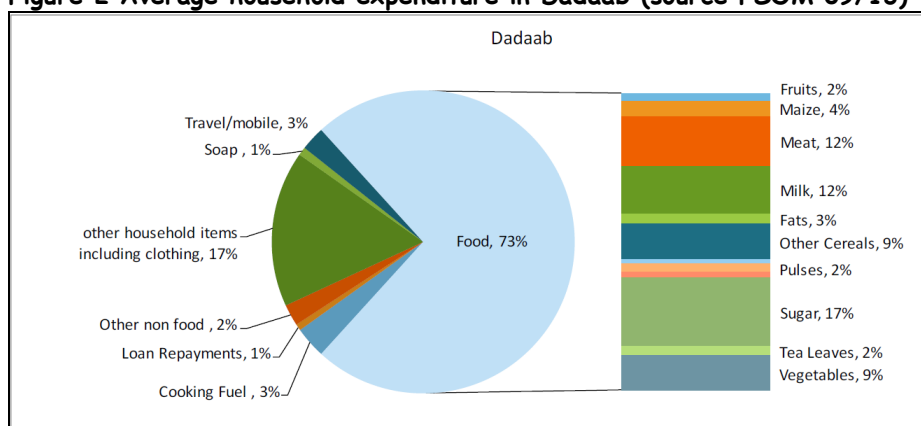


Figure 2 Average household expenditure in Dadaab (source FSOM 09/13)



Consequently, families employ various coping mechanisms to ensure that they survive until the subsequent distribution cycle. In both camps, the most practised coping mechanisms include: borrowing from one's neighbours or from the small shops, taking food items on credit, reducing the amount of food cooked, skipping meals (mainly lunch for the adults while children are given porridge). But single household members tend to eat out, mostly from friends, whenever food runs out. This finding endorses the need for strengthened livelihood opportunities to evade adverse coping mechanisms that might negatively impact on the dignity of the refugees.

Not every household applies these coping mechanisms. Refugees who have access to some livelihood activities such as casual jobs, petty trade as well as employment by the humanitarian agencies as incentive workers (they are paid some incentive wages as regular employment is guided by legal factors such as obtaining work permit from the Government which is difficult to come by) complement the food assistance with purchasing food from the local markets. WFP's quarterly Food Security and Outcome Monitoring (FSOM) support this finding. For example, the 2013 third quarter FSOM report showed that about 20% - 30% of the beneficiaries did not resort to any negative coping mechanism.¹³ However, the vast majority of refugees (70% -

¹³ WFP. FSOM reports, 2013.

80%) did face food run-outs and resorted to employing various negative coping mechanisms.

From field visit findings, the severity in coping is more pronounced within the areas of new arrivals, particularly in Kakuma 4 as well as Ifo 2 and Kambioos camps in Dadaab as opposed to the long stayers. This finding echoes a similar study conducted by DRC in Dadaab in 2013 and also the most recent refugee operations' evaluation by WFP.¹⁴¹⁵ These revelations support the need for an assessment to determine how differentiated assistance can be provided. Nevertheless, discussions during JAM plenary around livelihood level and how it can be used in providing a differentiated assistance to the refugees found that this can only be feasible when a thorough household economy assessment is conducted at household level. This may take time considering complexities of the respective camps including the current security situation in Dadaab.

Recommendation 2: In view of the above, the JAM recommends UNHCR and WFP to undertake Household vulnerability assessment in both Kakuma and Dadaab, to establish the feasibility and stimulus of differentiated assistance.

Refugees incur milling costs when cereals are distributed in the form of whole grains. The milling costs have a dilution effect on the overall food basket available at household level since beneficiaries have to sell a portion of their ration to meet the costs. This was a common finding in both Dadaab and Kakuma, especially with JAM conducted when WFP was distributing a combination of two whole grains of maize and sorghum in Dadaab. The cost of milling one kilogram of whole grain ranges between 10–20 Kenya Shillings. The same value is obtained by selling a portion of food commodities. On the whole, the cost of milling one kilogram of whole grain is equivalent to money received from sale of 1 kilogram of the same commodity or even less within the markets in and around the refugee camps. As a result, part of the whole grain food materials in the food basket end up being sold to offset milling costs. For camps or other camp sections without milling facilities, the cost is higher because of additional transportation requirements. For example, Kambioos camp has no milling facility and the refugees have to transport cereals to Hagadera camp, which is about six kilometres away. Smaller family sizes especially family size one were the most affected with food running out much earlier (6-7 days) than the planned days. The most effective coping mechanism applied by some was to add their food to a bigger family so that they eat for longer periods. Many of them were unable to mill the food due to the high milling costs, compelling them to consume it in its granular form.

A significant portion of food entitlement is lost through transportation costs. Generally, transport pricing varies depending on food quantity and distance from

¹⁴ Intermediaries in Development. The Dadaab Dilemma: A study on livelihood activities and opportunities for Dadaab refugees, 2013.

¹⁵ TANGO. Operation Evaluation Kenya, PRRO 200174, Food Assistance to Refugees: An evaluation of WFP's Operation.

the FDP to the households. The JAM found out that it costs between KES 50 and KES 100 to transport food for larger household sizes from the FDPs to the refugee blocks. However, smaller household prefer carrying food home on their own, particularly among the South Sudanese and minority groups. Those with disabilities, especially the physically challenged, have limited choices other than paying for transport in order to ferry food home. Transport is mainly through donkey carts, but motorcycle taxis are also used. Notably, the system of transporting food is built on trust and no major food losses were reported to be experienced along the way. In cases of families not able to raise money, they pay for transport using a portion of food rations.

Considering the dilution effect on food utilization at the household level owing to sale of food to service unmet needs, transport of food home as well as milling of whole grains; and in order to minimise potential stressful coping mechanisms that can undermine vulnerable households and the refugee community social relations¹⁶:

Recommendation 3: The JAM recommends WFP to endeavour to provide at least 50% of cereals in milled form or provide milling capacity.

Participation of beneficiaries is crucial in food assistance projects. Effective food distribution process requires robust engagement of refugee leadership for communication purposes as well as for conflict resolution. This is very effective in both Dadaab and Kakuma, with refugee leadership well integrated in management of food distribution chain process, especially through the Food Advisory Committees (FACs). This is corroborated by the most recent separate evaluations in both camps that recognize the important role played by refugee community involvement in food matters.¹⁷ FACs are mandated to share with all refugees the information on food basket and complement food basket monitoring at the FDPs. A number of the refugees interviewed knew their FAC representatives and agree that information on the food basket is shared on a timely manner. They also acknowledged that new arrivals are less aware as they require information. On the other hand, refugees agree that mass information campaign by GFD partners has been effective in relaying the needed information on the food basket and the food pipeline.

Food basket monitoring efforts by WFP, UNHCR, NGO partners and the refugee community bear credence with findings of beneficiary satisfaction regarding the fairness of GFD process, although complaints on under-scooping remain. This was a finding in both Dadaab and Kakuma camps. Refugees access food entitlement sheets, which aid them to share food basket information with the wider community members. However in Dadaab, visual food basket display, as is the case in Kakuma, is needed considering the low literacy levels especially among the new arrivals in Kambioos, Ifo 2, Kakuma 3 and Kakuma 4. Such refugees rely more on the leaders and distribution partner staff. In reference to their ration entitlements, most refugees

¹⁶ WFP. Emergency Food Security Assessment Handbook, 2009.

¹⁷ TANGO. Operation Evaluation Kenya, PRRO 200174, Food Assistance to Refugees: An evaluation of WFP's Operation 2014.

refer to the number of scoops served for each household size instead of the actual quantities of food in kilograms due to lack of adequate literacy and numeracy skills. The above information was triangulated with the CARE beneficiary complaint feedback analysis in Dadaab for the first cycle of May 2014, which presented the following findings: those satisfied with information on the food basket were reported to constitute 76%, information given at the help desk - 96% and under scooping - 0.3%.¹⁸

Recommendation 4: The JAM recommends WFP to strengthen beneficiary complaints and feedback mechanisms in all GFP.

Recommendation 5: The JAM also recommends re-introduction of independent weighing scales with beneficiaries' participation.

Discussions with refugee women revealed that they prefer collecting food for their households from the FDPs to avoid potential diversion if done by male family members. According to CARE and NRC reports, approximately 50.5% of food collectors are women while 49.5 % are men.^{19,20} Since the introduction of biometrics food distribution system in June 2013, all persons over 18 years within refugee households are eligible to collect food. In addition, households are allowed to designate alternate food collectors to in circumstances where bonafide household members are unable. In some cases, as noted in Dadaab, the alternate food collectors were reported to demand a portion of the food rations as a form of payment for their services, which in turn affects the households' food security. Instances of school going children or child-headed families forced by circumstances to skive school in order to comply with the requirements of the biometric food distribution system were noted.

The biometric food distribution system is prone to intermittent network failure that leads to occasional delays, disruption or cancellation of the food distribution in the camps; contributing to long queues and crowd control challenges. Biometrics automation systems were pre-tested in June 2014 feeding cycles in Dadaab, but did not achieve the desired effect due to technical challenges. Accordingly, the use of the Reception and Litigation Assistants remain critical in the success of food distribution process using biometrics checks. Nevertheless, JAM found out that biometrics has, to a larger extent, improved population inclusion and accountability in the distribution process.²¹

Recommendation 6: The JAM recommends enhancement of monitoring of efficiency and effectiveness of biometrics system in food distribution, especially with regard to the network systems and alternate food collectors' issues.

¹⁸ CARE. Beneficiary feedback report. 2014

¹⁹ CARE. Food Distribution reports, 2014

²⁰ NRC. Food Distribution reports, 2014

²¹ TANGO. Operation Evaluation Kenya, PRRO 200174, Food Assistance to Refugees: An evaluation of WFP's Operation.

3.3.2 Alternative to In-kind Food Assistance and Going Forward

The JAM 2012 had recommended undertaking of market studies or analysis with a view to incremental substitution of in-kind food basket with alternative transfer modalities.²² The studies were undertaken, but substitution has not been achieved entirely. However, WFP took significant steps to pilot the Fresh Food Vouchers in Dadaab in 2013. This is an important step as it forms the premise of ‘going forward’ in regard to prospects of introducing alternative food assistance transfer modalities in the refugee operations in Kenya.

The 2014 JAM therefore considered the possibility of taking this further in both Kakuma and Dadaab. Discussions with the refugees in both camps demonstrated a fair picture of alternative transfer modalities. While Dadaab refugees appreciated the importance of the programme, they preferred the current pilot model of ‘the additional food’ rather than substitution. This is expected considering the pilot model, which means more food among the targeted households. The most important aspect of the Fresh Food Voucher noted was the fact that beneficiaries and traders alike understand the process. In both camps, the use of cash was not a popular option. Fear of insecurity associated with handling cash (potential of increasing robbery cases), risk of inflation, diversion from intended use as well as potential conflicts and protection concerns at household level were, presented by the refugees against the use of cash. The voucher programme seemed more acceptable with requests to consider the following aspects to improve the efficiency and effectiveness;

- i) An effective monitoring system to avoid diversion or exchange with unintended commodities to enhance intended utilization. Similarly, adequate monitoring system of the markets to minimize potential price hikes should be put in place (in Dadaab, the refugees shared that commodities obtained from traders through the current voucher programme tended to be priced higher than when bought in cash in spite of monitoring systems put in place by WFP such as mystery shoppers and telephone hotlines among others). Telephone hotlines were not used as frequently as should by many refugees that had complaints on price increases because they were not aware of their existence.
- ii) Supporting proper functionality of markets within the refugee camps and establishing markets in the new camps as well as enhancing market linkages beyond the refugee camps to county markets and/or supply areas.
- iii) Supporting the refugee community to establish more businesses/commodity access points in the camps through interventions (highlighted under livelihood sub-section below). This is in tandem with recommendations of the recent market assessment conducted by WFP in Dadaab and Kakuma that similarly recommended capacity building and technical support to business.²³

²² WFP/UNHCR. Joint Assessment Mission Report, 2012.

²³ WFP. Dadaab and Kakuma Refugee Camps Assessment, 2014

- iv) Incremental introduction of voucher programme using the substitution model with periodic reviews and in accordance with the recent market survey by WFP.²⁴
- v) Suggested starting off with special groups such as families with the elderly and large households. The large households enjoy benefit from economies of scale on the current in-kind food assistance in comparison to the smaller households.

Beyond the challenges foreseen, both the refugees and the hosting population acknowledged that a voucher programme would have multiplier benefits with overall improvement in food security and nutrition for both groups such as:

- Enhanced business volume for both refugees and the host community,
- Improved dietary diversity for the households as well as dignity of going for food 'when you need',
- Enhanced host community relations with refugees and agencies through formation of trade partnerships and
- Creation of employment and interrelated livelihood activities.

Recommendation 7: The JAM recommends incremental introduction of alternative transfer modality (cash or voucher) to replace portion of cereals.

Recommendation 8: The JAM further recommends UNHCR to undertake an assessment of feasibility of Cash/Voucher Based Interventions for other core relief items.

3.3.3 BSFP Delivery Options and Complementary Food Provision

At the time of the current JAM, blanket supplementary feeding programme was being provided to all children falling within the age bracket of 6-23 months in both Dadaab and Kakuma. Under this programme, WFP distributes SuperCereal Plus, a high nutrient dense commodity, according to WFP nutrition guidelines.^{25,26}

The focus here was on evaluating mode of delivering BSFP commodity to the beneficiaries. A comparison between BSFP implementation in Kakuma and Dadaab suggested that Kakuma has the best practice of BSFP distribution. This is because the commodity distribution is dependent on the care-taker bringing the child for screening at the health post resulting in coverage of at least 86% of the targeted children.

²⁴ WFP. Dadaab and Kakuma Refugee Camps Assessment, 2014

²⁵ WFP. Food and Nutrition Handbook

²⁶ For further details on the BSFP, see contextual issues 3: Health, Nutrition, Education and School Feeding Programme below.

In Dadaab the BSF programme is currently delinked from the core nutrition programmes. The SuperCereal Plus is distributed at the FDPs alongside GFD food rations without any information campaign on utilization of the product. This has the potential of making mothers regard the commodity just like another part of family food rations. The practice of implementing BFSP distribution at the FDPs in Dadaab is necessitated by higher numbers of children within the said bracket considering inadequate storage capacity as well as staffing challenges to conduct distribution at the health posts. However, the model of distribution in Dadaab needs to be aligned to the same process flow as in Kakuma model, where all children are screened at the health post prior to receipt of SuperCereal Plus. In both Dadaab and Kakuma situations, staffing levels and sharing of BSFP food commodity with other family members came out prominently as over-arching hindrances in achieving BSFP objectives.

Regarding provision of complementary food to the refugees in the year 2013 and 2014, JAM findings revealed inconsistency in practice. While complementary food should add to or supplement WFP GFD food basket to all refugees, UNHCR only managed to provide for children under-five years of age in Dadaab, albeit with some pipeline breaks for several months. In Kakuma, no complementary feeding has been provided since June 2013. JAM noted that this funding remains a key challenge towards realization of complementary food provision to all refugees in both Dadaab and Kakuma camps.

Recommendation 9: Delivery of BSFP commodity in Dadaab to remain at the GFD but supported with health/nutrition education and linked to child growth monitoring. Resources to provide the necessary additional staff should be mobilized.

Recommendation 10: UNHCR/WFP to review Complementary Food provisions with a view to demonstrating impact, re-adjusting for better targeting and ensuring smooth supply.

3.3.4 Preferred Commodities

Food preference has the potential of affecting food utilization at household level because the less preferred commodity is either bartered at less than its comparative market value, or sold at a price lower than its market value in order to purchase other preferred food materials usually at a higher price. Discussions with refugees both in Dadaab and Kakuma show that the item of least preference among the food basket is sorghum followed by maize. Yet the food basket constitutes sorghum (50% of cereals). This implies poor utilisation and ultimately loss to the family. While it can be argued that majority of the refugees originate from countries where sorghum is the staple food (South Sudan and Lower Juba region of Somalia), it was noted that variety/type of sorghum distributed exacerbates dislike for the commodity. Majority of the refugees interviewed opined that red sorghum (Dadaab) and some species of white sorghum that turns black when cooked (Kakuma) exhibit bitter taste hence not

very palatable. In Dadaab for example, families shared that they use milk (which is also hard to come by) to improve palatability of sorghum.

Recommendation 11: *Considering increasing food costs and challenges of resourcing, it is plausible that sorghum may continue being part of the food basket for the refugees in Kenya. However, WFP should endeavour to provide the preferred white sorghum variety that does not turn black on cooking.*

Recommendation 12: *Additionally, WFP and UNHCR should enhance nutrition awareness campaign, especially in regard to use of sorghum in preparation of various recipes among the refugees in Dadaab and Kakuma to boost utilization.*

3.3.5 Options for Livelihood Interventions

Drawing from SPHERE humanitarian standards, WFP defines livelihoods as comprising of capabilities, assets and activities required by people for living, as well as for their future well-being.²⁷ Considering that the refugee camps in Kenya (Dadaab and Kakuma) are now about twenty-three years old, funding attention is shifting towards the more demanding and/or recent emergencies around the world, for example, level 3 emergencies in Syria, South Sudan Iraq and Central African Republic and emerging level 2 emergencies.²⁸ This calls for a pragmatic review of *modus operandi* of the refugee operations in Kenya, focusing on resilience building among the refugees²⁹ so that to the extent possible, they can provide some of their food and other unmet needs. Studies conducted in Dadaab on livelihood opportunities show that refugees who came to the camps in early 1990s up to mid-2000 have better coping mechanisms than new comers (those who arrived during and after Horn of Africa Crisis in 2011).³⁰

During the field visits in both Dadaab and Kakuma, JAM teams observed that indeed the camps have significant activities that enable some refugees to obtain income. Incentive and casual labour is a source of livelihood to most refugees – either employed by the humanitarian agencies or performing other casual jobs within the camps. Petty trade also thrives well in some camps such as Hagadera in Dadaab due to vibrant markets. But new camps (Kakuma 4, Ifo 2 and Kambioos in Dadaab) have less established or no formal markets at all.

At an *ad hoc* and limited scale, UNHCR and Partners (for example, in Kakuma - LWF, NCCCK, Don Bosco and NRC) have implemented livelihood interventions over the years. These have had limited focus on sustainability. Interventions already implemented by the different agencies ranged from enterprise development, technical/vocational skills training and life skills programmes.

²⁷ WFP. Emergency Food Security Assessment Handbook, 2009.

²⁸ WFP. Available at <http://epweb.wfp.org/ep2/crisis/?PageID=234>, accessed on 8th July 2014.

²⁹ Intermediaries in Development. The Dadaab Dilemma: A study on livelihood activities and opportunities for Dadaab refugees, 2013.

³⁰ Intermediaries in Development. The Dadaab Dilemma: A study on livelihood activities and opportunities for Dadaab refugees, 2013.

The business community interviewed recommended a review of the business/livelihood support as regards beneficiary targeting. According to them, agencies have been targeting only vulnerable individuals who have no skills and experience in business and hence without the needed capacities to manage and sustain businesses. This has largely contributed to limited impact on the business development/growth for the on-going initiatives. The encampment policy and the current Government directive of relocating urban refugees to the camps further aggravate the situation. This has compromised sourcing of business supplies using the main supply corridors, resulting in higher prices of goods and reduced profit margins.

Vocational training centres (Don Bosco – Kakuma and NRC Youth Education Pack Centres – YEP in Dadaab) provide a lifeline to the refugee youth who are trained in artisan courses such as masonry, carpentry and electrical installations among others. Such graduates end up in the camp informal casual job sector.

Access to credit for petty business remains a challenge.³¹ Most refugees rely on remittances from relatives (especially those with relatives resettled in the West), while others rely on merry-go-round contribution systems (known as *ayuuuto* in Dadaab) as well as food banks (families of about 10 women come together and agree to contribute a portion of family rations from the FDP to one member each distribution cycle and later sell the aggregated rations to generate seed money for business). This effort, although bearing some income-related advantages to the refugees, including the possibility of diversification of the food basket, upsets household food security of the respective families.

3.4 Contextual Issue 2: Logistics and Non-food Items

This thematic area focused on the logistics, warehousing, roads and infrastructure with a view to assessing options of delivering food and non-food items (NFIs) to the refugees in situations of heightened insecurity (particularly for Dadaab), or flooding (both Dadaab and Kakuma camps), and other logistics aspects such as intra/inter-camp road conditions, as well as major access corridors that supply the camps. The Dadaab camps are supplied by Nairobi – Garissa – Liboi transport corridor while Kakuma camp is supplied by Kitale – Lodwar – Lokichoggio corridor.³² The two corridors have significant portions of dirt roads, which render supply channels to the refugee camps particularly challenging during the rainy seasons in March/April and November/December in both Dadaab and Kakuma. Vehicles reportedly get stranded along dirt roads in the main transport corridors for up to one week during rainy seasons. As a result, flow of humanitarian and business supplies is hindered. Traders incur huge losses especially for fresh perishable goods. The repair and

³¹ Intermediaries in Development. The Dadaab Dilemma: A study on livelihood activities and opportunities for Dadaab refugees, 2013.

³² WFP. Dadaab and Kakuma Refugee Camps Market Assessment, 2014

maintenance of the main transport roads is the responsibility of the national Government.

Intra/inter-camp roads (feeder roads linking camps or parts of the camp for Dadaab) also pose a challenge to delivery of assistance to the refugees, both in Kakuma and Dadaab. Critical sections of such roads become impassable when it rains and occasionally prevent delivery of food supplies; a case in point being Kakuma 2, 3 and 4 (because of periodic swelling of *laggas*/seasonal rivers), Hagadera – Kambioos and Ifo – Dagahaley road segments in Dadaab.

Recommendation 13: UNHCR and WFP to lobby with the National Government to improve road conditions along the main supply corridors to the refugee camps, and where possible seek strategic partnerships in accomplishing the task.

Recommendation 14: UNHCR and WFP to seek funds for repair of intra/inter-camp roads, prioritizing the critical segments of the roads as discussed above.

In Dadaab, JAM team held focus group discussions with transporters whose trucks had just delivered food commodities. This was a good coincidence and a rich source of primary information. Discussions revealed that there are cases of banditry along the Garissa-Dadaab road between Saretho and Dadaab areas. They also reported banditry activities between Dadaab and Dagahaley camp section. According to the truck drivers, this happens mostly in the evening hours and at night, as a result, trucks are forced to overnight in groups at specific areas along the route. This has the potential of delaying delivery of supplies to the refugee camps with compounded risk of loss of food in transit. The concern on banditry was also noted with transporters to Kakuma, especially along Kainuk – Lodwar stretch.

Regarding local transport capacity, JAM explored availability of refugee hosting communities' capacity to support with transport of food within the camps, particularly in Dadaab whenever need occurs of intra-camp transfer of food, as well as food deliveries to the host community Food For Assets (FFA) projects. The findings show that Dadaab has adequate availability of commercial trucks from the local community. For instance, the analysis of the tenders for commercial transporters that was floated by WFP in 2013 indicated that there are about 55 commercial trucks with a total capacity of approximately 993 tonnes at that time (capacity for each truck varies between 10 and 25 metric tons), which are owned directly by local transporters from Dadaab. However, there has been no market assessment to determine transport-pricing rates from the commercial sector within the counties hosting refugees. According to an interview with commercial transporters in Dadaab, a 10 – 15 ton capacity truck is hired for between KES 15,000 – 20,000 per day within Dadaab camps, while a truck of 20 - 25 ton capacities is hired from KES 20,000 – 25,000 per day. These rates are however negotiable.

Recommendation 15: The JAM therefore recommends that a market assessment on the transport pricing rates by local transporters should be conducted in Garissa and

Turkana Counties and incorporated in the contingency or operations continuity plans of the two locations (Dadaab and Kakuma).

Storage capacity is an important component in delivery of food and NFIs to the refugees. Both Kakuma and Dadaab camps have adequate storage capacities for food and NFIs. With regard to food, Kakuma has a capacity of 5,600 metric tons, which is inadequate to cover the requisite three months buffer stock. WFP plans to establish an EDP at FDP 3 in Kakuma to expand the storage capacity. Dadaab has adequate storage capacity for 3 months buffer stock at 26,000 metric tons. Although the storage capacity for food is adequate, it is not fully utilized due to resource constraints.

UNHCR has adequate storage capacity for NFIs in both Dadaab and Kakuma and warehousing of all NFIs has been centralized in one compound in accordance with International Public Sector Accounting Standards (IPSAS) regulation that requires a central storage system. This policy has been put in place to ensure cost efficiency and so far there have been great improvements in tracking of all items managed by partners. Accordingly, the fleet management too has been centralized and it is working much more effectively than it was previously when agencies had been allocated trucks to transport items as and when needed. Despite the concern during the JAM that there may be challenges with transportation of NFIs over a distance of 23 kilometres to the furthest camp (Kambioos), the likelihood is minimal.

3.5 Contextual Issue 3: Health, Nutrition, Education and School Feeding

The provision of basic essential services remains paramount in achieving acceptable food security and well-being. There has been an improvement of health and nutrition outcomes over time. The same is true with other essential services. However, with the South Sudan influx in Kakuma of 40,196 persons as of June 2014, there is an urgent need to expand the delivery of essential services to meet the emerging requirements arising from the population influx.

3.5.1 Health

Both curative and preventive services are provided across all the camps in Kakuma and Dadaab, with four hospitals and 18 health posts operational in Dadaab, while Kakuma has one hospital and five clinics. The main partners in health and nutrition for Dadaab are Islamic Relief Kenya (IRK), Kenya Red Cross Society (KRCS), International Rescue Committee (IRC) and Medecins Sans Frontieres Swiss (MSF), while in Kakuma it is only IRC.

The main services offered include basic health care comprising outpatient consultation, paediatrics, and pharmacy, laboratory and Maternal Child Health (MCH) services. In addition other services offered include in patient services, emergency obstetric care, minor surgical services, radiology services as well as referral services to provincial and national levels, which also entails reverse referrals.

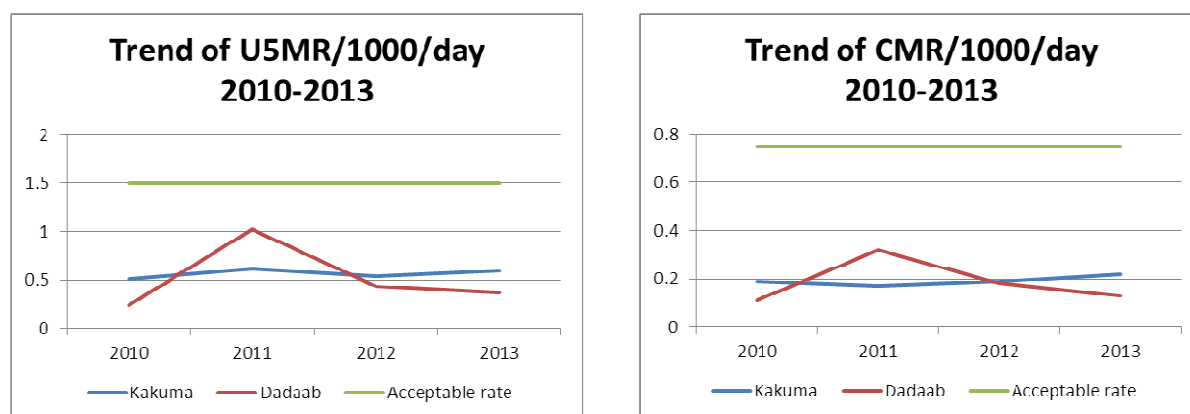
With these services in place, the overall health status of refugees has continued to improve over time as evidenced through improved health and nutrition indicators across all camps.

3.5.2 Morbidity and Mortality

The relatively stable health situation of the refugees has seen a general reduction in mortality rates. Indeed since the Horn of Africa Crisis in 2011, there has been a steady reduction in Under Five Mortality Rates (U5MR) from 1.02/1000/month in 2011 to 0.37/1000/month in 2013 in Dadaab, and from 0.61/1000/month to 0.59/1000/month in Kakuma. Crude Mortality Rates (CMR) also dropped in Dadaab from the year 2011 to 2013 from 0.32/1000/month to 0.13/1000/month. Kakuma, however, has witnessed an increase since 2011 to 2013 from 0.17/1000/month to 0.22/1000/month. For the most part, Mortality rates have remained within the recommended SPHERE standards for the last two years.³³ Nonetheless, the increase in Kakuma is attributed to high incidences of malaria, deterioration of services due to inadequate funding, and the subsequent increase in maternal mortality.³⁴ Given the limited capacity of the camp health services, the increase in population has exerted a heavy burden on existing health systems and this requires urgent redress.

In addition, Dadaab recorded two major disease outbreaks in 2013, including Cholera outbreak in March / April 2013 and Wild Polio Virus Type 1 (WPV1) in May 2013, which resulted in two deaths. Below is the general trend of the U5MR and CMR.

Trends of U5MR and CMR in Dadaab and Kakuma camps³⁵



Home deliveries have continued to be recorded in Kambioos camp in Dadaab despite the high antenatal clinic (ANC) attendance by pregnant women. Currently, ANC services are available in Kambioos, but hospital delivery by a qualified staff can only be accessed in Hagadera camp (6kms) by use of an ambulance. The risk of

³³ SPHERE standards

³⁴ UNHCR HIS Reports

³⁵ UNHCR. Health Information System, July 2014

mortality due to this arrangement is increased especially for expectant mothers that may not want to leave other young children at home in Kambioos while they are in Hagadera hospital where a mother may stay from 1 to 7 days depending on the ease of delivery.

The JAM 2014 findings in Kakuma indicate that acute respiratory infections, watery diarrhoea and malaria persist as the highest contributors to morbidity with increased incidences recorded during rainy seasons. With regard to malaria prevention in Kakuma, only 56% of children aged 0-59 months use long lasting insecticide treated net (LLINs), whereas the proportion of total household members that use LLINs is 73%³⁶ implying that children are deprived of mosquito nets. More needs to be done to ensure that children are well protected from risks of malaria.

As per the recent mass mid upper arm circumference (MUAC) screening conducted during the *malezi bora*³⁷ campaign, the risk of mortality associated with global malnutrition did not reflect any change from May 2013 in Kakuma³⁸ while in Dadaab camps; there was an increase in risk of mortality in Dagahaley, Ifo 2 and Kambioos camps.³⁹

The number of qualified staff was found to be lower than required to run the health facilities both in Kakuma and Dadaab camps. In Kakuma, owing to the increasing number of refugees, the consultations per clinician per day are above the standard of 1:50. JAM findings also indicated that there was a high turnover of staff since the new governance structure came into force.

The following are key recommendations based on on the above findings:

Recommendation 16: UNHCR to work towards prioritizing an operational maternity unit in Kambioos (Dadaab) to encourage facility deliveries under skilled health care workers, and reduce the risk of maternal and infant mortality associated with home deliveries.

Recommendation 17: UNHCR should install a high water capacity reservoir that can benefit from the current water tracking as a short term measure to guarantee adequate hygiene standards are achieved at all times until a permanent source of water for this clinic is made available for Kakuma 4.

Health Systems Analysis

- The UNHCR Health Information System remains the main real time system for collection and analysis of health and nutrition data. The data pool is generated by partners and further verified by UNHCR before sharing the information on the progressive health of the refugee population. Both 2012

³⁶ UNHCR. Kakuma Nutrition Survey report 2013

³⁷ Malezi Bora refers intensified health and nutrition activities at the community level undertaken twice a year in Dadaab and Kakuma camps.

³⁸ UNHCR. Malezibora report Kakuma 2014

³⁹ UNHCR. Malezibora report Dadaab 2014

and 2014 JAM findings indicate that data on infant and young child feeding indicators is lacking in the HIS data base.

- It was noted that moderately acute malnourished (MAM) pregnant and lactating (PLP) mothers are discharged as cured from the programme after the child attains the age of 6 months regardless of whether they are cured or not, and this is captured as cured in the HIS. Ideally, cured should be at the attainment of a MUAC measurement of ≥ 23 cm as per the current national integrated management of acute malnutrition (IMAM) guidelines. This leads to mis-presentation of facts hence misleading in decision making, so there is need to follow the national guidelines.
- Although there exists national IMAM guidelines (2009) that outline the admission criteria of pregnant/lactating with MUAC of < 21 cm, and the discharge criteria as having attained a MUAC of ≥ 23 cm or when the child is 6 months, this is not fully adhered to due to parallel guidelines in use; the UNHCR/WFP Management of Malnutrition in Emergencies (2009 and 2011) that outline a discharge criteria of a child having attained the age of 6 months or MUAC of ≥ 23 cm. With the finalization of the Kenya IMAM guidelines, it is expected that a clear way forward with exit criteria for breastfeeding mothers when the child is 6 months. ..

Recommendation 18: Pending the finalization of the new IMAM guidelines, UNHCR and WFP should review the practice in the region and also in Kenya and support partners to report appropriately; owing to conflicting criteria between the national IMAM guidelines and the UNHCR/WFP guidelines, both agencies should work towards a harmonized criteria to ensure that nutritional support is given during the crucial periods.

General Health Issues

The JAM team focused on family planning, antenatal care, service provision and the comprehensive care clinic health and nutritional support to chronic cases such as TB, HIV and diabetics. Key findings in both Dadaab and Kakuma were as follows:

- Uptake of family planning among women of reproductive age group remains lower in Dadaab (1.7%) compared to Kakuma where current uptake is 29.9% with religion, cultural beliefs as well as lack of male involvement in family planning initiatives playing a major role in the poor uptake of family planning services.⁴⁰
- Increased ANC attendance across all camps has been attributed to the fresh food voucher (FFV) programme that has acted as an incentive for women to attend the clinics.⁴¹ On the contrary, this has not translated into high hospital deliveries as was expected. Sustainability of the current high ANC attendance

⁴⁰ UNHCR Health & Nutrition Reports

⁴¹ Nutrition Monthly Reports

rates remains elusive given that FFV is a pilot and would come to an end at one point.

- In Ifo 2, the Comprehensive Care Centre (CCC) at the health post is congested and made of semi-permanent structures. It provides services that are not comprehensive compared to other camps where standard comprehensive care clinics have been established.
- There were insufficient height boards in the CCC to ensure regular monitoring of nutrition status of adults in Dadaab.
- Chronically ill refugees face a major challenge of dietary diversity that is essential in the management of health conditions especially the diabetics and the hypertensive cases given there is no appropriate food commodities provided to these categories.
- In Dadaab (Dagahaley), the management of cerebral palsy and cardiovascular diseases of malnourished cases remains uncertain given that recovery of these cases takes long, and at times with no clear prospects of recovery at all since their malnutrition situation is secondary to their medical conditions.

Based on the above findings, the JAM recommends that:

Recommendation 19: Partnerships with county and national Governments for secondment of qualified health staff to support the health service provision should be prioritized by UNHCR, especially in Kakuma where findings revealed that untrained refugee incentive workers handle integral services in the hospital wards.

Recommendation 20: Need to include chronically ill cases (diabetes/hypertensive cases) as part of the target groups for FFV as an alternative food delivery modality to allow for diversity and freedom of choice, which is currently lacking for this caseload.

Recommendation 21: As previously recommended in the 2012 JAM, management of adult malnutrition among TB/HIV cases remains unaddressed in regard to the specific demands of their condition. WFP should support the management of moderate malnutrition while UNHCR/UNICEF should support the management of severe acute malnutrition using the appropriate products. Support of severely malnourished cases by UNHCR should be expanded beyond Multi Drug Resistant Tuberculosis patients with severe acute malnutrition (SAM).

Recommendation 22: To enhance access and improve services delivery for the at-risk population, UNHCR should construct a standard CCC at Ifo 2 hospital. UNICEF/UNHCR to ensure necessary anthropometric materials are available.

Recommendation 23: In order to address poor health seeking behaviours among the refugee population in both Dadaab and Kakuma, UNHCR and health partners should address the factors discouraging uptake of hospital/clinical services as discussed above. In Kakuma, the unqualified refugee staff attending to clients is the

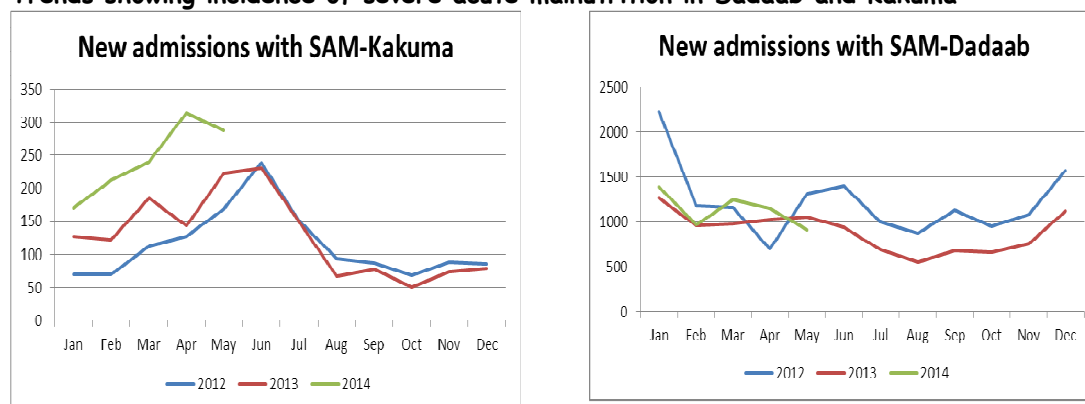
main factor turning away refugees from seeking health services according to refugee respondents interviewed. In Dadaab knowledge, attitude, practice models of change should be explored to promote behaviour change among the refugees. Initiatives like behaviour change communication (BCC) should be prioritized.

Recommendation 24: *There is need to change the approach used in promoting family planning services by ensuring male involvement and use of religious leaders/male champions in information campaigns in both Dadaab and Kakuma.*

3.5.3 Nutrition

While the general nutrition situation in both Kakuma and Dadaab camps has improved since then, as evidenced through a reduction in admission rates, both camps are still far from achieving the overall acceptable nutrition situation according to World Health Organisation (WHO) standards. The current nutrition indicators for children aged 6-59 months residing in Kakuma and Dadaab camps is below the emergency threshold (15%) but still remains above the acceptable levels (GAM<5%) according to the WHO classification of severity of malnutrition in a community.

Trends showing incidence of severe acute malnutrition in Dadaab and Kakuma⁴²



3.5.4 Magnitude of malnutrition

The prevalence of global acute malnutrition (GAM) has improved in Dadaab from 15.4% in 2012 (above emergency threshold of 15.0) to 9.9% in 2013. As per WHO classification, a GAM of between 10-14% signals a serious nutrition situation. In Kakuma however, the nutrition status has largely remained stable with no significant changes since 2010. According to the 2013 survey report⁴³, the current GAM rate for Kakuma is at 7.9%.

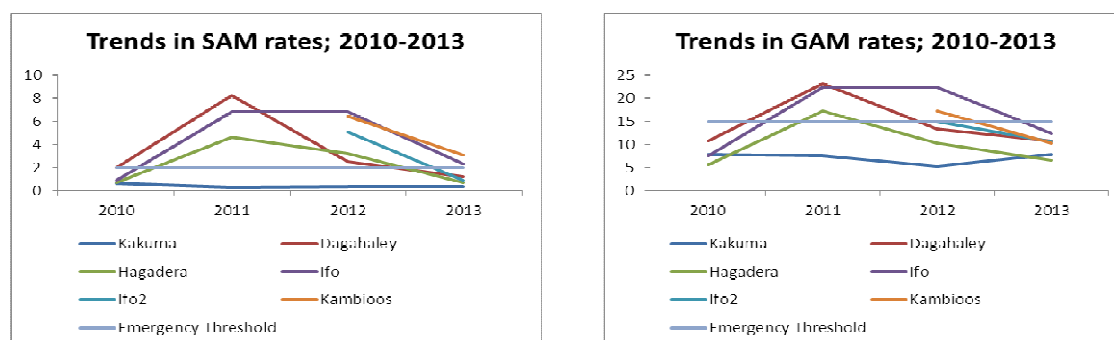
The graph below shows GAM trends since 2010 – 2013. As illustrated, the rates have fallen below the emergency threshold of 15%, however Dadaab is still in “serious”

⁴² UNHCR. Health Information System July 2014

⁴³ UNHCR Nutrition Survey Report 2013

category while Kakuma is in the “poor” category. None of the camps has achieved the acceptable <5% WHO classification.

Trends in GAM and SAM rates 2010-2013⁴⁴



In comparison with the host community, the prevalence of global acute malnutrition may be lower in the refugee camps.⁴⁵ Preliminary nutrition survey results show that GAM is 28.7%, 24.5%, 17.4% and SAM is 6.8%, 5.2% and 4.6% in central, north and west of Turkana (Kakuma), respectively.⁴⁶ Consequently the host community of Kakuma camp has a GAM that is above the emergency threshold as evidenced by the UNHCR HIS where an increasing number of children from the host community are accessing curative services for children with complicated severe acute malnutrition in camp clinics. Conversely, in Garissa County, the GAM stands at 14.6% and the SAM is 2.9%.⁴⁷

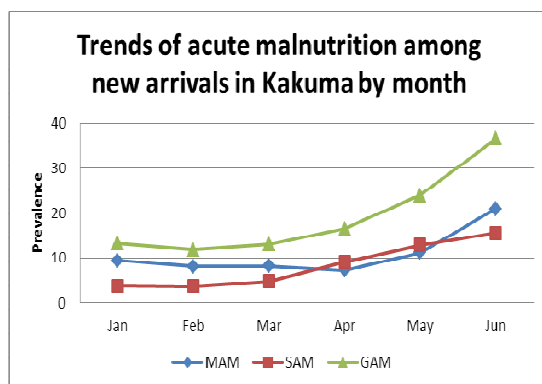
In Kakuma, incidence of moderate malnutrition remained relatively unchanged in 2012 and 2013 with seasonal changes in December – Jan and May – June, resulting in an increase in acute malnutrition. This implies that there is still need for an integrated approach in addressing MAM. A sharp increase in both incidence of MAM and SAM has been observed and is mostly attributed to new asylum seekers that are arriving from South Sudan while already in worse nutrition status. In Dadaab, current trends show a slight increase in incidence of both MAM and SAM.

⁴⁴ Source; UNHCR 2010, 2011, 2012 and 2013 Nutrition Survey reports in Dadaab and Kakuma

⁴⁵ Results of 2013 Nutrition Surveys conducted in both Dadaab (September) and Kakuma (November)

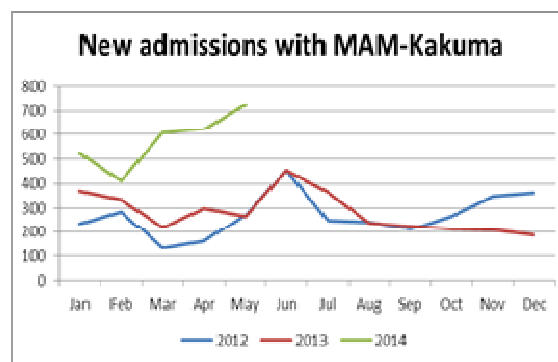
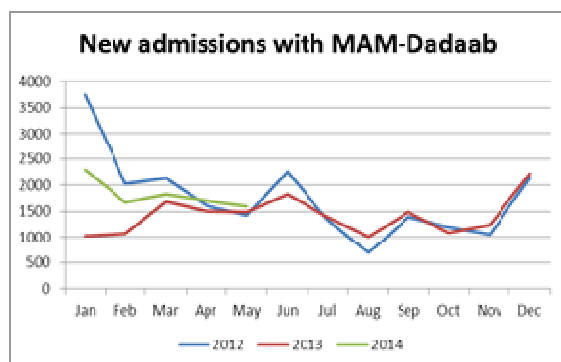
⁴⁶ ACF 2014 Preliminary nutrition survey results in Turkana

⁴⁷ ACF 2014 Preliminary nutrition survey results in Garissa



As per the admission trends below, a relatively high number of admissions are usually recorded around the months of May/June in Kakuma and September/October in Dadaab camps, which coincide with the rainy seasons and is associated with an increase in watery diarrheal cases contributing to malnutrition.

Trends showing incidence of moderate acute malnutrition in Dadaab and Kakuma⁴⁸



The JAM 2014 findings reveal that sharing of SuperCereal Plus given out in the BSFP remains a common practice in many of the households in spite of the knowledge that the product is intended for children aged 6-23 months. Households with other young children, sickly relatives and the elderly were more likely to share the product due to its palatability compared to all the other products currently available for targeted programmes. Utilization of pre-mixed SuperCereal Plus /oil for pregnant and lactating women was similarly affected by intra-household sharing practices. Although intra-household sharing of SuperCereal Plus is observed to be abounding among the beneficiaries, its overall benefit to children between the ages of 6-23 months should not however be overlooked given the general improvement in GAM rates, anaemia and other micronutrient deficiency prevalence rates amongst this age group since its introduction in 2011.

It is worth noting that even with the improved health and nutrition status of the refugees in both Kakuma and Dadaab camps, the BSFP programme for children 6-23

⁴⁸ UNHCR. Health Information System July 2014

months remains crucial in maintaining the given improved indicators; the dynamic camp situation where other aggravating factors still exist, including poor hygiene and sanitation conditions that may undo all the gains made so far. The fact of the matter is that the dry food rations provided at the GFD is lacking in mineral, vitamins, protein elements and other micronutrients required to meet the nutritional demand for this age group owing to accelerated growth, in addition to ensure a healthy and nutritious start of complementary feeding for the age group.

The SuperCereal Plus remains the only product that contains milk proteins that are vital in ensuring linear growth, while protecting against stunting. It is also highly fortified with iron, which plays a critical role in protecting against anaemia that is still a public health concern amongst this age group in both Dadaab and Kakuma. BSFP for 6-23 months is one of the preventive approaches towards addressing health and nutrition related concerns that are comparatively cheaper as opposed to curative approaches. With the programme in place, incidences of SAM/MAM may be kept under control hence cutting down on cost/resources.

In view of the above findings/observations, the JAM team recommends that:

Recommendation 25: The BSFP programme for children between 6-23 months be sustained with the following recommendations in place:

Recommendation 26: UNHCR/WFP/Partners to ensure that the distribution of SuperCereal Plus is linked to growth monitoring of the child's nutritional status coupled with counselling on appropriate infant feeding at health facilities in order to realize better outcomes of the programme.

Recommendation 27: UNHCR/WFP and partners to enhance information campaigns on proper utilization of the SuperCereal Plus product to boost awareness/knowledge amongst the beneficiaries.

Recommendation 28: In Dadaab camps, the current delivery model for BSFP at the FDPs should be revised, if programme outcomes are to be achieved. The programme should be preferably shifted to the health posts to allow for integration with other nutrition activities like growth monitoring and health education. In case this is not feasible, the current practice can continue, but with a soft condition to prove that mothers have attended growth monitoring and health education sessions at the health posts.

Recommendation 29: In Kakuma, the mode of delivery of product should remain at the health clinic. Logistics staff for commodity management should be increased while the nutrition teams are left to improve the effectiveness of GMP and IYCN programmes.

Recommendation 30: In Dadaab, growth monitoring and nutrition counselling infant and young child nutrition (IYCN) programs at the health post should be

reviewed and fully integrated into the existing nutrition programmes for optimal mother, infant and young child nutrition (MIYCN) practices with focus on proper use of the energy and nutrient – dense SuperCereal Plus. MIYCN structures need to be strengthened at both community and facility levels for effective BSFP programme implementation. Staffing structures and numbers should be addressed.

3.5.5 Selective Feeding Programmes (Outpatient Therapeutic / Stabilization Centre and SFP)

Nutrition programmes in Dadaab and Kakuma encompass curative and preventive aspects. Curative targeted programmes involve management of severe and moderate acute malnutrition. In Dadaab, there are four stabilization centres in all the camps except Kambioos, 15 outpatient feeding centres for treatment of severe acute malnutrition without complications and 18 supplementary feeding centres for treatment of moderate acute malnutrition in 18 centres. In Kakuma there is one stabilization centre at the main hospital and 6 other centres running OTPs and SFPs.

The JAM team observed that the nutrition programme is heavily driven by community workers, while there are few qualified staff to adequately supervise the programme. Field findings revealed that medical review of severely malnourished children at the OTPs was insufficient due to lack of nurses especially in Hagadera and Ifo camps of Dadaab. The centralization of the outpatient therapeutic programme in Dagahaley camp to the main hospital has reduced access and effectiveness of the programme, generating a higher number of children that are non-cured.

There is no stabilization centre in Kambioos camp for treatment of children with severe acute malnutrition. It is therefore no wonder that Kambioos has the highest prevalence of severe acute malnutrition (3.1%) of all the camps in Dadaab.⁴⁹ Inpatient services are available 6 kilometres away in Hagadera camp.

It was noted that available structures in some of the Dadaab camps (e.g. IFO camp) were in a deplorable state with some lacking a waiting shed to protect beneficiaries from harsh weather conditions as they wait for nutrition services. This in a way impacts negatively on the quality of services offered at the facilities.

In Kakuma, though the current ratio of community health workers (CHWs) to refugees stands at 1:800, which although acceptable, remains below the required standard of 1:500. The JAM team found that there is need to increase the number of CHWs in Kakuma 4 as well as train them to ensure that all members in the community are reached with services; and are aware of where to seek services and which programmes and products they can access from the different service delivery points.

⁴⁹ UNHCR Nutrition Survey Report 2013

Recommendation 31: UNHCR and partners should review the minimum staffing requirement for the nutrition programmes and ensure that funding is prioritized for critical nutrition services in management of acute malnutrition among children and chronic cases. This will also guarantee sustainability of MIYCN programme in Dadaab after Action Contre La Faim (ACF) withdraws.

Recommendation 32: The JAM team also recommends establishment of a stabilization centre for management of children with complicated severe acute malnutrition in Kambioos camp to improve access and early treatment of severe acute malnutrition with complications.

Recommendation 33: UNHCR should undertake an assessment of structural needs across all health posts for necessary repairs and improvement for enhanced service delivery in both Dadaab and Kakuma.

3.5.6 Micronutrient Issues

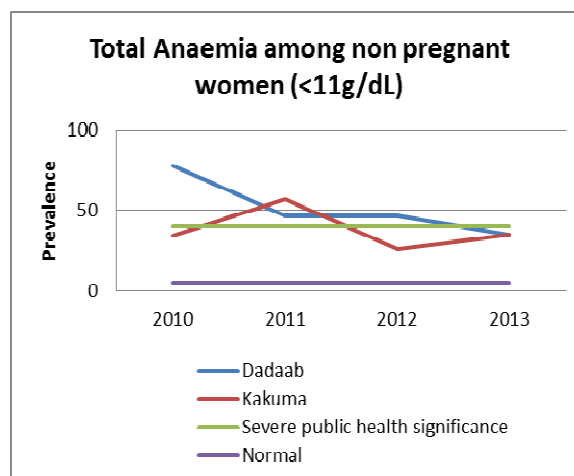
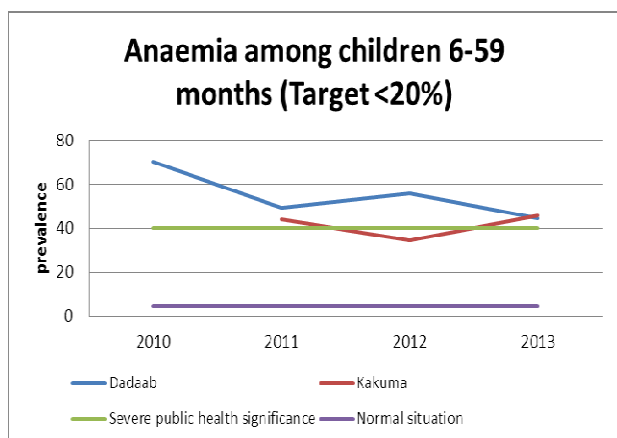
Anaemia prevalence among children aged 6-59 months is above 40% and remains a major public health concern although there has been gradual reduction over the past four years. Among children aged 6-23 months in Dadaab, one in two children is anaemic, while in Kakuma, two in three children (at least 70%) are anaemic.⁵⁰

According to a study by Kenya Medical Research Institute (KEMRI) in 2008, the main cause of anaemia was established to be iron deficiency due to poor diet diversification in Dadaab. Dietary iron exists as haeme iron from animal sources and non-haeme iron from plants sources. Haeme iron is easily absorbed and enhances absorption of non-haeme iron. However, the bioavailability of non-haeme iron is dependent on enhancers and inhibitors in the diet. For instance the varying levels of phytates in wheat, polyphenols in sorghum and tea may affect the bioavailability of iron in the diet available to refugees. This may be exacerbated by limited access and less consumption of enhancers such as meat and other sources of ascorbic acid such as fruits.

In Kakuma, malaria, which is one of the highest causes of morbidity, exacerbates this situation.⁵¹

⁵⁰ UNHCR Nutrition Survey Report 2013

⁵¹ UNHCR HIS Report



Anaemia prevention interventions in place include provision of fortified corn soya blend, SuperCereal Plus in the general food ration, and also as a blanket supplement for all children aged 6-23 months with SuperCereal Plus, deworming twice a year during *malezi-bora* campaigns (only children above 24 months), promotion of optimum infant and young child feeding practices (MIYCN programme) and on a minimal scale, treatment of sick children and adults that visit health facilities.

In both camps during focus group discussions and information from key informants, the team found that identification and treatment of anaemic children is weak, and only focuses on children who are sick or attend health clinics. Prevention is also weak due to lack of monitoring of utilization of SuperCereal Plus, which is the main vehicle for provision of iron to children 6-23 months. Among non-pregnant women of reproductive age group, prevalence of anaemia is at 35% in both camps. This prevalence is below the public health significance level but still above the target of <20% and the ultimate target for a normal population of <5%.

To prevent and reduce the prevalence of anaemia the JAM team recommends that:

Recommendation 34: Visual screening and referral of children with symptoms of anaemia among children (6-23 months) be incorporated into growth monitoring at the health posts. This should reduce the prevalence of moderate and severe cases while IYCN programmes will focus on optimal feeding to mild cases of anaemia.

3.5.7 Infant and Young Child Feeding

Promotion of infant and young child feeding practices remains the most proven high-impact strategy on child survival. Action Contre la Faim (ACF) has been providing technical support and implementing activities towards strengthening and mainstreaming activities aimed at achieving optimal feeding practices for mothers and children, albeit with more focus on children. There has been an improvement in core indicators, but gaps in translation of knowledge into practice remain.⁵² Development of a communication strategy that builds on existing stakeholder

⁵² ACF 2013 Formative Assessment

(community and partners) drivers/strengths is on-going in Dadaab. It is therefore envisaged that Behavioural change in this aspect would support in achieving sustained reduction in malnutrition especially among children rather than concentrating emphasis on only treatment that results in a revolving door programme where many of the children who are cured return to the programme within months of being treated, primarily because the same poor environment and lackadaisical feeding practices are maintained at household level.

The JAM team found that MIYCN programme implementation is low across all camps with the exception of Hagadera camp. With the end of the ACF two-year project on accelerating MIYCN implementation in Dadaab, there is need for full integration of the established programme at all levels in the health and nutrition programmes.

Recommendation 35: The JAM therefore recommends that UNHCR and partners scale up the MIYCN programme implementation in all camps in Kakuma and Dadaab. All the established existing mother-to-mother-support groups should be maintained, and the referral mechanism in place should be kept active.

In Kakuma only 25 mother-to-mother-support groups (MTMSG) have been established. The groups are composed of 20 members on average who are mentored by a trained mother support group leader on optimal feeding practices for children. They currently cover 25 blocks out of 131 blocks, thus the need to increase the number of groups to cover all blocks.

There is also a need to improve referral and integration of mothers in these groups at block levels. This will ensure that knowledge on high impact nutrition interventions is passed on to all mothers in the community in a systemic, sustainable and impactful way.

3.5.8 Education

Education remains a high priority for refugees in Dadaab and Kakuma. The Education Programme in Dadaab Refugee camps currently has 33 Early Childhood Development Education (ECDE) centres, 33 primary schools, 7 secondary schools, 6 Accelerated Learning Programme (ALP) centres, and 4 vocational/skills-training centre. In addition there are 13 fee-based primary schools managed by private individuals across the camps, which enrol children for both primary and ECDE classes. In Kakuma, there are 11 ECDE centres, 19 primary schools, one community primary school, four secondary schools, and a vocational/skills training centre.

Both primary and secondary schools are registered with the Government of Kenya and therefore permitted to conduct national exams for the certification of learners at the end of each cycle. Pupils in primary schools sit for a terminal examination at the end of Grade Eight known as the Kenya Certificate of Primary Education (KCPE). Those that proceed to secondary school sit for a terminal examination known as the Kenya Certificate of Secondary Education (KCSE) at the end of a four-year cycle.

Tertiary education access is mainly through Albert Einstein Academic Initiative (DAFI) and World University Services of Canada (WUSC) scholarships supported by UNHCR and WTK respectively, and with Jesuit Refugee Service (JRS) running an online diploma programme in Kakuma. Danish Refugee Council (DRC) is running a tertiary scholarship programme in Dadaab camp for certificates, diploma and degree courses. Education partners in Kakuma include LWF, JRS, WTK, WFP, NCCK and Don Bosco while those in Dadaab include CARE, Islamic Relief, LWF and WTK.

3.5.9 Health Education

Learning environment must promote the safety and wellbeing of learners, teachers and other education personnel and must be linked to health, nutrition and protection services mainly because they impact progress.⁵³ Though there are inadequate water storage capacities in the schools visited by JAM, learners have access to adequate potable water. The JAM team established that while a number of schools are fitted with the hand washing facilities in both Dadaab and Kakuma, there are some whose hand washing facilities have since 2013 been in stores awaiting installation. Gaps in coordination between UNHCR, education and WASH partners led to delays in installation of the hand washing facilities in schools. Through ample collaboration between UNHCR, refugee community, health and WASH partners, both pupils and PTA members have been trained on health education to promote, maintain and contribute to the knowledge of learners, staff and the community on healthy living both at the school as well as at the community level. According to the PTAs and pupils interviewed by JAM, hand washing practices taught in schools are replicated at the household level.

Recommendation 36: There is need to ensure that inter-agency coordination at the field is strengthened to ensure timely provision and installation of hand washing facilities in schools.

In addition, the JAM established that schools in Kakuma and Dadaab have inadequate latrines for learners. The ratio of latrines to learners in Kakuma is 1:65 in pre-schools, 1:95 in primary schools and 1:45 in secondary schools.⁵⁴ On average, the ratio of learners per toilet in the schools in Dadaab is 1:80 and 1:42 for boys in primary and secondary schools respectively while the girls' – latrine ratio is 1:72 and 1:14 in primary and secondary schools respectively – which is a significant improvement from 1:85 in 2010 and 1:90 in 2012 (immediately after the 2011 influx).⁵⁵ One of the schools visited by the JAM team, Hilal primary in Dadaab, had the ratio of latrines to pupils at 1:81 for girls and 1:90 for boys, which is far from Ministry of Education, Science and technology standards of 1:30 for boys and 1:25 for girls.⁵⁶ The increased enrolment that is not matched with adequate hand washing and hygiene

⁵³ Inter-Agency Network for Education in Emergencies (2010). Minimum Standards for education In Emergencies. Preparedness, Response, Recovery.

⁵⁴ UNHCR (2013) Draft Education Strategy for Kakuma Refugee Camp

⁵⁵ UNICEF, Dadaab Refugee Camps Education Management Information Systems, April 2014

⁵⁶ Ministry of Education, Science and Technology (2009) National School Health Policy

facilities and sufficient latrines in schools poses health risks, including the possibility of water borne diseases such as typhoid, cholera and dysentery.

Recommendation 37: In view of this, there is need for UNHCR to enhance the number of WASH facilities (e.g., latrines and hand washing facilities in schools in line with the Ministry of Education, Science and Technology guidelines.

Enrolment, Attendance and Absenteeism

Access to education is a fundamental right for every child of a school going age. The JAM established that there are major gaps in relation to the enrolment rates as indicated in the tables below.

Table 2: Pre-primary, Primary and secondary education data, ratios and distributions in Dadaab

Education Level	Pre-primary	Primary	Secondary
# of children enrolled in refugee schools	23,986	63,986	3,959
Number of Schools	33	33	7
GER Total	61%	59%	12%

Table 3: Pre-primary, Primary and secondary education data, ratios and distributions in Kakuma

Education Level	Pre-primary	Primary	Secondary
# of children enrolled in refugee schools	6,407	44,972	3,162
Number of schools	11	19	4
GER Total	42%	81%	15%

According to the PTA members, parents are reluctant to send their children to mainstream schools preferring that their children first graduate from *Duksis*⁵⁷ and then proceed to the formal education system. They proposed that agencies link education and school attendance to other assistance/services. It also emerged that the current practice where assistance targeting school going children such as distribution of sanitary pads, soap and female undergarments (hygiene kits) is being channelled through the FDPs negatively impacted on the attendance especially for girls. UNHCR Kakuma had recently changed the modality of distribution to ensure that everyone who is entitled personally received their supply while all school going children received their supply from schools.

PTAs in Dadaab observed that Kambioos being a relatively new camp in Dadaab is mainly composed of households that are economically vulnerable. Hence, children are engaged in economic activities to support the households, for instance boys are engaged in petty trades and girls as house-helpers in the more economically stable camps such as the neighbouring Hagadera, resulting in low enrolment and attendance rates. Children involvement in livelihood activities such as shop keeping, shoe shining, housekeeping, was noted to have a negative impact on school

⁵⁷ Refers to religious/Islamic centres in the camps that teach children at young age mostly morning hours. Children attend these centres at almost the same age as pre-unit in the formal education system.

enrolment in both Dadaab and Kakuma camps. Although secondary data suggest that enrolment is low in both Dadaab and Kakuma, there are refugee children who are enrolled in the schools outside the camp. In Kakuma, 1,612 and 112 children in primary schools and secondary schools respectively are enrolled outside refugee camp schools. There was no accurate data to determine the number of children enrolled outside the camp in Dadaab. Data for refugee children enrolled in post-secondary institutions outside the camp is well documented except for those in private scholarship programmes. The JAM team established the various factors that undermine the quality of education offered in both Dadaab and Kakuma as summarized in the tables below.

Table 4: Primary and secondary schools in Dadaab⁵⁸

Education Level	Pre-primary	Primary	Secondary
Student/teacher ratio	129	55	25
Student/classroom ratio	194	110	37
Desk/student ratio	9	5	2

Table 5: Primary and secondary schools in Kakuma⁵⁹

Education Level	Pre-primary	Primary	Secondary
Student/teacher ratio	65	88	35
Student/classroom ratio	68	118	45
Desk/student ratio	4	9	4

The combination of the low rate of enrolment/attendance and lack of adequate infrastructure and teaching staff is likely to undermine the potential for the achievement of the education objectives of the school meals programme and the Take Home Ration.

Recommendation 38: *Therefore, education infrastructure and staffing (e.g., number of schools, classes, desks) as well as teaching personnel need to be further enhanced by UNHCR to ensure that quality of education in both Dadaab and Kakuma continue to attract higher enrolment and attendance rates.*

Kitchen Infrastructure

At the time of the current JAM, 85% of the schools in Dadaab had permanent-built kitchens while in Kakuma, 100% of schools had functional permanent kitchens. In Dadaab, 15% of the schools had temporary kitchen facilities while only two emergency schools in Kakuma 4 have no kitchens, thus not implementing the school meals programme as indicated in the table below.

Table 6: Primary and secondary schools in Dadaab

Education Level	Primary	Secondary
Percentage of schools with permanent kitchens	85%(28)	N/ A
Percentage of schools with temporary kitchens	15%(5)	N/ A

⁵⁸ UNICEF, Dadaab Refugee Camps Education Management Information Systems, April 2014

⁵⁹ UNHCR Kakuma, Draft Education Strategy 2013—2016

Percentage of schools without kitchens	0%(0)	N/A
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Table 7: Primary and secondary schools in Kakuma

Education Level	Primary	Secondary
Percentage of schools with permanent kitchens	91%(17)	100%
Percentage of schools with temporary kitchens	0%(0)	0%
Percentage of schools without kitchens	9%(2)	0%

Notwithstanding the fact that most of the schools in both Dadaab and Kakuma had kitchens, JAM noted a number of kitchens were dilapidated and lacked adequate storage and working capacity to effectively handle the high enrolment in schools. In addition, the JAM team observed that though the emergency schools in Kakuma 4 had been established in January 2014, the school meals programme had not started in these schools six months later due to lack of kitchen facilities.

Recommendation 39: *In view of this, there is need for WFP and UNHCR to (1) rehabilitate the dilapidated kitchens in specific schools and (2) ensure the establishment of new schools is accompanied with the construction of kitchen facilities to guarantee the commencement of school meals programme with the opening of new schools.*

Complementary Activities: School Meals and Take Home Ration

JAM field visits revealed that, 100% of the schools in Dadaab and 91% of those in Kakuma are implementing both the school meals programme and the Take Home Ration for girls. Similarly, Dadaab and Kakuma experienced the pipeline break for Dry Skimmed Milk (DSM) and sugar since the month of March 2014. As a result of the pipeline break, School Meals Programme is being implemented without the DSM despite the fact that the PRRO 200174 project document requires that DSM be a component of the school meals programme food basket. However, the on-going food commodity pipeline break has not affected the enrolment, attendance as well as the number of learners fed through the school meals programme according to the PTA members, pupils and secondary data sources as the attendance rates have remained above 70% in Dadaab.⁶⁰ The population of the pupils fed against those in attendance has remained relatively stable in Dadaab and Kakuma. An interview with girls during the field visits suggested that they would still attend school even if there is no Take Home Ration. They further indicated that high priority needed to be placed on non-food incentives such as sanitary pads, pointing out that the latter ensured that they did miss schools during the menstrual periods.

Recommendation 40: *In the light of the current funding constraints, there is need for WFP and UNHCR to undertake an assessment for both the Take Home Ration and the School Meals Programme to determine their impact on girls' attendance as well as the overall attendance for both boys and girls.*

⁶⁰ UNICEF, Dadaab Refugee Camps Education Management Information Systems, April 2014. There was no EMIS data available for the attendance rates for schools in Kakuma at the time of the current JAM.

Recommendation 41: *Girls attending school should be provided with a sufficient number of sanitary pads to ensure that they did not miss school during the menstrual cycle.*

3.6 Contextual Issue 4: Environment, Cooking Energy, Water and Sanitation

Dadaab and Kakuma Refugee camps are located in an ecologically fragile, semi-arid area characterized by low rainfall, prolonged droughts and seasonal flooding during the rainy seasons. This, coupled with the continued increase of the refugee and host community populations, illegal encroachments and settlements, logging and overgrazing, and charcoal burning, has exerted pressure on the environment leading to environmental degradation.⁶¹ Clearing of vegetation to establish the camps and brick making added with the ever-increasing demand for wood fuel to meet household energy needs, and shelter construction materials have remained key environmental challenges. In Kakuma, 79% of the land degraded by end of 2012 had not been rehabilitated at time of the current JAM.⁶²

UNHCR, WFP and other humanitarian agencies are implementing various programmes to provide environmental, cooking energy, water, sanitation and hygiene services for the refugees in Dadaab and Kakuma. WFP (2013) SAFE report suggests a reduction in SGBV cases, reduction in amount of fuel usage at household level following an implementation of a WFP SAFE project in 2012. With reduction of firewood distribution by UNHCR, the refugees requested for more fuel-efficient stoves in order to survive the reduction in firewood allocation. The humanitarian network in Dadaab and Kakuma works closely with the refugee and host communities to implement environmental conservation activities such as green belts and tree planting. Field visits to the green belts and discussions with community leaders revealed that both the refugee and host communities worked closely with the UNHCR and partners to maintain and secure the established green belts in the camp. Despite these efforts, a discussion with partners' staff and community leaders revealed that the role of agencies in improving the environment has been diminishing with time due to the continuous reduction in budget for the environmental activities. According to the partners, the budget allocated to environmental conversation was higher when the camps started but awareness campaigns seem to be on the decline over the last one and a half years.

3.6.1 Environment

Partners and the refugee communities identified environmental concerns that affect food security and nutritional indicators in both camps. According to the refugees interviewed by the JAM team, humanitarian agencies and the refugee communities planted trees upon arrival in the camp, but later the trees withered due to lack of

⁶¹ See Government of Kenya (2014). Garissa County Government. County Integrated Development Plan. Towards a Competitive and Prosperous nation. According to the Government of Kenya (2014), the influx of the refugees in Dadaab and the continuous increase in the host community population are some of the major factors contributing to environmental degradation in Dadaab

⁶² Norwegian Refugee Council (2013). Environment Baseline Survey.

adequate water. This is further complicated by the lack of established tree nurseries in camps such as Ifo 2 East, Ifo 2 West and Kambioos in Dadaab, where refugee communities can grow seedlings; instead they source them from other camps. In addition, refugees interviewed reported that the lack of vegetation in Ifo and Ifo 2 camps mainly because 90% of the camps' inhabitants were originally pastoralists in Somalia and have limited knowledge of environmental practices such as reforestation. There is a gap in the management of seedlings at the refugee community level such that not many of seedlings are nurtured to grow into full trees.

In both Dadaab and Kakuma, refugees reported that they water the trees in their homesteads using the same water allocation for cleaning utensils and general washing. They also emphasize the need for agencies to continue working closely with the community in establishing and maintaining greenbelts in the camps. Despite these efforts, environmental degradation remains an on-going challenge in both Dadaab and Kakuma owing to increased demand for shelter construction materials such as wood and walling bricks. This could potentially result in conflicts between the host and refugee communities in addition to the exposure to risks related to accidents and dangers caused by soil harvesting pits that are left uncovered in the camps. The JAM team noted that while an environmental management strategy was in place in Dadaab, there was no such strategy in Kakuma.

Recommendation 42: There is need for UNHCR to ensure that an environmental management strategy for Kakuma is elaborated, as is the case for Dadaab. These must be aligned with the Garissa and Turkana County Governments environmental protection plans.

Effective environmental management is integral to peaceful coexistence between refugees and the host communities. The brick making exercise and harvesting of greenwood to supplement firewood gaps, as well as selling of firewood as a source of income by the host community, all contribute to the problem of environmental degradation. The gap in coordination and implementation of the Environment Management and Coordination Act (EMCA) of 1999 is attributed to the absence of a National Environment Management Authority (NEMA) representative at Kakuma and Dadaab level. The representatives are based in Lodwar and Garissa, and this makes it logistically difficult to reach the officers. This challenge, if not addressed will lead to continued degradation of the environment, escalation of conflicts between the host and refugee communities, health related risks especially prolonged malaria endemic due to mosquito breeding and eventual desertification, in the long run, complicated further by the fact that the encroachment of the greenbelts by the refugees negatively affected environmental conservation/rehabilitation gains.

3.6.2 Water and Sanitation/Hygiene (WASH)

Boreholes are the primary source of water for cleaning, washing and cooking in both Dadaab and Kakuma camps. In Kakuma 4, water is trucked to the camp due to limitations related to inadequacies of the reticulation system in the newly established area for new arrivals. The use of water trucking as the main source of water, coupled with the increasing number of new arrivals has led to inadequate water supply in Kakuma 4, as well as some parts of the older refugee population. Refugees store water in 5, 10 and 20 litre plastic jerry cans that are distributed by UNHCR and other partner agencies. According to refugee respondents, the water pressure at the taps is adequate and this reduces the time spent at the water points. Water taps are located at the centre of the settlement blocks, and the farthest household from the water tap was about 200 metres. Though the volume of water provided by agencies differs from one camp to the other, secondary data suggest that the water supply in Dadaab and Kakuma meets the SHERE standards as indicated in the table below.⁶³

Table 8: Daily water Consumption

Name of the camp	Litres per person per day
Kambioos	25.6 l/p/d
Hagadera	24.5 l/p/d
Ifo 1	32 l/p/d
Ifo 2	28.4 l/p/d
Dagahaley	27.5 l/p/d
Kakuma (old caseload)	20.6 l/p/d
Kakuma four (new caseload)	10 l/p/d

Recommendation 43: There is need for UNHCR to hasten the establishment of the water reticulation system to ensure that water supply for the new arrivals in Kakuma camp (Kakuma 4) is increased to the 20 l/p/p/d as per Sphere standards.

WASH partners in Dadaab and Kakuma have established sector specific monitoring and evaluation systems. The Kenya Red Cross Society undertakes a monthly water assessment to determine the level of household water needs against requirements. The households interviewed reported to be in possession of an average of three 20-litre jerry cans, one 10-litre jerry can and one 5 litre jerry can. They reported that these Jerry cans were issued during the initial registration, but have not been replaced since then despite the fact that some of them are broken. While the water supply is higher than the recommended UNHCR standards in Dadaab,⁶⁴ lack of adequate storage facilities at household level is likely to undermine the availability of sufficient amount of water for the households.⁶⁵ In Kakuma, 73.2% of the households had containers of more than 20 litres capacity. In summary, the

⁶³ Norwegian Refugee Council Report in Kakuma (2013) and Water, Sanitation and Hygiene Report in Dadaab camps (May 2014).

⁶⁴ Dadaab Water, Sanitation and Hygiene Briefs (June, 2014) and LWF First Quarter Report to UNHCR Kakuma (April, 2014).

⁶⁵ UNHCR (2006), Practical Guide to the Systematic Use of Standards & Indicators in UNHCR Operations recommend 20 lpppd

combined population that collected water of less than 20 litres (UNHCR Standards) were in the range of 25.17%.⁶⁶

Recommendation 44: There is need for UNHCR to ensure that regular distribution of buckets or jerry cans for water storage is undertaken to boost water storage capacity at the household level.

While there are a number of butcheries within the camps in Dadaab and Kakuma, there were no slaughter houses in some camps such as Kambioos and Ifo 2 East and Ifo 2 West in Dadaab. Business people slaughtered animals (mostly, goats and camels) in their households and took them to butcheries without official inspection from the Ministry of Health. Dadaab camp has 5 slaughterhouses against a total population of the whole camp. According to WASH partners, funding for slaughter houses is less prioritized as most of the resources are allocated to water. The main method of waste disposal in both Dadaab and Kakuma is through garbage pits. Although secondary data sources indicate that the current refuse pit to user ratio has improved to 1:566 from the initial 1:646, there is still a gap of 154 refuse pits to meet the sphere standards of 1:500.^{67,68}

Recommendation 45: UNHR to work with County Public Health Units to ensure meat inspection is undertaken in both camps

The participants interviewed by the JAM team reported that they knew that WASH committees were in existence, while 50% knew the committee members individually. The refugees reported that they were satisfied with the performance of the committees and were aware and satisfied with the modality through which the WASH committees were constituted. JAM teams were able to confirm that the WASH committees had been trained on issues to do with water, sanitation and hygiene.

Recommendation 46: The JAM recommends that UNHCR should maintain the current mechanism of instituting the WASH committees in order to create ownership and sustainability of WASH outcomes and practices.

3.6.3 Cooking Fuel

Firewood is the main source of cooking fuel in Dadaab and Kakuma Refugee camps. Demand for this resource is high and the capacity of the surrounding environment to provide for it sustainably is not conceivable. According to the National Environment Management Authority (NEMA), deterioration of the vegetation cover due to firewood harvesting for the refugees are very common challenges in relation to environmental degradation around the refugee camps.⁶⁹ As such, there is need for

⁶⁶ Norwegian Refugee Council (2013) Knowledge Attitude Practice Report

⁶⁷ UNHCR (2013) End of Year Report.

⁶⁸ Norwegian Refugee Council (2013). Environment Baseline Report.

⁶⁹ National Environment Management Authority (n.d.), Ministry of Environment and Mineral Resources. Turkana District Environment Action Plan 2009—2013

innovative approaches like enhancing the use of improved cooking stoves, alternative cooking fuel and promotion of energy saving cooking practices for overall energy conservation. The organized firewood supply by UNHCR and partners meets less than 20% of the domestic energy needs in refugee households who entirely rely on fuel-wood for all the domestic energy needs.⁷⁰ The remaining 80% and more is harvested within the 25 kilometres radius of both camps which could have a negative impact on the environment.

In Kakuma for instance, a study undertaken by WFP suggests that 75% of host community members rely on the sale of charcoal and firewood to refugees as their main source of income.⁷¹ However, refugees do not rely on firewood as their main source of income due to their limited access to the host community forestlands. As a consequence, they barter food rations in exchange for firewood, thereby undermining refugee household food security. This situation is further compounded by heavy reliance on non-energy efficient cooking methods such as open cooking for households without stoves, use of firewood and charcoal. Lack of adequate fuel is one of the underlying challenges to the environmental conservation efforts. Refugees have harvested live trees (vegetation) for cooking fuel leaving the camp bare.

Lack of sufficient distribution of firewood to refugees is the cardinal cause of wanton destruction of vegetation cover in the camps. Focus group discussions with refugees in Kambioos revealed that refugees bridge the gap by cutting down the vegetation to get firewood, buying firewood from the wood sellers as well as bartering food to buy firewood, hence undermining their household food security. This was corroborated by the secondary data sources which suggest that an average of 25% of food is bartered to supplement cooking energy⁷², although the 2013 nutrition survey findings showed that 1-3% of the food is bartered for firewood while the FSOM showed that 3% and 4% of all household expenditure was spent on cooking fuel.

Firewood distribution is done monthly in both Kakuma and Dadaab. In Kakuma six distributions were achieved in 2013, translating to 50% of planned allocations. Conversely, in Dadaab, firewood distribution is limited to only vulnerable groups given the size of population. Occasionally, some households pool resources together and buy a cartful of firewood to benefit from lower costs associated with bulk buying. According to the Focus Group Discussions held in Ifo 2 West in Dadaab, the cost of firewood depends on the quality. High quality firewood is sourced from distant locations in the deep-forests, and may cost KES 2,000 per cart. Lower quality firewood harvested within the peripherals of the camps goes for KES 1,500 per cart. The security risks inherent in fetching firewood contribute to high prices at the

⁷⁰ See Food For the Hungry Kenya (2013). Final SAFE Report. The report estimates that organized firewood distributions meet 20% of the firewood requirements in Kakuma camp.

⁷¹ WFP SAFE Project Summary Report (2013). The report briefly summarizes WFP's Safe Access to Firewood and alternative Energy project in Kenya.

⁷² WFP (2012) SAFE Project in Kenya Baseline. According to this baseline, up to 50% of the refugees barter food to access fuel. Of these, 50% of those who barter food, an average of 25% of the food is bartered to access cooking energy.

market level. According to refugee respondents, people venturing out to fetch firewood face possible banditry attack, and this increases firewood prices.

As a precautionary measure, women fetch firewood in groups in the mornings and return to the blocks in the evenings. The women reported that the office of the Department of Refugee Affairs in Dadaab has taken them through trainings on appropriate dead wood harvesting methods. Sometimes, they encounter protection related risks in the process of collecting firewood such as rape and other forms of gender based violence.⁷³ In such cases, they first report to the hospital for post exposure prophylaxis (PEP), and then to the police and finally to the agencies for psychosocial counselling and support.

Over the years, and jointly with its partners, and in partnership with the Kenya Government, UNHCR has been undertaking wide ranging interventions, albeit at a small scale, aimed at addressing the above issues related to environment and cooking fuel. These interventions include provision of firewood harvested in an organized and eco-friendly manner; land rehabilitation through the “green-belt approach”; provision of tree seedlings for planting in institutional as well as residential compounds; fabrication and distribution of fuel-wood energy saving stoves; internal and external monitoring of firewood harvesting zones and conducting Environmental Impact Assessments (EIAs) and Environmental Audits (EA) in compliance with Government of Kenya regulations. However, these mitigation measures are not adequate and more needs to be done. Environmental coordination is one of the factors required for the proper implementation of the environmental activities. The Environment Management and Coordination Act (1999) spells out the different roles in management and coordination of the environmental issues.

On full realization of the dilution effects of insufficient and inefficient cooking energy sources on households’ food security in terms of net available food after sales, WFP initiated a project on safe access to firewood and alternative energy (SAFE) in 2012. This was also a recommendation of the UN inter-agency taskforce on safe access to firewood and alternative energy. While developing the SAFE project, WFP adopted a four-pronged strategy as follows:

1. Reduce vulnerability and frequency of exposure of women to risk through the scaling up of dissemination of fuel efficient stoves and alternative fuels.
2. Explore energy technologies that can effectively be applied to livelihood and protection needs.
3. Promote creation of livelihoods to reduce reliance of women on the collection of firewood for income.
4. Provide schools with fuel efficient stoves to help ensure that the cost of fuel is not an obstacle to school attendance.

⁷³ WFP (2010) Sexual and Gender-Based Violence in Food Assistance in Kenya

By the end of the SAFE pilot project, 26,000 fuel-efficient stoves were distributed to 26,000 households (21,000 refugee households and 5,000 host community households in Dadaab and Kakuma).⁷⁴ With these efforts, clearly there is a move towards addressing cooking energy needs among refugees in Dadaab and Kakuma through an environmental sensitive approach. However, the missing link remains coordination and harmonization of these initiatives by UNHCR and WFP. Moreover, beneficiaries' participation in environmental conservation efforts is paramount for the sustainability of any environment initiative.

According to key informants interviewed in both Dadaab and Kakuma, who were trained as part of local efforts on how to make stoves, 20% of the participants reported that they were using their own locally made stoves. However, challenges were reported with the locally produced stoves because they were immovable. In Dadaab, the beneficiaries interviewed by JAM team reported fuel-efficient stoves distribution to have been confined to only target households and expressed desire for the project to be extended possibly to all refugee households. The refugee respondents pointed out that the modality of targeting stoves needed to be better systematised and done through the environment, water, sanitation and fuel committees rather than the elected camp leadership as is the current practice since the latter may be guided by other considerations than need.

Recommendation 47: The JAM recommends that UNHCR should undertake to develop an energy strategy.

3.6.4 Non-Food Items (NFIs)

UNHCR has made significant efforts to ensure that distribution of soap is regularized in both Dadaab and Kakuma in 2013 and better part of 2014. All registered refugees receive 250 grams/person/month through the General Food Distribution. UNHCR through partners also distributes sanitary pads to all females of reproductive age including school going girls to safeguard high personal hygiene standards, health, dignity and well-being.

According to the refugees interviewed by JAM teams, the last 20-litre jerry cans were distributed in June 2013 in Dadaab. In addition, most of the protracted refugees reported that they received kitchen sets (cooking and eating utensils) at the time of registering. Since then, they have not received kitchen sets in spite of the wear and tear to the sets they originally received. The lack of adequate kitchen sets and water storage containers necessitate beneficiaries to sell a portion of their food rations to acquire new ones, and replace those that are worn out, further curtailing household food security.

Recommendation 48: Since the sale of food has an impact on household food security, JAM recommends that UNHCR should increase the distribution frequency of NFIs.

⁷⁴ WFP (2013) Safe Project in Kenya

3.7 Contextual Issue 5: Coordination, Refugee Influx, Repatriation and Population

To ensure coherent humanitarian support to refugees by agencies in Kenya, proper coordination, policy and institutional management is critical. This section of the report discusses how the existing policy environment, laws and processes of refugee registration influence access to food and related services. In 2013, a Tripartite Agreement was signed by the Government of Kenya (GoK), the Federal Government of Somalia (FGoS) and the United Nations High Commissioner for Refugees (UNHCR), to ensure an orderly, safe and dignified voluntary repatriation process for the Somali refugees in Kenya.

In Kakuma camp, influx of new asylum seekers from South Sudan has been witnessed since mid-December 2013 after violence broke out in the country. The signing of the tripartite agreement for voluntary repatriation of Somali refugees, and the influx of the South Sudanese refugees had respective impacts on both Dadaab and Kakuma camps in relation to security, livelihoods and future programming. Availability of livelihood opportunities in the two camps is presented in relation to refugees' coping mechanisms and dependency on food assistance.

3.7.1 Population

The population numbers in both Dadaab and Kakuma camps have considerably fluctuated since 2012, primarily because of the stabilization of the humanitarian situation in Somalia and emergence of conflict in South Sudan. In addition, the successful implementation of the refugee population verification exercise and the introduction of a biometrics based food distribution system have improved the accuracy of population statistics management. The total population of Dadaab and Kakuma at the time of the current JAM was 519,361 persons (356,879 for Dadaab and 162,482 for Kakuma). As a result of the 2012/2013 Population Verification Exercise (PVE) in Dadaab camps, the population reduced from 486,879 persons in September 2012 to 402,481 persons by 31st August 2013.⁷⁵

A PVE was not undertaken in Kakuma camp during that period. The rollout of biometric checks in the general food distribution in Dadaab and Kakuma as of October 2013 has generated knock-on effects on the feeding population of both camps. In Dadaab, biometrics reduced the feeding population from 402,481 persons to the current 356,879 persons, representing approximately 11% decrease while in Kakuma the feeding population reduced from 128,271 to 110,071 persons, representing a 14% decrease. In light of the demographics (movements, birth and death), possible repatriation, resettlement, relocation of urban refugees to the camps as a result of April 2014 Government directive; it is estimated that the Dadaab population will oscillate between 350,000 persons and 390,000 persons over the next

⁷⁵ Source: UNHCR Verification Report as per August 31st 2013

one year.⁷⁶ This figure is relevant for planning and other programming purposes.⁷⁷ Continued donor support will be critical to provide assistance and consolidate the food security and nutritional gains over the next two years.

As of September 2013, the population of registered refugees in Kakuma was 125,803 persons. By June 2014, the population had risen to 162,482 persons mainly as a result of influx from the war torn South Sudan. The reduction in the feeding population brought about by the introduction of biometric checks has been cancelled and surpassed by the influx of the new arrivals from South Sudan.

Recommendation 49: *As more refugees continue to flow into the camp, opening another camp in Kakuma incorporating a self-reliance approach should be pursued by UNHCR and DRA, without which further pressure will be exerted on the fragile ecosystem as well as on the livelihoods of refugees and the Turkana host communities in the vicinity of the camp.*

In light of the political situation in South Sudan and the attendant influx, demographics, as well as relocations, Kakuma camp population is projected to exceed 300,000 persons by 2016. The camp was designed for a population of 90,000 but now accommodates 162,000 persons. Its facilities are also unable to meet the mounting needs of the increasing population. The new Kakuma 4 section, of Kakuma camp is presently congested, which has increased pressure on the already inadequate health, water and sanitation facilities. During the Kakuma field visit, the JAM team noted that a new site was being negotiated by the DRA with the Turkana county Government to ease the current congestion. Resources will be needed to develop facilities in the new site as well as improve the conditions in the current sites.⁷⁸

3.7.2 Registration and Policy

Administrative constraints on the registration of new arrivals, delays in registration of new births and an unfavourable protection environment due to Government restriction on movement, were cited as the major bottlenecks affecting refugees' access to food, related services and livelihoods. The Department of Refuge Affairs, with the support of the UNHCR, undertakes refugee registration. Registration is among other things affected by security, Government policy, UNHCR and DRA staffing capacity and information management. According to beneficiaries, the registration of the new arrivals and new born babies is a gap that needs to be addressed. Updating of the babies born outside camp hospitals into the feeding manifests is tedious, bearing in mind the long period that it takes for them to acquire

⁷⁶ The Government of Kenya, through the DRA issued a directive in April 2014 ordering all registered refugees residing in urban areas to relocate to the camps in Kakuma and Dadaab.

⁷⁷ This is based on UNHCR population projection figures which take into consideration new births, deaths, relocations, resettlements and possible repatriations or spontaneous returns.

⁷⁸ Detailed population trends for Dadaab and Kakuma is provided in the annexes.

the birth certificates. Securing of birth certificates for babies born in camp hospitals takes between two-four months in Dadaab. In Kakuma birth notification alone triggers the inclusion of a new born into the food manifest.

As many new arrivals are hosted by families of old caseload refugees, delays in registering them and/or new-born babies impacts their food security since they often have to share their food rations with the new arrivals who are, in most cases unregistered. At times, such households are compelled to sell some of their personal effects in order to buy more food to survive till the next distribution cycle. Some engage in casual labour hence, which at times involves children generating income for their families. All these bottlenecks negatively impact on refugees' food security and nutrition. In addition, it was reported by respondents that some unregistered female new arrivals in Kakuma 4 were engaging in transactional sex to generate income in order to buy food and other non-food items. The persisting constraints in registering new arrivals and/or new born babies have an impact on the household food security for the hosting households of old caseloads since they have to share their food rations with unregistered persons.

The JAM team focused on mapping changes perceived by refugee communities related to the enforcement of the results of biometric checks in the general food distribution, which started in October 2013 in both Dadaab and Kakuma camps. The protracted refugees who are able to draw comparisons to the old system of food collection stated that biometrics system has led to major adaptation changes among refugees. Negative attitudes continue to persist because of the high levels of accountability induced by the biometrics system on food collectors in the camp during distributions. However, no major challenges related to food were reported within the communities. The community leaders, including the Food Advisory Committee members reported that they have not observed any major changes with regard to the ability of the households to access food rations since the commencement of biometric system in food distributions. Refugees and community leaders reported stealing food and ration cards at the distribution centres had drastically reduced since the introduction of the biometrics system.

3.7.3 New arrivals

Since 2012, the Government of Kenya has stringently regulated the registration of new arrivals in Dadaab. A short registration window was opened by the DRA between April and June 2014 resulting in the registration of 8,589 persons.⁷⁹ Unregistered Persons of Concern (POCs) have no access to food and often depend on the food rations of registered persons. They however have access to all other essential services with the exception of shelter allocation, in addition to food. In Dadaab, the JAM team observed that there were a number of refugees in the camp that did not access food because they were still unregistered, biometrics inactivation for those absent during more than three consecutive food distribution cycles, but had returned to the camp, and the others relocated from Kakuma and Nairobi whose

⁷⁹ UNHCR New Arrivals Registration Update Dadaab as at 16th June 2014

data is pending transfer to Dadaab. In addition rejected and deactivated asylum seekers are not included in the general food distribution manifest. In a focus group discussion in Dadaab, a question was posed to the beneficiaries as to how unregistered refugees cope in the absence of the WFP food rations. To reduce the sensitivity of the question, the team used proxy indicators instead, asking for general opportunities available for the concerned individuals in the camp. It emerged that casual work, domestic chores, and borrowing from neighbours are the measures of last resort that they turn to. Similar responses were noted in the focus group discussions held in Kakuma regarding the mechanisms employed by the new arrivals to supplement their food and non-food needs besides WFP food rations.

In Kakuma, the influx of refugees from South Sudan has presented a logistical and infrastructural challenge for the DRA. The number of DRA staff, office space and equipment is inadequate as compared to the number of the new arrivals in the camp. As a result, there is a backlog of 8,491 persons unregistered since January 2014. New arrivals awaiting registration are issued with a token, which allows them access to food and other essential services.

3.7.4 Protection from Crime

The Kenyan Government is responsible for the security of all refugees in Dadaab and Kakuma camps. Interviews with the Deputy County Commissioners and police chiefs in both camps revealed amicable working relationships between the humanitarian agencies and the GoK. There are day and night time security patrols as well as dedicated standby vehicles and personnel to respond to any security related emergencies. The police provide regular armed escorts for humanitarian workers to and from the camps. Police stations are situated in each of the camps in Dadaab. In Kakuma, there are plans to establish a police station within Kakuma 4, the new arrivals area.

A community-policing programme is in place in both camps through the Security Partnership Programme between UNHCR and the GoK put in place in 2011.⁸⁰ The programme aims to reinforce law and order in the camps and the surrounding refugee hosting areas. However, focus group discussions with refugees in Dadaab and new arrivals in Kakuma, as well as key informant interviews with security officials, brought out a number of gaps with the existing arrangements. These include delays in police response to emergencies/calls in the blocks in both Dadaab and Kakuma, inadequate police personnel in Kakuma, insufficient fuel for the police to facilitate camp patrols in Kakuma, disjointed information flow and coordination between the refugee community security focal persons and the police, and distrust between police and the refugees.

⁸⁰ Kenya Comprehensive Refugee Programme, UNHCR and Consortium of Humanitarian Agencies (2014). There are plans to review the Security Partnership Project between UNHCR and GoK (2011) to take care of recent emerging realities and lessons from the last two years of implementation in the camps.

3.7.5 Risk of Sexual & Gender-Based Violence and Response

The JAM findings reveal that sexual and gender-based violence are on-going in both Dadaab and Kakuma camps. Cases of rape, domestic violence, child labour and assault were reported as rampant, especially in Kakuma camp. Focus group discussions with beneficiaries and key informants revealed the use of children for commercial and sexual purposes as an entrenched practice in Kakuma. It emerged from the focus group discussions in Kakuma one and four that female children are used as sales persons in businesses since they easily 'attract' customers.

In households where men collect food, the JAM team was informed that a number of them sell part of the rations and use the cash to buy alcohol or *miraa* (khat). In both Kakuma and Dadaab, cultural exigencies among South Sudanese and Somali refugees render most cases of sexual or gender based violence unreported. Even so, response by law enforcers is slow and prejudiced for reported cases.

In Dadaab, cases of rape, banditry, assault and domestic violence are reportedly common. Rape often takes place during firewood collection. In Ifo 2 camp however, females are reportedly raped even within the refugee blocks. Based on interviews with respondents and key informants in both Dadaab and Kakuma camps, cases of child labour are fewer in Dadaab as compared to Kakuma.

3.7.6 Protection of Children

As mentioned above, child labour is a protection concern in Kakuma where use of children as sales girls, labourers and for sexual exploitation is rampant according to respondents from focus group discussions. Discussions with key Government officials in Kakuma indicated that the law enforcers are over stretched and sometimes they lack vehicles or fuel to mount speedy responses. Although institutional frameworks exist for protection of children from abuse, structural and cultural hindrances hamper the implementation. Coordination between UNHCR, child protection agencies, the children's officer and the police can save children from cruel acts and improve the protection space.

3.7.7 Self-reliance/Durable Solutions/co-existence with Nationals

In assessing the possibility and existence of self-reliance and durable solutions, it is imperative for the humanitarian agencies to explore over-arching policy frameworks and laws that regulate the refugee situation in Kenya as well as the global economic and humanitarian environment. The livelihood options available for refugees are closely intertwined with the co-existence and relationship with host community nationals around the camps.

Dadaab and Kakuma refugees have been receiving humanitarian assistance for over 22 years and there has been a realization that the orientation of this support needs to shift in a manner that will provide more self-sustaining skills whether they repatriate

to their countries of origin, remain in the camps, locally integrate or are resettled to third countries. However, the formulation of any long-term self-reliance strategy is constrained by the absence of an enabling policy by the Government of Kenya.

According to a 2013 study of livelihoods opportunities and activities in Dadaab by DRC, such a policy should recognize the need for assimilation as well as repatriation. For Somali refugees, as it is now, the Government is focusing entirely on repatriation. Conversely, the Federal Government of Somalia does not have the capacity to cater for the welfare of the returnees who need continuing support.⁸¹ In 2013 the GoK, the FGoS and the UNHCR signed a tripartite agreement to facilitate voluntary return of Somali refugees.

Although this agreement creates a favourable legal framework for voluntary repatriation, the prevailing security and structural conditions inside Somalia is likely to hamper its implementation. During the JAM field visits in Dadaab, the question of repatriation was posed to Somali refugees. The majority of them expressed reluctance regarding their intention to return citing insecurity in the vast rural areas where the majority will have to settle should they return to Somalia. The refugees who regularly visit Somalia and return to the camp cited the need to re-unite with their families and farming back in Somalia. At the time of the current JAM, the UNHCR had undertaken a *Return Intention Survey*, but the report had not been finalized.

Aside from insecurity concerns, other factors cited by the refugees that limit their intention to voluntary return to Somalia, especially for protracted refugees include, but not limited to the inability to reclaim land and property back in Somalia, lack of access to social protection in areas of return and lack of confidence in the durability and efficacy of the new Government.⁸² Thus, there is compelling need to prepare refugees in self-sustenance strategies that they could use to increase their capacity to engage in diverse livelihood opportunities whether in Kenya, countries of origin, or in cases of resettlement to other countries. With regard to refugee livelihood options, the team found out the following activities in Dadaab:

- a) a few whole sale shops
- b) small scale business outlets
- c) casual work
- d) hairdressing and beauty
- e) motor vehicle mechanics and driving
- f) incentive work (semi-skilled and unskilled)
- g) a few cyber cafes in main camps of Dagahaley, Ifo and Hagadera
- h) food kiosks
- i) small scale construction work.

⁸¹ Intermediaries in Development. The Dadaab Dilemma: A study on livelihood activities and opportunities for Dadaab refugees, 2013.

⁸² Recent in-fighting among the Federal Government of Somalia officials and the resurgence of terrorist group activities in the rural areas have dimmed the hopes of many refugees and observers.

Focus group discussions with market committees and key informant interviews notes existing gaps in livelihood skills among refugees rendering them disadvantaged in starting and managing income generating activities. Inadequate sources of start-up capital as well as lack of proper functioning markets in smaller camps such as Ifo 2 and Kambioos were noted and observed as further limitations to self-reliance. Insecurity in the two camps also undermines the refugees' ability to engage in meaningful livelihood activities leading to higher dependence on WFP food aid. In Dadaab, there are three vocational and life-skills training centre in three camps of Hagadera, Ifo 1 and Dagahaley and one in Dadaab Town managed by NRC through the support of both UNHCR and WFP. The centres accept students from both refugee and host communities.

In Kakuma camp two vocational training centres exist; one is located in the refugee camp and the other located in the host community. Just like in Dadaab, both centres accept students from both refugee and host communities. JAM found out that the centres in Kakuma are better run and equipped than those in Dadaab. The team visited one of the training centres, Don Bosco in Kakuma, to witness the experience of learners and to generate an understanding of how the skills acquired could translate into self-reliance opportunities. Most of the courses offered in the centres, which include carpentry, masonry, tailoring, dressmaking, computer, electronics and electricity, hairdressing and beauty, etc., find ready markets within and outside the camps.

The livelihoods study conducted in 2013 in Dadaab recommends for a re-orientation of vocational training to equip refugees with useful skills even when they repatriate to Somalia.⁸³ For Somali refugees, the study argues for a clear dichotomy between pastoralist and non-pastoralist clans as well as consideration of the region of origin in so far as the preference for various vocational training courses is concerned. For instance, pastoralist clans showed reluctance to artisan activities as they are considered the occupations of lower clans.

Similarly, those refugees who had originated from urban areas (Hagadera camp in Dadaab) typically prefer training in skills such as Information Technology and electronics, while those from rural areas prefer skills in livestock rearing, farming and so on. This understanding is integral to agencies in designing appropriate vocational training set for self-reliance and future use in case of repatriation. Lack of adequate education and low literacy levels remain the major factors undermining the capacity of the majority of the refugees to gain access to vocational training. From the focus group discussions, it emerged that a combination of the lack of sustainable livelihood activities and limited resource allocation to programmes in livelihoods has a direct impact on food security and nutrition of the refugees thus increasing their dependence entirely on food assistance.

⁸³ The study was conducted in Dadaab in 2013

From the foregoing discussions, augmented by respondents and key informant interviews, the majority of Dadaab and Kakuma refugees still depend entirely on food aid while opportunities for assistance differentiation exists. The limiting global funding environment implies even food aid support will inevitably fall far short of meeting the refugees' food and nutritional needs like it happened in November 2013 when WFP had to cut food rations by 20% due to resource gaps. The relationship between development of sustainable livelihood options and dependence on food assistance is cyclical.

It is clear at this stage that a livelihood strategy for the two camp locations is required more than ever. The strategy will need to be preceded by a household livelihoods survey, mapping the extent and availability of the livelihoods in the Dadaab and Kakuma households. Thereafter, livelihood support based on identified gaps should be rolled out taking into account the above realities.

In response to cases of low-grade attacks in Nairobi and Mombasa, the GoK stiffened the encampment policy as well as further travel restrictions on refugees in April 2014. In addition, the DRA directed that all urban registered refugees to relocate to Dadaab and Kakuma refugee camps. As of April 2014, there were 50,815⁸⁴ persons registered as urban refugees mainly in Nairobi, Mombasa, Nakuru and Kajiado. With the GoK's directive, this number would put more strain on food and other services in Dadaab and Kakuma camps. These events have further curtailed refugees' prospects for self-reliance and search for livelihoods opportunities in urban areas.

Refugee camps act as important centres of economic activities that can have beneficial outcomes on the nearby host communities. This dynamic can be seen in the refugee camps in Dadaab and Kakuma. Large amounts of economic exchanges take place between the Dadaab refugees and the local Garissa and Turkana Counties, further enhanced by intermarriages and other social bonds. This provides evidence against the notion that camps constitute an exclusively negative consequence for host communities.⁸⁵ During the JAM field visits in Dadaab and Kakuma, the team witnessed and observed several areas of the social and economic advantages to the host community contributed by the presence of the refugees:

1. Water provision to livestock and humans through drilling of boreholes by humanitarian agencies.
2. Livestock re-stocking support for host community members.
3. Land reclamation activities through provision of food for assets.
4. Host community members benefit from vocational training offered by agencies, St. Clair in Kakuma and YEP centres in Dadaab.

⁸⁴ UNHCR. Kenya Comprehensive Refugee Programme, 2014.

⁸⁵ Yudex Hasbun. *Sudanese-Refugee-Livelihoods-in-Kenya Overcoming Adversity: Alternative Livelihood Dynamics Affecting Sudanese Refugees Residing in Kenya* available at <http://yudexhasbun.hubpages.com/hub/> Accessed on 17th April 2014

5. Employment opportunities for host community members.
6. Ready market for host community livestock products.
7. Cheaper access to cereals, pulses and oil than other parts of Kenya.
8. Growth of infrastructure in and around the host community in the form of roads, telephone services, electricity and health services.
9. Rental income from buildings and other structures used by agencies.

Indeed, the high-density population of the host communities around Dadaab and Kakuma camps is a testament of the pull factor attracting Kenyan host communities around the camps. However, the economic benefits enumerated and discussed above are often undervalued as most observers tend to focus on the living conditions of the camps' inhabitants rather than the mutual benefits taking place between the refugees and the local host population. It is therefore not surprising that complaints about refugees living 'better lives' punctuated the JAM team's focus group sessions with the host communities during the field visits. With respect to the new political and governance dispensation, the devolved Governments of Garissa and Turkana could play an important role in advocating for rights and privileges of refugees. Humanitarian agencies in both Kakuma and Dadaab have a role to play as partners in local development and service delivery. County Government leadership have the potential to influence the public opinion around the issue of refugees, and in the process, could prove to be effective partners in shaping the on-going national discourse, particularly with regard to Somali refugees.

Recommendation 50: *One of the key limitations to refugee self-reliance and expansion of livelihood opportunities is restriction on movement and the limiting policy environment. UNHCR and the civil society should continue advocating with the national Government on freedom of movement for the refugees.*

Recommendation 51: *UNHCR should undertake to develop a strategy for comprehensive self-reliance programmes in Dadaab and Kakuma within the next two years. Such an intervention needs to be connected to, and cognizant of the local county Government development plans.*

3.7.8 Partnership and Coordination

The existing partnership between UNHCR and WFP is a model that should be sustained and carried forward. The value of this collaboration as seen in the successful implementation of biometric verification system in food distribution cannot be gainsaid. Riding on this success, there is need for both agencies to explore other programme areas where biometrics can be used to improve on operations efficiency, and possibly save costs. It is hereby proposed that the use of biometrics be explored in the distribution of non-food items and in maternal and child health services⁸⁶.

⁸⁶ TANGO. Operation Evaluation Kenya, PRRO 200174, Food Assistance to Refugees: An evaluation of WFP's Operation.

WFP and UNHCR collaboration with the Government of Kenya through the Department of Refugee Affairs is robust, and the security partnership project through the ministry of internal security and coordination of national Government has thrived well. Both UNHCR and WFP maintain partnerships with various NGOs that directly implement the various programmes through Field Level Agreements and/or memorandum of understanding (MOUs). The JAM team observed the cooperation from NGOs during the field visits to Dadaab and Kakuma demonstrated by joint activity planning, implementation and active participation and consultation.

In terms of governance responsibilities, the county Governments have the responsibility for setting county laws and legislation. Certain functions will now be managed at the county level; for example, the management of primary level health services, livestock trade, local trade and markets, revenue collection, water (including extraction, licensing and usage) and sanitation, and general public works. The national Government retains control over education, security and policing, as well as macro-economic policy. Policy issues regarding refugees are still, therefore, a function of the national Government. Continued collaboration with the national Government is paramount in areas of security, policy advocacy and trade regulations.

Recommendation 52: UNHCR should harmonize registration and inclusion of newborn babies into feeding manifests in Dadaab camp.

Recommendation 53: WFP and UNHCR should through active involvement of refugee community revise the biometric food collection methodologies especially as regards designation/assigning of alternate food collectors. This should be tailored to meet the unique circumstances of the disabled, the sick, the elderly and others with special needs.

Recommendation 54: UNHCR should strengthen the current repatriation help-desks in Dadaab and improve on information and communication strategies around repatriation.

Recommendation 55: UNHCR and DRA should improve on coordination and information sharing regarding registration process with refugees, including any structured schedules.

3.8 Contextual Issue 6: Host Community and Security

The relationship between refugees, host communities and integration with county development plans is discussed in this section. Existing security arrangements within the two camps is also analysed in context of emerging security trends in neighbouring South Sudan and Somalia.

3.8.1 Relations with Host Communities

The host communities surrounding Dadaab and Kakuma camps fall under Garissa and Turkana counties. The devolved system of Government is meant to bring services closer to the people, improve planning and management, and thus improve service delivery to citizens. After suffering years of social and economic neglect, the North East and North West regions should benefit from devolution, as development programmes will ideally be better targeted to suit the specific needs of the people in a manner that takes into consideration the arid and semi-arid contexts.

The JAM team met representatives of host communities during the field visits in Dadaab and Kakuma, made observations and interviewed key informants from the national and county Governments. Key findings:

- a) Conflicts over resources like grazing pasture exist between refugees and host communities.
- b) Wood-fuel harvesting by refugees in adjacent host community lands.
- c) Relationship between host communities and refugees oscillated from cordial to frosty-when conflicts arise.
- d) Soil harvesting for brick making in Kakuma; and mud-walling houses in Dadaab.
- e) Low-level insecurity due cases like theft perpetrated by members of host community against refugees.
- f) Deforestation and disputes over water resources between hosts and refugees in Kakuma.
- g) Sharing of facilities and services, health facilities, schools in Kakuma between host communities and refugees.
- h) Intermarriages between locals and refugees.
- i) Livestock re-stocking for host community members by agencies in Dadaab (IOM and RRDO).
- j) Humanitarian and developmental support is provided to host communities by agencies: water boreholes for humans and livestock, shared health facilities and benefits like fresh food voucher project.

WFP has Food for assets (FFA) projects jointly implemented with the GoK where food is distributed to households for undertaking land and environmental conservation activities. Host community respondents interviewed during the JAM process described FFA as a valued project with immediate and long-term benefits to the community. In collaboration with County Governments of Garissa and Turkana, a possibility for small to medium scale water and irrigation projects modelled along FFA should be explored for the host community. Although the PRRO 200174 Evaluation Report⁸⁷ found FFA in its current design as ‘misplaced’ and without clear

⁸⁷ The WFP PRRO 200174 evaluation Report recommended a re-design of FFA project with clear objectives and outcomes including shifting from Refugee Operations to the programmes for the Kenyan host populations managed by the Garissa and Lodwar Field Offices

objectives, interviews with beneficiaries during JAM demonstrated the usefulness of this intervention to the host communities in Kakuma and Dadaab.

Recommendation 56: It is recommended that a re-designed food for assets project integrated within the county development plans of Garissa and Turkana counties, with clear objectives and outcomes be part of the next WFP PRRO.

However, as discussed earlier, the benefits hosting communities derive from the existence of refugee camps are often undervalued and understated, as most observers tend to focus on the living conditions of the camps' inhabitants rather than the mutual trade and project activities benefits taking place between the refugees and the local host population. Hence it is not surprising that complaints about refugees living 'better lives' than host nationals, punctuated the JAM team's field visits in Dadaab and Kakuma. As indicated earlier, some benefits like improved transport and communication, development of thriving markets are salient and may not be easily recognized by host populations as accruing from the presence of refugee camps. UNHCR/WFP and all humanitarian actors must actively engage the new county Governments through awareness, highlighting both the explicit and subtle benefits host communities derive from refugee camps. Of course refugee programmes are meant for refugee populations and aid agencies can only manoeuvre within allowable funding limitations. Finally, when a thriving relationship is cultivated among refugees and humanitarian agencies on one hand, and the host county Governments on the other, the devolved Governments of Garissa and Turkana could subsequently play an important role in advocating for the rights and privileges of refugees.

3.8.2 Current Security Arrangements

Dadaab complex is situated approximately 80 kilometres from Kenya-Somalia border. Cross border proliferation of weapons has been on-going since the fall of Somalia central Government in 1991. Consequently, the entire border length of the North East Region is porous and Dadaab in effect experiences frequent cases of insecurity. Nonetheless, yearly comparisons show a reduction in incidences of improvised explosive devices, grenades and actual incidences of kidnapping in 2013 and 2014 as compared to 2012. However, the threats of kidnapping, targeting humanitarian workers within Dadaab operational area remain intact. Low-level grenade attacks continue to be experienced in the nearby Garissa town, as well as in Wajir and Mandera areas within the North East Region.

Understandably, the use of armed escorts will continue to play pivotal role in support of operations and delivery of services in Dadaab. The security atmosphere in Kakuma is accommodating and armed escorts are not necessary during routine implementation of activities within the camp perimeter.

Findings from Kakuma and Dadaab indicate deficiencies with the current security partnership project as discussed above. There is room for improvement in areas of

community policing, information sharing and coordination between community structures and the police.

Annexes

Annex 1: Abbreviations and acronyms

ACRONYMS AND ABBREVIATION

ABE	Alternative Basic Education
ALP	Accelerated learning programmes
ASAL	Arid and Semi-Arid Land
BSFP	Blanket Supplementary Feeding Programme
CARE	Cooperative Assistance and Relief Everywhere
CFS	Child Friendly Spaces
C&V	Cash and Voucher
CMR	Crude Mortality Rate
CPA	Comprehensive Peace Agreement
DAFI	Albeit Einstein German Academic Refugee
DRA	Department of Refugee Affairs
DRC	Danish Refugee Council
ECDE	Early Childhood Development & Education
ECHO	European Commission Humanitarian Office
EDP	Extended Delivery Point
FAC	Food Advisory Committee
FDP	Final Distribution Point
FGDs	Focus Group Discussions
FLA	Field Level Agreement
FSOM	Food Security and Outcome Monitoring
GAM	Global Acute Malnutrition
GER	Gross Enrolment Rates
GIZ	Gesellschaft Fur Internationale Zusammenarbeit
GOK	Government of Kenya
HIS	Health Education System
IGA	Income Generating Activity
IOM	International Organization for Migration
IPs	Partners
IRC	International Rescue Committee
IYCN	Infant and Young Child Nutrition
JAM	Joint Assessment Mission
JPA	Joint Plan of Action
JRS	Jesuit Refugee Services
KAP	Knowledge Attitude and Practice
KES	Kenya Shillings
KRCS	Kenya Red Cross Society
KCPE	Kenya Certificate of Primary Education
KCSE	Kenya Certificate of Secondary Education
LWF	Lutheran World Federation
MCHN	Mother and Child Health and Nutrition
MOE	Ministry of Education
MoU	Memorandum of Understanding
MSF	Medecins Sans Frontieres
MSG	Multi-storied Garden
MT	Metric Ton
MUAC	Mid Upper Arm Circumference

NCKK	National Council of Churches of Kenya
NFI	Non Food Item
NGO	Non-Governmental organization
NRC	Norwegian Refugee Council
OCF	Operational Continuity Plan
OTF	Outpatient Therapeutic Programme
PLHIV	People Living with HIV
PLW	Pregnant and Lactating Women
PMTCT	Prevention of Mother To Child Transmission
RTUF	Ready To Use Food
SAM	Severe Acute Malnutrition
SEA	Sexual Exploitation and Abuse
SFP	Selective Feeding Programme
SGBV	Sex and Gender-Based Violence
SMC	School Management Committee
SMP	School Meals Programme
SPLA	Sudan People's Liberation Army
THR	Take Home Ration
VTC	Vocational Training Centre
WFP	World Food Programme
WTK	Windle Trust Kenya
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund

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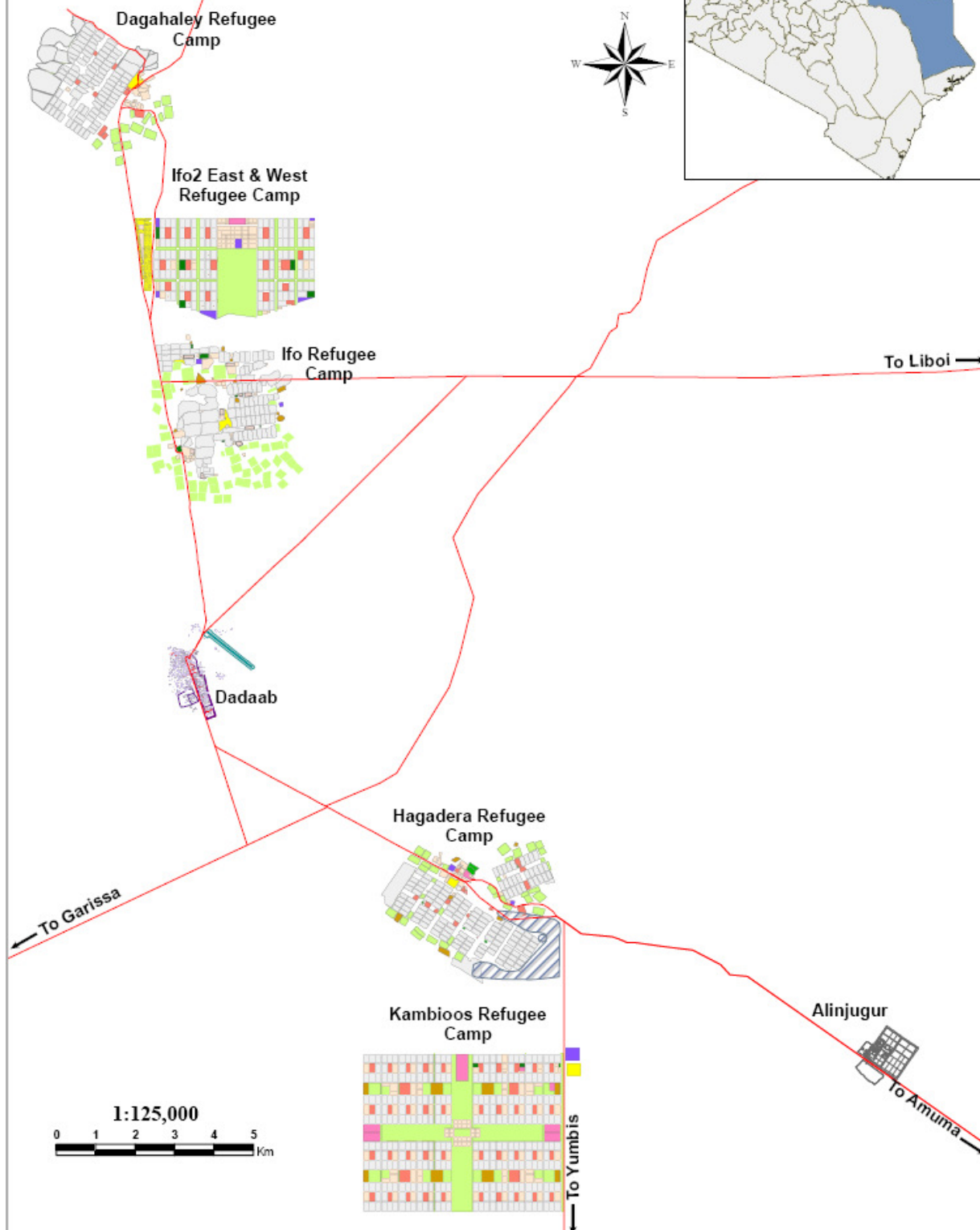
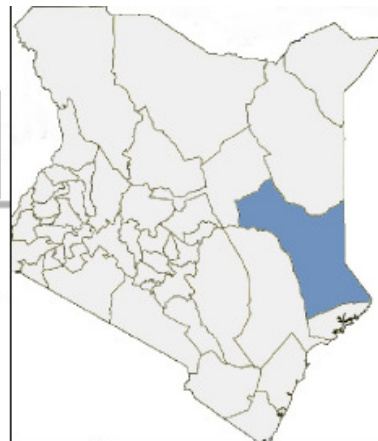
Annex 4: Maps – Location of the refugee camps in Kenya



Dadaab Refugee Camps Overview



Sources: UNHCR, LWF/DWS-Dadaab
©2012
Datum: WGS 1984
Projection: UTM Zone 37
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations



Annex 5: Demographic data – Dadaab and Kakuma

a) Dadaad Population statistics as end of June 2014

REFUGEES AND ASYLUM SEEKERS IN DADAAB : DETAILED DEMOGRAPHIC BREAKDOWN PER CAMP June 2014												
Situation as of 30/06/ 2014	Dagahaley	%	Hagadera	%	Ifo	%	Ifo 2	%	Kambioos	%	Total Camp	%
Household	21,861	24.9%	28,082	31.9%	22,053	25.1%	11,824	13.4%	4,124	4.7%	87,944	100%
Persons Active	87,591	97.3%	105,593	97.5%	83,750	97.5%	52,885	100.0%	19,664	99.9%	349,483	98%
Hold	2,445	2.7%	2,715	2.5%	2,185	2.5%	25	0.0%	26	0.1%	7,396	2%
Total	90,036		108,308		85,935		52,910		19,690		356,879	-
Legal Status												
Asylum seekers	694	0.8%	687	0.6%	1,718	2.0%	695	1.3%	49	0.2%	3,843	1%
Refugees	89,342	99.2%	107,621	99.4%	84,217	98.0%	52,215	98.7%	19,641	99.8%	353,036	99%
Total	90,036		108,308		85,935		52,910		19,690		356,879	-
Gender												
Female	45,959	51.0%	54,675	50.5%	43,289	50.4%	25,946	49.0%	9,626	48.9%	179,495	50%
Male	44,077	49.0%	53,633	49.5%	42,646	49.6%	26,964	51.0%	10,064	51.1%	177,384	50%
Total	90,036		108,308		85,935		52,910		19,690		356,879	-
Age Group												
<5 F	7,045	7.8%	8,183	7.6%	6,413	7.5%	4,761	9.0%	1,770	9.0%	28,172	8%
<5 M	7,209	8.0%	8,734	8.1%	6,758	7.9%	4,915	9.3%	1,838	9.3%	29,454	8%
5-11 F	12,263	13.6%	13,036	12.0%	10,604	12.3%	8,018	15.2%	2,991	15.2%	46,912	13%
5-11 M	12,956	14.4%	13,638	12.6%	11,136	13.0%	9,119	17.2%	3,533	17.9%	50,382	14%
12-17 F	6,919	7.7%	7,915	7.3%	6,255	7.3%	3,535	6.7%	1,369	7.0%	25,993	7%
12-17 M	7,810	8.7%	9,100	8.4%	7,239	8.4%	4,633	8.8%	1,799	9.1%	30,581	9%
18-59 F	18,298	20.3%	23,699	21.9%	18,544	21.6%	8,923	16.9%	3,229	16.4%	72,693	20%
18-59 M	14,708	16.3%	20,408	18.8%	16,044	18.7%	7,523	14.2%	2,634	13.4%	61,317	17%
60 + F	1,434	1.6%	1,842	1.7%	1,473	1.7%	709	1.3%	267	1.4%	5,725	2%
60 + M	1,394	1.5%	1,753	1.6%	1,469	1.7%	774	1.5%	260	1.3%	5,650	2%
Total	90,036		108,308		85,935		52,910		19,690		356,879	-
Country of Origin												
Burundi	19	0.0%		0.0%	16	0.0%		0.0%		0.0%	35	0.0%
Cameroon		0.0%	2	0.0%		0.0%		0.0%		0.0%	2	0.0%
DR - Congo	43	0.0%	5	0.0%	123	0.1%		0.0%		0.0%	171	0.0%
Eritrea	25	0.0%		0.0%	3	0.0%		0.0%		0.0%	28	0.0%
Ethiopia	3,968	4.4%	3,002	2.8%	7,601	8.8%	411	0.8%	74	0.4%	15,056	4.2%
Pakistan		0.0%		0.0%	1	0.0%		0.0%		0.0%	1	0.0%
Rwanda		0.0%		0.0%	16	0.0%	1	0.0%		0.0%	17	0.0%
Somalia	85,925	95.4%	105,296	97.2%	77,818	90.6%	51,685	97.7%	19,616	99.6%	340,340	95.4%
South Sudan	48	0.1%		0.0%	278	0.3%	774	1.5%		0.0%	1,100	0.3%

Sudan	3	0.0%		0.0%	14	0.0%	39	0.1%		0.0%	56	0.0%
Tanzania		0.0%		0.0%	10	0.0%		0.0%		0.0%	10	0.0%
Uganda	5	0.0%	3	0.0%	55	0.1%		0.0%		0.0%	63	0.0%
Total	90,036		108,308		85,935		52,910		19,690		356,879	-
%	25%		30%		24%		15%		6%		-	-

(Source:
UNHCR
ProGres
Database)

b) Kakuma Population statistics as at end of June 2014

REFUGEES AND ASYLUM SEEKERS IN KAKUMA : DETAILED DEMOGRAPHIC BREAKDOWN PER CAMP June 2014												
Situation as of 30/06/ 2014	Kakuma	%	-	%	-	%	-	%	-	%	Total Camp	%
Household	50,228	100.0%	-	0.0%	-	0.0%	-	0.0%	-	0.0%	50,228	100%
Persons Active	162,424	100.0%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	162,424	100%
Hold	58	0.0%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	58	0%
Total	162,482		-		-		-		-		162,482	-
Legal Status												
Asylum seekers	83,896	51.6%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	83,896	52%
Refugees	78,586	48.4%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	78,586	48%
Total	162,482		-		-		-		-		162,482	-
Gender												
Female	75,821	46.7%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	75,821	47%
Male	86,661	53.3%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	86,661	53%
Total	162,482		-		-		-		-		162,482	-
Age Group												
<5 F	12,647	7.8%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	12,647	8%
<5 M	13,087	8.1%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	13,087	8%
5-11 F	17,511	10.8%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	17,511	11%
5-11 M	19,935	12.3%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	19,935	12%
12-17 F	11,791	7.3%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	11,791	7%
12-17 M	17,730	10.9%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	17,730	11%
18-59 F	32,321	19.9%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	32,321	20%
18-59 M	35,129	21.6%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	35,129	22%
60 + F	1,551	1.0%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	1,551	1%
60 + M	780	0.5%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	780	0%
Total	162,482		-		-		-		-		162,482	-
Country of Origin												
Burundi	5,431	3.3%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	5,431	3.3%
Bukunafaso	1	0.0%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	1	0.0%
Cameroun	1	0.0%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	1	0.0%
Congo Brazaville	35	0.0%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	35	0.0%

<i>Democratic Rep of Congo</i>	8,358	5.1%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	8,358	5.1%
<i>Eritrea</i>	120	0.1%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	120	0.1%
<i>Ethiopia</i>	7,693	4.7%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	7,693	4.7%
<i>Guinea</i>	1	0.0%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	1	0.0%
<i>Ivory Coast</i>	5	0.0%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	5	0.0%
<i>Iran</i>	1	0.0%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	1	0.0%
<i>Nigeria</i>	1	0.0%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	1	0.0%
<i>Pakistan</i>	1	0.0%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	1	0.0%
<i>Russia</i>	1	0.0%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	1	0.0%
<i>Rwanda</i>	570	0.4%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	570	0.4%
<i>Sierra Leon</i>	1	0.0%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	1	0.0%
<i>Somalia</i>	55,468	34.1%	-	####	-	#DIV/0!	-	####	-	#DIV/0!	55,468	34.1%
<i>South Sudan</i>	75,038	46.2%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	75,038	46.2%
<i>Sudan</i>	8,745	5.4%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	8,745	5.4%
<i>Tanzania</i>	17	0.0%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	17	0.0%
<i>Uganda</i>	992	0.6%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	992	0.6%
<i>Yemen</i>	1	0.0%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	1	0.0%
<i>Zimbabwe</i>	1	0.0%	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	-	#DIV/0!	1	0.0%
Total	162,482		-		-		-		-		162,482	-
%	100%		0%		0%		0%		0%		-	-

(Source:
UNHCR
ProGres
database)

Annex 6: 2014 JAM ToR

I. Background

The refugee camps of Dadaab Complex and Kakuma in Kenya, host more than 520,000 refugees (51% male, 49% female), and have been in existence for about 23 years. The refugee population is comprised largely of Somali (78%), Ethiopians (4%), South Sudanese (13%) and others (5%).

The Government of Kenya's encampment policy limits refugee's level of engagement in economic activities outside of the designated camps. Findings from previous joint assessment missions and nutrition surveys confirmed that the refugees are dependent upon the food assistance WFP has been providing since 1991 for their survival.

Following major milestones relating to refugee operation in Kenya have occurred since the last JAM (2012):

- An overall reduction in the population figures was recorded since the last 2012 JAM after the conclusion of the verification exercise in July 2013. This was mainly attributed to spontaneous returns back to Somalia or de-registration of host community residents posing as refugees as well as data cross check as a result of the physical verification exercise. In addition, since the roll out of the joint WFP and UNHCR biometric system in October 2013, the total number of refugees eligible for food rations further dropped thereby reducing food requirements by US\$ 1.5 million per month;

- In November 2013, a Tripartite Agreement on Repatriation was signed by the Somalia and Kenya Governments and UNHCR. The agreement provides a legal framework for the return of refugees, on a voluntary basis back to Somalia and other countries of origin, in conditions of safety and dignity as per international refugee law regulations. Some spontaneous returns have been observed since 2012. In an effort to provide information and support to these refugees UNHCR has established help desks, at Dadaab, Kakuma and Nairobi for the urban refugee caseload. A pilot project will be launched for supporting up to 10,000 spontaneous returnees returning to Luuq, Baidoa and Kismayo. The return of refugees will primarily depend on the prevailing conditions in places of origin;

- Since mid- December 2013, an internal conflict in South Sudan led to an influx over 39,000 (as of end May 2014). Due to the continuous stream of new arrivals to Kakuma over the past two years, the Kakuma camps have become severely congested and delivery of services to refugees compromised.

- In March 2014, the Government of Kenya, through the Ministry of the Interior & Coordination of National Government officially designated the refugee camps in Dadaab and Kakuma as official areas where all refugees in Kenya should reside. This is now considered as a Government's "directive": (i) directing all refugees to return to their respective camps with immediate effect; ii) closing refugee registration centres in urban areas; Kakuma is currently facing congestion challenges after new arrivals exceeded its capacity while development of new camps has not been approved by the Government yet. This situation continues to pose great challenges in addressing sanitation, insecurity and fire threats in camps among other challenges.

The Department of Refugees Affairs (DRA) is responsible for refugee affairs in Kenya, including registration, camp management and promotion of civilian characters in the camps. UNHCR has been supporting the Kenyan Government in protection, maintenance of refugees and seeking durable solutions, while WFP is responsible for the entire food supply

chain. UNHCR has continued to develop strategies to provide essential services to refugees even during the time of heightened insecurity. This included developing Security Partnership Project (SPP) with the Government of Kenya to address heightened insecurity. Tapping on strengthening synergies and partnership with other agencies like UNICEF, MSF, ACF, CDC etc., UNHCR and WFP have observed improved quality of care to refugees.

In the past years, WFP has been able to provide 100% of food requirements of 2,100kcal for the GFD (with exception of Nov and December 2013 when cereals were reduced by 20%) and maintained BSFP targeting children 6-23 months with Super Cereal Plus and pregnant/lactating mothers with CSB and Vegetable Oil. However, cooking fuel (usually firewood) remained a major challenge both for the refugees (in terms of cost and availability) as well as for the host community (in terms of environmental impact). Mixed signals from various Government departments on shelter materials has created challenges of mitigating environmental impact through construction of ISSB Shelter which employs environmentally friendly shelter strategies.

The Joint Mission will review the overall food and non-food supply situation, and other services contributing to improved food security and nutrition among refugees in Kenya, following the above-mentioned major milestones and will explore means of addressing the issues. As the MOU between WFP and UNHCR indicates, the assessment mission should not only take into consideration food requirements but also non-food needs that are relevant to the safe and effective use of food aid, such as security and registration, and provision of cooking utensils, fuel, water and sanitation, medicines, soap and shelter. Anaemia and problems related to pregnancy and childbirth also constitute ongoing food and non-food challenges that affect overall health of the refugee population. The mission will make recommendations, which will inform the review of UNHCR COP 2014 - 15 and the design of WFP Protracted Relief and Recovery Operation (PRRO) which will be submitted to the WFP Executive Board for approval in February 2015.

II. Terms of Reference

The mission will undertake the following tasks:

1.0 Food Security and Coping Mechanisms - Review (i) available food security information and identify gaps with feasible recommendations on improvement for better evidence based decision making and (ii) with partners and beneficiaries, key recommendations from the PRRO evaluation, market survey and fresh vouchers with an aim of filling any gaps from the reports.

1.1 Review mode of delivery and impact of BSFP for 6-23 months and come up with effective options to optimise the intervention.

1.2 Assess the complementarity of WFP general food ration and the regularity of UNHCR complementary food.

1.3 Review and triangulate specific recommendations of the 2012 JAM and 2014 PRRO evaluation on food security situation in refugee camps in Kenya.

1.4 Based on market assessment report, review the possibility of rolling out a cash/ voucher system as mode of transfer modality of assistance for part of General Food Distribution,- SFP, FFA and others

1.5 Assess the preferred commodities (locally produced) for substitution if cash/ voucher is possible and the quantities to be substituted for each program category, based on evidence and practical aspects.

1.6 Explore and recommend options of increasing livelihoods and self-reliance interventions around the camps, based on an area approach taking into account counties integrated development plans.

2.0 Logistics, Non-food Items

2.1 Assess options of food delivery in situation of heightened insecurity or flooding.

2.2 Assess all logistics aspects including intra camps road which are currently in poor state.

3.0 Health, Nutrition and School Feeding

3.1 Review performance of IYCF and how it can be strengthened by BSFP project and other interventions.

3.2 Review the quality and integration of programmes that provide supplementary food to support people with chronic illnesses (TB, Diabetes, HIV & AIDS, Hospital feeding, Supplementary and Therapeutic Feeding, etc.) including access to curative feeding without stigma and discrimination;

3.3 Review school feeding program linkages with other interventions (provision of uniforms, sanitary wear and sanitation in schools) to increase female enrolment and attendance. identify high impact interventions to promote the attendance of girls in primary school and transition to secondary schools

3.4 Review the impact and relevance of the take home rations provided to girls attaining 80% attendance in schools;

3.5 Review other programmes affecting health and nutrition, particularly malaria, safe motherhood, iron deficiency anaemia, HIV/ AIDS, and water and sanitation issues/conditions and explore opportunities for an integrated approach.

3.6 Review UNHCR/WFP plans of action to address malnutrition and anaemia

4.0 Cooking Energy, Water and Sanitation.

4.1 Review types and level of assistance in terms of Water, Sanitation and Hygiene as they relate to the nutrition and health of refugees, specifically in schools

4.2 Review food and non-food assistance, paying particular attention to the provision of cooking fuel, soap and devices.

4.3 Assess the NFIs being distributed with special focus on issue of adequacy of firewood distributions;

5.0 Coordination, Refugees Influx and Repatriation - Population number

5.1 Review and assess registration of new arrivals and new-born babies, as well as de-activation of deceased people, vis-à-vis refugee access to food and assistance

5.2 Explore refugees' access to livelihood opportunities and identify coping mechanisms and levels of food dependency;

5.3 Based on evidence, assess the food security and future food and non-food aid requirements taking into account population projections, sustainability and support activities undertaken by the refugees and alternative food assistance methods.

5.4 Review the impact of the verification and biometric systems to improve efficiency of the operations.

6.0 Monitoring and Evaluation

Review the monitoring systems that exists in the camps by various partners and identify information gaps as well as timely dissemination and sharing obstacles

7.0 Additional issues

7.1 Relations with host communities (initiatives to ensure cordial relationships with communities and agencies i.e. employment possibilities, procurement opportunities, support to livelihood projects like FFA projects and integration with country integrated development plans, etc.);

7.2 Review current security arrangements (including agreements, facilities, armed escort services and relations to local authorities).

The mission will review and analyse available reports on food security, nutritional status, self-reliance and the general well-being of the refugees and the host community. It will also consult beneficiaries and key informants in WFP, UNHCR, donors, local and international NGOs and Government representatives in Nairobi. Donors and Government representatives will be invited to join the mission. The mission will visit both Dadaab and Kakuma refugee camps between 23rd June and 03rd July 2014. (23-27 June 2014 in Dadaab and 30 June-3 July 2014 in Kakuma)

III. De-Briefing and Report

The mission will hold debriefing sessions in Nairobi with Government representatives, Donors, WFP, UNHCR and partners as deemed necessary.

The mission will produce a report depicting the areas addressed in the terms of reference and other contributing assessments like the PRRO Evaluation, the Market Study, the evaluation of the pilot FFV project As, HIS, Nutrition Surveys, KAP Surveys etc. It will provide WFP and UNHCR with specific recommendations for the design and implementation of 2015 UNHCR COP and the next WFP PRRO Refugee Operation. The draft report will jointly presented by WFP and UNHCR to the stakeholders (Government, UN, Donors and NGOs) by end July 2014

Annex 7: Joint Plan of Action for 2012 JAM



WFP/UNHCR JOINT PLAN OF ACTION KENYA, 2013

The global MOU between WFP and UNHCR (January 2011) specifies that a Joint Plan of Action is to be developed jointly by the agencies at the field level. Paragraphs 3.4 and 3.9 of the MOU clearly stipulates that such an agreement is to be prepared and updated regularly, at least annually, to facilitate coordination and collaboration between the two agencies.

The objective of the joint plan of action is for the agencies to agree bilaterally, at the onset of a programme, and on an annual basis, as to key objectives and activities for a specific period. The specific objective is to ensure that the agencies focus on jointly agreed upon strategic objectives that are essential to the success of the programme. The JPA also includes indicators, target dates and focal agency as a mechanism for assessing progress of implementation of the JPA.

This particular document has been prepared jointly by WFP and UNHCR Kenya with the input of the Sub-Offices and is signed by the representatives of both agencies. For the current year, the JPA for Kenya is to be based largely on the review outcome of the 2012 activities in Kakuma and Dadaab camps. The key issues to be addressed in 2013 cover a broad spectrum of thematic areas and include: population figures, self-reliance, health and nutrition, programming and coordination. The JPA also incorporates some of the recommendations of the WFP/UNHCR Joint Assessment Mission undertaken in Kakuma and Dadaab Refugee camps in September and October 2012.

**WFP/UNHCR JOINT PLAN OF ACTION - 2013
KAKUMA AND DADAAB SUB-OFFICES**

THEMA TIC AREA	RECOMMEN DATION	PRIORIT Y (high, medium, low)	ACTION AND STRATEGY REQUIRED	INDICATORS	ESTIMATE D COST IF APPLICABL E	RESPON SIBLE AGENCY	TARGE T DATE	ACTION TAKEN/ ACHIEVE MENT
Food Security and coping mechanisms	Ensure adequate provision of complementary NFIs	High	Identify the most needy groups for provision of relevant NFI's	# of persons or families who receive NFI's between January & December 2013.	4,800,000	UNHCR	-3rd quarter	
	Prioritize provision of diversified milled cereals	High	Provide diversified milled cereals in the GFD ration	50% percent of milled cereals in the food basket. Pipeline updates shared with partners and refugees every month		WFP	bi weekly distribution cycles	
	Expand innovative transport modalities to	Low	Expand Dadaab donkey cart project and	# of donkey carts or other means of transport supporting		WFP	2nd and 3rd quarter	PERTINEN CE TO BE REVIEWED

	support food ration transportation for extremely vulnerable groups		Kakuma handcart project. Assess possible use of the handcart approach adopted in Kakuma for Dadaab.	extremely vulnerable persons /families transport food				
	Address barriers to services for the elderly and the disabled-headed households by expanding community services	Medium	-Identify the barriers to services -Mainstream specific group issues in service delivery mechanisms.	# of PoC engaged in focus group and report produced. -# of project activities mainstreaming elderly & disabled headed HHs	50,000	UNHCR	2nd and 3rd quarter	
	Conduct a socio-economic refugee profiling & livelihood/self-reliance patterns profiling to help identifying cri	Medium	Conduct an assessment on livelihood/self-reliance conditions of refugees including profiling	Assessment conducted and report produced		WFP	September	

	teria assisting shift from status to vulnerability-based assistance							
	Foster refugee co-existence through better integration of humanitarian assistance within the development framework of the region in collaboration with the G.O.K	Medium	Strengthen refugee- host community relationships through support of host community projects which are in line with the Garissa county development plan	# of host community projects implemented		UNHCR / WFP	Ongoing until end year	
	Ensure a systematic reception, registration and assistance to new refugees	High	A). Lobby for periodic registration of new arrivals in Dadaab. B). Lobby for registration within two weeks of arrival in	Revised SOP produced and number of new arrivals registered and assisted	-	UNHCR / GoK	Ongoing	

			Kakuma.					
	Follow-up with GoK to ensure assistance modality in Kambioos is addressed	High	Ensure a full-time Police presence in Kambioos camp by constructing a police post including accommodation	Police post & accommodation constructed and operational	\$700,000	UNHCR	September	
			Construct a food distribution centre to allow GFD in Kambioos	-FDP constructed and in use	\$100,000	WFP	June	
	Commodities referred to as “complementary” should be in a different food group to what is already provided in the GFD ration to avoid duplication	Medium	Assess acceptability, use of green grams and availability of alternative foods	Complementary food provision reviewed Percentage of refugee population receiving complementary foods	5,000	UNHCR	2nd quarter December	
	Implement to	High	SPP & CPPT	Number of	\$1,300,000	UNHCR	Ongoing	

	continue supporting SPP and expand current refugee community policing project		supported and enhanced.	operational support units/items and trainings provided			until December	
	<p>Ensure regularly updated contingency plan for delivering operations in a context of :-</p> <p>a) deteriorating security situation in Dadaab (OCP)</p> <p>b) Continued refugee influx</p>	High	Update current contingency plan to include arrival of urban refugees thereafter bi annually or depending on the security situation	Contingency plan and OCP in place and updated	-	UNHCR / WFP / UNDSS	Bi-annually	

	into Kakum a.							
Market and transfer modality	Reduce volume of economically non-viable food ration sales by limiting the fraud	High	Complete verification exercise.	Verification exercise of all PoC in all camps completed by UNHCR by July 2013.	3,000,000	UNHCR	July	
			Establish biometric ID cards system. Introduce alternative transfer modalities / voucher programmes	Biometric card system established, one market survey conducted, post distribution monitoring enhanced Fresh food vouchers introduced by WFP	8,000,000 2,700,000	WFP	July	
	Complement market analyses conducted last year with additional information, in order to	Medium	UNHCR to research and inform on the legal aspects of trade, opportunities, risks and	-# of Reports shared by UNHCR with WFP about the legal aspects of trade opportunities, risks and	(part of overall FFV project cost)	WFP	May	

	introduce market-based interventions to replace a portion of the food basket (seasonal availability consideration):		benefits;	benefits				
			WFP to conduct surveys that inform on the volume and pattern of relief food marketing and to share lessons learned from C&V experiences in ASAL region of Kenya and Somalia	Survey conducted and report completed and shared	(part of overall FFV project cost)	WFP	September	
	Advocate for greater cash contributions from donors to allow for flexibility on the transfer modalities	Medium	Advocate for cash contributions and C&V programmes	Percentage of cash contribution in relation to in kind contributions Number of PoCs receiving assistance through alternative transfer modalities		WFP /	December	
Head 1	Review	High	Review JAM	Nutrition survey	-	UNHCR /	2nd	NOTE:

	JAM findings after completion of Dadaab and Kakuma nutrition surveys, in light of malnutrition results and causal analysis provided by the nutrition survey.		findings to include recommendations in the nutrition surveys	recommendations reviewed and appended to the JAM report		WFP	quarter	repeat survey in Dagahaley effected, while Ifo planned during annual survey in August
	Review the methodology for conducting MUAC screening, programme coverage and related surveys	Medium	Assess appropriateness and effectiveness of MUAC screening methodology in the Dadaab camps. Review nutrition survey methodology.	MUAC screening and survey methodology reviewed and report produced	-	UNHCR / WFP	3rd quarter	
	Support improvement of infrastructure and	High	Assess nutrition structures in place. Review staffing	# of Infrastructure of nutrition centres improved, # of new staff	200,000	UNHCR / WFP	September	

	staffing capacity for nutrition program across all camps		capacity	or new initiatives (e.g. training) to enhance capacity				
	Implement and systematize growth monitoring programs for young children (6 to 23 months)	High	Strengthen growth monitoring program for 6-23 months	Percentage of children aged 06-23 months attending Growth monitoring program	200,000	UNHCR	December	
	Harmonize nutrition interventions across the camps with SUPERCEREA L PLUS to continue being supplemented for children 6-23 months	High	Implementation of blanket feeding programme to continue	# of children benefitting from BSFP		WFP	December	
	Provide guidance for routine micronutrient supplementation	High	Review protocol on micronutrient supplementation for	Protocol reviewed (Yes/No)	500	UNHCR	2nd quarter	

	on to all children in therapeutic feeding program		children receiving therapeutic food					
	Review protocols of Nutrition interventions for PLWHA, TB and PMTCT clients and ensure it is Aligned with National and IMAM guidelines	High	Protocol on nutrition support of PLWAs and TB reviewed	Reviewed protocol in place	500	UNHCR	3rd quarter	
	Work closely with MoH and Partners on addressing the rising TB burden, inclusive working with WHO, CDC in establishing cross-border control of MDR-TB	High	Work together with MoH, WHO, CDC, IOM, USAID and other partners to establish a regional coordination forum for cross border surveillance and control of MDR-TB	# of coordination meetings held Strategy for cross- border control of MDR-TB developed # of MDR-TB patients on treatment	50,000	UNHCR	3rd quarter	

	Address the deficiencies in HIS for it to capture a comprehensive Health and Nutrition data set and also Conduct regular training at camp level to address challenges presented by high staff turnover.	High	Conduct regular training on HIS	# of Trainings conducted	20,000	UNHCR	4th quarter	
	Reinforce current monitoring and surveillance system	High	Link the trend analysis of nutrition indicators with market, food security and health data to facilitate decision making.	Food security reports shared by WFP with UNHCR Trend analysis linking nutrition, health, food security and wash indicators included in the monthly health and nutrition reports and coordination	-	UNHCR WFP	2nd -4th quarters	

				meetings				
WASH, Shelter , Fuel, Education and Livelihoods	Prioritize latrine construction and hygiene promotion with components of community participation	High	Construct latrines, recruit and train hygiene promoters	# of latrines constructed and in use # of hygiene promoters trained	\$1,500,000	UNHCR	December	
	Identify additional dumpsites within or outside the camps to improve environmental hygiene conditions	Medium	Identify and construct additional dumpsites in collaboration with GoK	# of dumpsites identified and in use	300,000	UNHCR / GoK	1st and 2nd quarters	
	Ensure resumption of meat inspections in Dadaab and improve the conditions of Slaughterhouses	High	Collaborate with county Government to conduct meat inspections. Regularly monitor slaughter	# of joint inspections undertaken by GoK and UHCR to slaughter houses. # of slaughter houses with improved	100,000	UNHCR / GoK	by 3rd quarter	

	es on both Dadaab and Kakuma.		houses	drainage system				
	Prioritize refugee shelter construction	High	Continue to construct refugee shelters	number of refugee shelters constructed	3,000,000	UNHCR / GoK	4th quarter	
	Maintain targeted distribution of fire wood and energy saving stoves	Low	Continue distribution of energy saving stoves and provision of fuel for cooking	# of vulnerable persons receiving energy saving stoves. of persons receiving firewood and other cooking fuel	\$1,000,000	UNHCR / WFP/ GoK	December	
	Progressively increase coverage of alternative cooking energy	Medium	Assess feasibility of alternative cooking energy and implement	Alternative cooking energy identified No of HH receiving alternative cooking energy	2,000,000	UNHCR/ WFP	4th Quarter	
	Support interventions to mainstream environmental issues in health, shelter, food security and WASH	Medium	Environmental management reflected and implemented in health, shelter, food security and WASH activities.	-Environmental impact assessment (EIA) done. -Environmental management mainstreamed across health, shelter, food security and	20,000	UNHCR	2nd -4th Quarter	

			<p>- Institutions to use energy saving stoves. Promote the recycling of waste water for vegetable production and tree planting. Promote the use of durable materials for roofing (e.g. Iron sheets instead of makuti roofing). Consider use of prosopis juliflora "mathenge" for shelter construction. Explore possibility of brick making sites which can be rehabilitated after production is</p>	<p>WASH (Yes/No) 1) Proportion of institutions using energy saving stoves 2) proportion of tap stands recycling waste water for vegetable production and tree planting. 3) sustain the use of durable materials for roofing 4) Proportion of HHs using prosopis juliflora "mathenge" for shelter construction 5) Number of sites identified for brick making, operationalised and rehabilitated after use.</p>				
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			completed.					
	Provide more resources on the education sector (classrooms, teachers, materials and school meals)	Medium	Required support to school infrastructure s, materials and feeding assessed and improved	# of schools, classrooms and kitchens improved -90 % of primary school children receiving meals -100 % of schools where school meal programme is running effectively.		WFP UNHCR UNICEF	November	
	Assess the impact of the take-home ration assistance to evaluate the impact of the school feeding program	Medium	Conduct FGDs on the school feeding programme to assess the impact that it has had on the targeted population	Assessment of the take-home ration conducted and report shared		WFP	3 rd quarter	
	Increase support for vocational training and capacity for post – primary education	Medium	Increase number of refugees enrolled in vocational training and post primary education	% of increase in number of refugees enrolled in vocational training	1,000,000	UNHCR	December	
	Take initiative to produce a	Medium	Develop a matrix with	Matrix of activities on self-	500	UNHCR	2 nd Quarter	

	compendium of all vocational training and IGA activities in the camps and surroundings		vocational trainings, IGA activities and livelihood/se lf-reliance opportunities for refugees	reliance and livelihood opportunities developed and shared with partners				
	Release study on kitchen gardens and MSGs and address the identified issues	Low	Release study on kitchen gardens/MSG	Study released and report shared		UNHCR	2 nd quarter	
Logistics, Warehousing, NFIs, Roads and Markets	Improve and increase capacity of EDPs and FDPs structures in line with the revised refugee figures	Med	Adjust EDP and FDP structures according to revised requirements	Number of storage units and biometric/ distribution sheds in place		WFP	2 nd quarter	
	Continue to carry out regular Inter-camp and supply road maintenance and repair	High	1. Re-establish the Task Force to manage road maintenance and repairs. 2. Liaise with	# of Kms of road repaired or maintained		WFP / UNHCR / GoK	4 th quarter	

			new county Government to ensure regular maintenance works is included in the county priorities					
	Reduce the number of food distribution days to free up some time for FDP prepositioning and maintenance:	Medium	Construct additional distribution sheds	Number of distribution days reduced		WFP	2nd quarter	
Refugee registration, Numbers, New Arrivals and Durable Solutions	Develop good communication strategy to the refugee communities on use of biometric system	High	Develop and implement communication strategy	Communication strategy developed and implemented		WFP	2nd quarter	
	Identify ways to continued ownership of refugees and host populations	High	Continue to include refugee participation in AGDM, OCP and other	# of focus groups engaged in planning process.	2,000	UNHCR / WFP / partners	December	

			participatory planning exercises					
	Draft a regional repatriation strategy, including cross-border coordination mechanism, linking Somalia with the "Horn of Africa" countries hosting Somali refugees.	High	Bilateral and regional cross-border coordination meetings held on Repatriation on regular basis	# of cross-border / regional or bilateral meetings held and strategy papers produced	10,000	UNHCR / GoK	3rd quarter	
	Develop and regularly review 2013 UNHCR/WFP Joint Plan of Action in the course of the year and used in all planning by WFP and UNHCR staff	High	Develop a 2013 JPA. Hold regular meetings to review the JPA	At least 1 meeting held to review the JPA	500	UNHCR / WFP	bi annually	

Annex 8: Checklists/tools for field data collection

Note: Below are tools used for primary data collection in Dadaab camps. A little modification was made where required for Kakuma.

Theme 1: Food security and coping mechanisms thematic group

Topics to be discussed	Questions	Summary of findings
On Going Food Assistance Programme (Current general food distribution and food basket) (Impact of BSFP/ effectiveness (the Complementary Feeding)	<ol style="list-style-type: none">1. What are your main sources of food in the camp , how often do you receive food rations and how many scoops of each commodity2. How many days does the ration usually last? What do you when the food ration runs out?3. What is your view on quality of food provided in the general food distribution?4. How much do you pay for milling whole maize grain /sorghum? How much of your ration do you mill? Explain either in cash/or quantity of food exchanged).5. How much do you pay for transporting you food ration home? Explain either in cash/or quantity of food exchanged).6. How often do you meet FAC members and how do you get information on when to collect food.	

	<p>7. Do you know your ration entitlement? Does it change ever? Are you informed of this?</p> <p>8. Who in your household collects the food ration from the food distribution?</p> <p>BSFP and complementary feeding ;</p> <p>9. Do you feel satisfied with SUPERCEREAL PLUS given to children 6-23 months and green grams for children 6-59 months? (<i>Quality and quantity</i>).</p> <p>10. What types of problems do you encounter when accessing food at the food distribution?</p> <p>11. What can be done to improve food assistance?</p> <p>12. Fresh food voucher programme? Is there anything that you like/ don't like? If no please explain</p>	
<p>Alternative to in Kind food assistance <i>Possibility of rolling out Cash and Voucher systems: question of substitution (to GFD and specific feeding program) (what is their take on the recommendations made in market Assessment Report and PRRO eval.)</i></p>	<p>1. In case food aid is replaced with cash or voucher which one would you prefer to receive.</p> <p>2. Explain your main concerns related to food or cash transfer modalities?</p> <p>3. In your opinion who should be targeted for the cash and vouchers.</p> <p>For the market traders and FFV</p> <p>1. What is the maximum number of beneficiaries can you serve given your current capacity to supply fresh food and sustain?</p>	

	2. How has the FFV programme benefited your business since its introduction in the refugee camp? If yes ; explain	
Preferred Commodities (What is locally produced? What do they want to substitute (Are they able to supply (traders)	1. Are there any concerns with the current food basket composition? If yes? explain 2. Are there any foods would you like it to be substituted in the current food basket if given the opportunity?	
Options for livelihood interventions taking into account county integrated development plan (see DRC assessment, UNHCR participatory assessment, WFP EFSA) Are there any livelihoods activities that you have obtained so far and how does these impact your livelihoods opportunities i.e. In terms of access to the market?	Livelihood Committees 1. What are the activities (monetary and non-monetary) members of your households engage in to supplement the support they receive from the agencies? 2. Which are the most preferred livelihood activity/ies amongst refugees in your camp and surrounding areas and why? 3. What challenges do those engaged in livelihood activities face 4. Do you have any recommendations how refugees' self-reliance can be improved?	Interview a County Representative [TBC by end of week] Interview agencies investing in livelihood support (DRC, NRC, relevant partners) Refugees (about coping and livelihood strategies including livestock, agriculture, etc.

	<p>NGO Partners</p> <ol style="list-style-type: none"> 1. Does your organization support livelihood activities in the camp and surrounding host community areas? If yes kindly elaborate the areas supported. 2. What interventions have worked well and which have not worked well and why? Kindly elaborate. 3. What have been the lessons learnt from your livelihoods programme 4. What have been the major challenges of implementing self-reliance programmes in Dadaab camp and its environs? 5. How can the above challenges be overcome 6. Do you have any future plans for livelihood programmes in Dadaab and its environs? If yes, kindly elaborate. 7. Is your livelihood programme in tandem with the Local County integrated development plan? If yes, what are the areas of linkage? 8. In your opinion, what would be strategic inter-linkage with the local County development programmes based on the County plan? 9. What recommendations would you give to enhance effective and sustainable livelihood programmes in Dadaab and its environs? <p>-</p>	
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	County Representative <ol style="list-style-type: none"> 1. Does your office support camp livelihood initiatives 2. What challenges does your office face in supporting economic initiatives in the camp? 3. Does the county development plan include refugee camp economic development? Kindly elaborate the linkage 4. In your opinion, what would be the strategic inter-linkages between the County development programmes based on the County plan and the refugee programme economic interventions. 	
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Thematic area 2- Logistics and Non Food Items

Overarching Objective of the JAM	
Specific Objectives E.g. To determine the overall food security profile of the camp	A: What are the primary income sources? What % of the population has access to these and what are the average amounts they are making? Are they positive or negative strategies?
	B: What is the seasonal variation of the income sources? Are there trend patterns over the year that lead to periods of higher and lower vulnerability?
	C: Which groups are the most vulnerable? Why? How are/could their specific needs be met? What are the most appropriate vehicles for targeting these groups?
	D: What is the overall food security profile of the camp and how dependent are refugees on the ration? Is the ration a food source or an income source or both? How are the high food prices and new arrival impacting on the refugee population?

Linkage between the Thematic Area and the specific objectives	
Activities E.g. Secondary information, FGDs, KIDs, beneficiary interviews/HH survey, transect walk/field visits	

Topic	Data/Statistics	Questions for each topic	Where to Collect Information
1. Transport (road)	1. Access of the camp from outside 2. Access within the camp 3. Track capacity within the camp 4. Rates within the camp vicinity	1. When are the camps accessible and what are the bottle necks 2. What is the impact of insecurity on tracking 3. When is accessibility within the camp hard and what are the bottle necks within the camp 4. Is there tracking capacity within the camps 5. Are the trucks from local / within the county 6. What are the rates 7. What Government plans are in place that will impact on trucking capacity specifically between Dadaab and Garissa?	Road: Country offices/Sub Offices Logs/Supply
2. Deliveries to	Food and NFI: delivery stats,	1. What is the average buffer stocks for	

Topic	Data/Statistics	Questions for each topic	Where to Collect Information
EDP/camps	timeliness, stockpiling for rains	<p>the last 2 years for food and non-food items</p> <ol style="list-style-type: none"> How many breaks have occurred for food and non-food items due to weather or security Are there contingency plans to address future breaks How much food do traders bring in Dadaab for fresh voucher system? What are the challenges encountered in supply chain by the traders? What is the Government stand on slaughter houses and sanitation and hygiene status? 	Country offices/Sub Offices Logs/Supply IPs/CPs
3. Distributions to beneficiaries	Food+NFI: Distribution stats/IP-CP reports, infrastructure. Include distribution of firewood (amount/frequency/issues) plus fairness and transparency of actual distribution modality Weighing scales, distribution equity and equality	<ol style="list-style-type: none"> What are the distribution stats for food for 2013 What are the distribution stats for NFI for 2013 What are the distribution methods? <ol style="list-style-type: none"> How accessible are the FDPs to PWDs and other vulnerable groups? Are weighing scales in place and utilized to ensure beneficiaries get their entitlements? What are the weaknesses in the current distribution methodologies and how 	Country offices/Sub Office Logs/Supply IPs/CPs COR Refugees Distribution Committees FMCs

Topic	Data/Statistics	Questions for each topic	Where to Collect Information
		can they be improved	
Monitoring	Efficiency and effectiveness of delivery	<ol style="list-style-type: none"> Are there monitoring plans in place <ol style="list-style-type: none"> How is monitoring of fresh voucher system done? Are the plans or information shared within agencies How can this be enhance to assist efficiency and delivery of food and non-food items 	Sub Office reports

Thematic group 3 section 1: - Health

Issue/Topic	Questions	Data sources
HEALTH		
Morbidity and mortality	<p>What are the main illnesses/health concerns in Dadaab?</p> <p>What re the crude and under five mortality rates? How are they measured and what is their reliability</p> <p>What are the morbidity and mortality trends?</p> <p>Have there been disease outbreaks since 2012?</p> <p>What are the leading causes of morbidity and mortality?</p>	<p>Perhaps ask informants this too to see what perceived health concerns are in the camp</p> <p>HIS, previous nutrition survey reports which have measured mortality, key informants</p> <p>UNHCR reports</p>
Heath systems analysis	a) What are the infrastructural conditions (buildings, waste disposal, power supply, sanitation and water supply)? Check on space,	Observation

Issue/Topic	Questions	Data sources
	<p>cleanliness etc.</p> <p>b) Are essential equipment in stabilization centres, OTP, SFP, and ANC available?</p> <p>c) Check on availability and regularity of essential drugs and vaccines. If shortages are encountered, why?</p> <p>d) Is there adequate staffing? (doctors, clinicians, nurses, midwives, CHW, TBAs etc.) If shortages, why?</p>	<p>Observation</p> <p>Staffing tables</p> <p>Informant interviews with health workers, check with stores/pharmacy</p>
General health issues	<p>What are the immunization, vitamin A supplementation and de-worming rates?</p> <p>% Deliveries conducted by skilled attendant in health facilities?</p> <p>% WRA receiving family planning commodities?</p> <p>% Children < 5yr immunized against Measles?</p> <p>% of health facilities providing treatment as per IMCI guidelines?</p> <p>,</p> <p>% ANC clients (4 visits) coverage?</p> <p>?</p> <p>Presence of Basic Emergency Obstetric Care (BEOC)?</p> <p>Checking on functioning of i) family planning and safe motherhood, ii)community health, iii) health education, iv) HIV care and treatment</p>	<p>HIS</p> <p>Observation</p> <p>HIS Nutrition survey FGDs</p> <p>Partner reports</p> <p>Partner reports</p> <p>FGDs</p>

Issue/Topic	Questions	Data sources
	<p>and support, v) TB care and support, vi) communicable disease control.</p> <p>Are commodities for the above services available? If shortages, why?</p> <p>Follow up on standardized case management for malaria, diarrhea, ARI, etc.</p> <p>Check on TB and HIV/ AIDS control: Are drugs available?</p> <p>Is medical screening and immunizations conducted on arrival for all the new influxes? Is the immunization response adequate and does it conforms to guidelines?</p> <p>Are there limitations in access to and uptake of health services? Are there observed differences in access and uptake between different groups e.g. new arrivals, different nationalities or sub populations</p> <p>What are the priority health care services in Dadaab?</p>	Partner reports, FGDs

Thematic group 3 section 2: Nutrition

NUTRITION		
Magnitude of malnutrition	<p>Objective: Review UNHR/WFP plans of action to address malnutrition</p> <p>What are the malnutrition rates and trends since 2012? (% of <5s GAM and SAM, % of <5s stunted, % of <5s MUAC <12.5cm and <11cm), Low birth weight and WFP/UNHCR plans to address malnutrition?</p> <p>Are their observed differences among different sub groups e.g. new arrivals, different nationalities</p>	<p>HIS</p> <p>-2012- 2014 Nutrition surveys</p>
Selective feeding program (OTP/SC)	Objective: Review the quality and integration of programmes that provide supplementary food to support people with chronic illnesses (TB, Diabetes, HIV & AIDS, hospital feeding, supplementary and	Partner reports/ annual nutrition review

and SFP	<p>therapeutic feeding, etc.) including access to curative feeding without stigma and discrimination</p> <p>Performance indicators (Coverage, cure rates, death rates, defaulter rates etc.)</p> <p>What are the challenges facing the programs? (to health care providers/beneficiaries/programme staff)</p> <p>Is nutrition support provided to HIV and TB patients? Is it sufficient? (additional ration provided, effectiveness and appropriateness of other interventions e.g. vouchers and, poultry and MSG) Is there adequate counselling relating to nutrition with PLHIV and TB? IEC materials to support counselling on nutrition for PLHIV, TB, HIV positive mothers. What are the infant feeding practices for HIV positive mothers?</p> <p>Utilization of supplementary foods received (BSFP/SFP/FFV)</p> <p>How appropriate is the discharge criteria for SFP for MAM pregnant and lactating women</p>	<p>Key informant interviews</p> <p>Discussions</p> <p>Key observations of registers, crowd control, screening, # of staff, etc.</p> <p>Key questions: ask beneficiaries about services they receive</p> <p>Key informant interviews</p> <p>Key Informant Interviews</p>
Micronutrient issues	<ul style="list-style-type: none"> • % of anaemia in children and in women, % of <5s suffering from VAD • Anaemia control measures and their impact on prevalence • % children <5 receiving Vitamin A supplement? 	<p>HIS, 2012/2013 nutrition surveys</p> <p>Interview with health service providers</p>

Thematic group 2 section 3 – Education

Issue/Topic	Questions	Data sources
EDUCATION		
School health	Objective: Review school feeding program linkages with other	IP reports

Issue/Topic	Questions	Data sources
	<p>interventions (provision of uniforms, sanitary wear and sanitation in schools) to increase female enrolment and attendance, identify high impact interventions to promote the attendance of girls in primary school and transition to secondary schools</p> <p># Schools having adequate sanitation facilities?</p> <p>% School children correctly de-wormed at least once (in the last school year?)</p> <p>Assess water provision and quality in schools. Is fuel provision sufficient and in a timely manner?</p> <p>Assess hand washing facilities in schools</p>	<p>Field visits, EMIS report</p> <p>Field visits, data from health partners</p> <p>Field visits/ observation, secondary data from WASH partners. Fuel – field visits, secondary data from environment partners</p> <p>Observations in schools</p>
Enrolment, attendance and absenteeism	<p>Trends in school enrolment, attendance and dropouts?</p> <p>Key reasons for non-enrolment, absenteeism and dropouts?</p> <p>Are educational facilities (classrooms, books etc.) adequate?</p> <p>What is the teacher to pupil ratio? Is it sufficient?</p> <p>Assess school performance during national and own examinations. What are their passing rates</p> <p>Is the recommended school curriculum being implemented? Any challenges?</p>	<p>Field visit, attendance records, partner reports, EMIS</p> <p>FGD, KII, PTA</p> <p>EMIS, school reports</p> <p>EMIS, Field visit</p> <p>KCPE results</p> <p>Field visit, partners report, school timetables, schemes of work etc.</p>
Kitchen infrastructure	<p>Are school kitchen properly maintained?</p> <p>Were fuel efficient stoves introduced in schools?</p>	<p>Observation</p> <p>Observation</p>

Issue/Topic	Questions	Data sources
	<p>Are the stoves adequately maintained?</p> <p>Are the cooking pots provided with lids?</p> <p>Review school feeding rations (quantity, quality and timing of meals) including whether sugar has been provided to add to CSB</p>	<p>Observation</p> <p>Observation</p> <p>FGD, Interviews, Discussions</p>
Complementary activities	<p>Objective: Review the impact and relevance of the take home rations provided to girls attaining 80% attendance in schools</p> <p>What has been the impact of take home rations (sugar and sanitary wear) on girls education?</p> <p>Has there been skills training (agriculture, health nutrition, HIV) in schools</p>	<p>Teachers/PTA/Partners + FGDs/HH interviews/interviews with school girls</p> <p>IP reports, FGDs, Enrolment trends, KEEP report, EMIS</p> <p>FGD with school girls</p>
Population has optimal access to education:	<p>Is school attendance different during the days of food distribution when compared to other days? Are girls or boys more likely to be absent? If children are absent during distributions, from what age onwards (compare primary vs. secondary)?</p> <p>In case school feeding is provided, does it reach all pupils equally?</p>	

Thematic group 4: Cooking energy, Water and Sanitation.

[illegible]

S/No.	Topic	Questions	Source of information	Comments
		<p>get your container filled?</p> <p>c) How much water do you receive/person/day?</p> <p>d) Is the water you are using treated? If yes, by who and in what way?</p> <p>e) Are there risks faced by girls/women in collecting water from the water point? Name a few reported/ documented cases.</p> <p>f) Does your household have access to a latrine facility? If yes what type of latrine (<i>permanent, semi-permanent etc.</i>)?</p> <p>g) What is the people: latrine ration in;</p> <ul style="list-style-type: none"> • The blocks • In schools • In clinics <p>h) Is there hygiene promotion activities carried out in schools (<i>e.g. hand washing, garbage collection, and refuse recycling</i>)? Name the organization and the frequency of the practice.</p>	<p>Q&As</p> <ul style="list-style-type: none"> ❖ Committees (PTAs, hygiene committees, water committee etc.) ❖ Community leaders ❖ IPs ❖ Review of sec. data sources <p>{Monthly reports [WASH]}, others.</p>	<p>b) Recommendations</p>

S/No.	Topic	Questions	Source of information	Comments
		<p>Is the practice replicated at home?</p> <p>i) Is there a slaughter house in your block/ zone? How many people does it serve? What are the routine hygiene practices within and around the slaughter houses?</p>		
5.	Cooking fuel issues	<p>a) What is the type and source of your cooking fuel?</p> <p>b) Is it adequate? If not, how do you cope?</p> <p>c) Do you pay for fuel (<i>buying, transport or any other</i>)?</p> <p>d) Are there risks faced by girls/women in collecting fuel from the source? Name a few reported/ documented cases.</p> <p>e) How far in the bush do refugees go in search of good quality firewood?</p> <p>f) Are refugees guided on how to gather firewood without destroying the environment?</p>	<p>❖ Field visits/ viewing of firewood centres, blocks/ households etc.</p> <p>Q&As</p> <p>❖ Committees (if any) , individual families</p> <p>❖ Community leaders</p> <p>❖ IPs</p> <p>❖ Review of sec. data sources</p> <p>(Monthly reports by the IP, gender issues, WFP-PDM,</p>	<p>a) Key points/findings</p> <p>b) Recommendations</p>

[illegible]

S/No.	Topic	Questions	Source of information	Comments

Thematic area 5 – Coordination, Registration, Policy and Durable Solutions

Overarching Objective of the JAM	
Specific Objectives E.g. To determine the overall food security profile of the camp	A: What are the primary income sources? What % of the population has access to these and what are the average amounts they are making? Are they positive or negative strategies?
	B: What is the seasonal variation of the income sources? Are there trend patterns over the year that lead to periods of higher and lower vulnerability?
	C: Which groups are the most vulnerable? Why? How are/could their specific needs be met? What are the most appropriate vehicles for targeting these groups?
	D: What is the overall food security profile of the camp and how dependent are refugees on the ration? Is the ration a food source or an income source or both? How are the high food prices and new arrival impacting on the refugee population?
Linkage between the Thematic Area and the specific objectives	
Activities E.g. Secondary information, FGDs, KIDs, beneficiary interviews/HH survey, transect walk/field visits	

Topic	Questions	Source of information
1. Population	a) Based on verification exercise, what are the current accepted numbers b) Demographic breakdown of camps	<ul style="list-style-type: none"> - Discussions with COR, camp coordinators and refugee committees Q&As <ul style="list-style-type: none"> - Committees (if any) - Community leaders - DRA,LWF - IPs - Review of sec. data sources (Verification Reports/UNHCR progress database)
2. Registration and policy	a) How are new arrivals being registered? How long does it take? b) Are there any clear gaps/unregistered populations c) What are the distinct problems in the camp in terms of registration? d) Are the current registration methods acceptable? e) What are the policies in terms of restriction of movement, land holding, livestock keeping etc.? f) Are there any upcoming changes in the policy on refugees or asylum seekers?	<ul style="list-style-type: none"> - Discussions with local Government, County Government (County Reps), DISC/NSIS, Host community (CDC), camp coordinators and refugee committees. Q&As <ul style="list-style-type: none"> - Committees (hygiene and water committees, etc.) - Community leaders - IPs - Review of sec. data sources {Monthly reports [WASH]}, others.
3. New arrivals	a) What are the plans for new arrivals? b) Are there updated contingency plans? c) How will a large influx be addressed? d) Medical screening for new arrivals? (including for SGBV) e) Land allocation for new arrivals? f) NFI and Food for new arrivals? g) People with Specific Needs (UAM/SC,	<ul style="list-style-type: none"> - Field visits/viewing of reception areas, new shelters etc. - DRA, UNHCR, WFP, Host Community - -IPs Q&As <ul style="list-style-type: none"> - Committees (if any) , individual families - Community leaders

	PLWDs etc.)	<ul style="list-style-type: none"> - IPs - Review of sec. data sources
4. Protection from crime strengthened:	a) To what extent has the introduction and use of biometrics resulted in disputes among beneficiaries? b) What are the main grievances?	-
5. Risk of SGBV is reduced and quality of response improved:	a. To what extent do food distributions lead to SGBV/ violence within the household or outside? b. c. 4. Have you heard of prostitution or other negative coping mechanisms in exchange for food?	-
6. Protection of children strengthened:	a) Which particular risks children are facing when collecting food on their own? b) 6. Are the minors served in an equal fashion as the adults during food distributions? c) d) 7. Are you aware of an increase of child labour since the introduction of biometrics?	-
7. Self-reliance/Durable Solutions/co-existence with nationals	a) What opportunities for IGA? b) What durable solutions exist for refugees? Is resettlement/repatriation a possibility? c) What is the criteria for resettlement/repatriation? d) Relations with the host community? e) Possibilities of local settlement?	<ul style="list-style-type: none"> - Discussions with leaders and coordinators and women's groups - DRA,IOM,NRC, Q&As - Meeting with shelter committees (if any) - Community leaders

	f) Life skills and vocational training opportunities? g) Changes in Government policy towards refugees? h) Impact of on- going refugee presence?	- IPs (NRC/DRC/LWF) - Review of sec. data sources.
8. Partnership and Coordination	a) How often does WFP/UNHCR/Gov meet? b) Are there any barriers to smooth relations? c) Is the Tripartite agreement/MoU actively used to divide roles and responsibilities? d) How do these groups interact with the refugee committees? e) Is there ongoing presence in the camps of UNHCR/WFP/ COR f) Are the women represented on all committees? Are there women in leadership positions? g) Training of COR Staff? h) Update on JPA- report finalization and release i) Drafting of new JPA j) Is the current tripartite agreement/MoU functioning? Accepted? Needs revising? k) Funding constraints affecting programming? l) Possibilities for shared programming	- Policy discussions with camp coordinator and refugee committees - Vulnerable groups Q&As - Committees (if any) , individual families - Community leaders - Local Government - Review of sec. data sources

Infant and Young Child Feeding	Objective: Review performance of IYCF and how it can be strengthened by BSFP project and other interventions	
% of children exclusively breastfed, % of children 6 months of age beginning complementary feeding		✓ Annual nutrition survey
% of mothers initiating BF within 1 hour of birth		✓ Annual nutrition survey ✓ Maternity records – early initiation of breastfeeding booklet
Main types of foods fed to infants 6 – 24 months of age	Probe on: <ul style="list-style-type: none"> ✓ Which food did the mother start with to feed her child ✓ Why did the mother start with this particular food? ✓ Is there any special meal that is given to the child? 	FGDs with PLWs
Distribution of Breast milk substitutes (BMS)	<ul style="list-style-type: none"> ✓ What are the guidelines used for admission to the program ✓ Check what equipment is available in the standard demonstration kit for BMS 	KII – health worker Observation
Growth monitoring	<ul style="list-style-type: none"> ✓ Observation of weight and height measurements ✓ Routine plotting and interpretation of growth curves 	Observation at GMP site MCHN booklet
Referral and linkages to Mother to Mother Support Groups (MTMSG)	<ul style="list-style-type: none"> ✓ How are women being linked to MTMSGs at community level and vice versa 	KII with Health worker and FGD with CHW
What are the main	✓ Probe on breastfeeding, availability and accessibility of	KII with health worker

concerns/challenges reported by the community and health professionals on IYCF	<p>nutritious foods,</p> <ul style="list-style-type: none"> ✓ Check on presence of breastfeeding equipment/tools in the health facilities 	FGDs with PLWs, CHWs and health committee
Monitoring and Evaluation – Are IYCF activities reported appropriately?	<ul style="list-style-type: none"> ✓ Probe on the current tools used to collect data and report on IYCF activities ✓ Is there active monitoring of IYCF activities? 	KII with health worker
	<p># of healthcare providers trained on IYCF and where they are allocated</p> <p>Any needs and issues related to IYCF in the area?</p> <p>Is IYCF integrated in the overall nutrition programme? If not, why?</p>	<p>Secondary data – 2011/2012</p> <p>Nutrition surveys</p> <p>Interviews with IPs, CHWs and community health representatives</p> <p>Discussions with programme staff</p>
Monitoring and Evaluation	<p>Objective: Review monitoring systems that exist in the camp by various partners pertaining to nutrition data collection and identify information gaps as well as timely dissemination and sharing obstacles.</p> <p>Review nutrition section of HIS</p> <p>Discuss coordination forums where data is shared at camp level</p>	<p>HIS performance indicators</p> <p>Facility registers</p> <p>Discussions with key staff</p>

Thematic area 6: Host community and security

	Issue/Topic	Questions	Source of Information	Comments
1	Access to Employment-Skilled, semi-skilled, non- skilled	a) What is the current state of employment within the various host community b) How has the host community benefitted from current employment opportunities	❖ Field visits Q & As ❖ Leadership- Chiefs, MCAs etc. ❖ Community leaders ❖ Religious leaders ❖ Women groups	Key points/findings Recommendations
2.	School Feeding programme-Community issues	a) Do schools have properly maintained kitchens? b) Review the school feeding rations? c) Do the schools have facilities /cooking utensils etc.?	❖ Field Visits ❖ Observation Q & As ❖ Schools-PTA, head teacher, learners	Key points/findings Recommendations
3.	Procurement opportunities-tendering processes	a) Is the procurement process well understood in the community? b) How are tenders advertised? Is the information readily available?	❖ FGDs Q & As ❖ Leadership ❖ Out of school youth	Key points/findings Recommendations

4.	<p>Support to host community</p> <ul style="list-style-type: none"> i) Hospitals ii) Water and sanitation iii) Decision making on projects iv) Infrastructure facilities v) Educational opportunities-scholarship and training 	<p>a) Are there any interventions currently in progress?</p> <p>b) Have these interventions benefitted the community and in what way?</p> <p>c) What future interventions can be implemented and are acceptable to the host community?</p> <p>d) Is the host community able to access the current training and scholarship opportunities from the agencies in and around Dadaab?</p>	<ul style="list-style-type: none"> ❖ FGDs <p>Q & As</p> <ul style="list-style-type: none"> ❖ Leadership- Chiefs, MCAs etc. ❖ Women groups ❖ Hospitals ❖ Water Users Association ❖ Out of school youth ❖ Persons with disabilities 	<p>Key points/findings</p> <p>Recommendations</p>
6.	<p>Impact on environment- Wood fuel, charcoal burning, soil harvesting</p>	<p>a) What impact have the projects had on the environment and how has this affected the livelihoods of the host community?</p>	<ul style="list-style-type: none"> ❖ FGDs <p>Q & As</p> <ul style="list-style-type: none"> ❖ Community leaders ❖ Government representative s-Chiefs, MCAs 	<p>Key points/findings</p> <p>Recommendations</p>
8.	<p>FFA</p>	<p>a) Is the project currently in place? Feasibility?</p>	<p>Q & As</p> <ul style="list-style-type: none"> ❖ Community 	<p>Key points/findings</p>

			<p>leaders</p> <p>❖ Government representatives-Chiefs, MCAs</p>	Recommendations
9.	Security challenges	a) How does the current security situation impact on the host community and authorities?	<p>Q & As</p> <p>❖ Community leaders</p> <p>Government representatives-Chiefs, MCAs</p>	<p>Key points/findings</p> <p>Recommendations</p>
12.	Restocking aspects	<p>a) To what extent is this currently being done by agencies in the region?</p> <p>b) How can this be supported?</p>	<p>Q & As</p> <p>❖ Community leaders</p> <p>Government representatives-Chiefs, MCAs</p>	<p>Key points/findings</p> <p>Recommendations</p>
13.	Conflict resolution avenues	<p>a) How are conflicts between the refugees and host community currently being resolved?</p> <p>b) And how has this been successful? How can this be improved?</p>	<p>Q & As</p> <p>❖ Community leaders</p> <p>Government representatives-Chiefs, MCAs</p>	<p>Key points/findings</p> <p>Recommendations</p>