



Case study: Multipurpose Cash for Multi-Hazard Response in Kenya

Preface:

This Case Study focuses on the Multipurpose cash transfers used towards response to Multi-hazard (Covid-19, Floods and Desert Locust infestation) in Kenya. This is a consolidated effort between British Red Cross East Africa office team and Kenya Red Cross Society.

Contents

| | |
|--|----|
| Humanitarian context..... | 3 |
| Results of multi-hazard response..... | 6 |
| Factors of success and lessons learnt..... | 7 |
| Main constraints and challenges..... | 9 |
| Next steps and recommendations..... | 10 |
| Beneficiaries voices..... | 11 |
| Contact information..... | 11 |

Humanitarian Context

Kenya is currently faced with multi-hazards ranging from floods, landslides, desert locust invasion and the global covid-19 pandemic. The interactions of these disasters overlaid on one another resulted in a widespread impact on communities, threatening their lives and livelihoods. The government imposed covid-19 control measures like restrictions on movements, lock down of some parts of the country and the Nationwide enforced curfews continue to worsen the country's economy like in other parts of the world. Increased rains led to massive flooding affecting 43 counties out of 47 counties in Kenya. There were 42,064 HH displaced by floods affecting over 252,384 persons, 94 deaths and 82 missing persons were reported by end of June 2020. A total of 37,563 livestock were also

reported as missing. Over 29 counties in Kenya were also affected by desert locust infestation since December 2019. The food security situation was critically impacted including depletion of fodder for livestock. Food security assessments and Integrated Food Security Phase Classification -IPC analyses pointed towards food insecurity levels of 3.5 million for Kenya alone.

The vulnerabilities of the communities in these high-risk areas was further worsened by underlying challenges of high poverty indices, low agricultural productivity, chronic food insecurity, weak economic and infrastructural development and inter and intra community conflict threatening the community survival mechanisms and resilience.

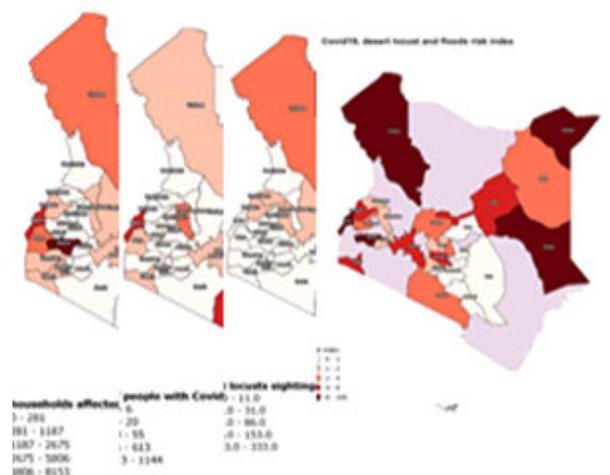


Program Description

Target Location

The target counties were selected through an impact data driven process, where the disaster risk index was calculated and impact maps of desert locust, floods and covid-19 overlaid to highlight counties worst affected by the three disasters. The top resulting counties are Busia, Kisumu, Turkana, Mandera, and Garissa. Based on previous drought effects conditions, Turkana, Mandera and Garissa counties were selected for this response.

Number of Households affected by floods



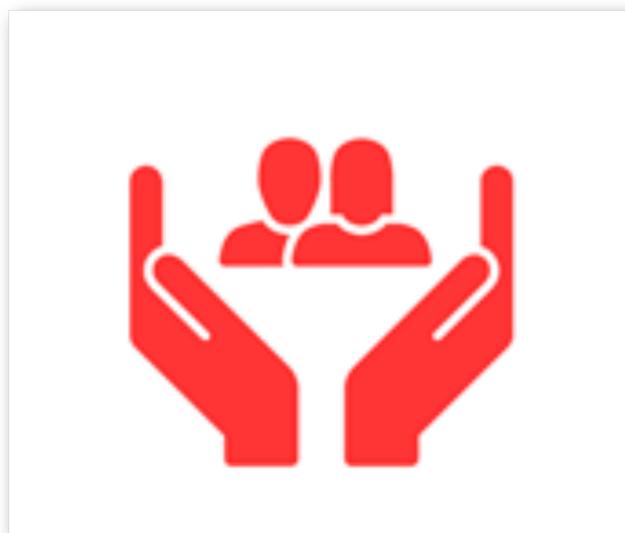
Response action

Kenya Red Cross Society (KRCS) has increasingly embraced Cash and Voucher Assistance as an effective, dignified, and efficient emergency response mechanism. The use of Cash Assistance has resulted in more aid reaching directly to targeted beneficiaries giving better value for money to donors as well as providing dignity, choice and flexibility to beneficiaries. To cope with the negative impacts of the multi-hazards experienced in Kenya, Multi-Purpose Cash Transfer mechanism was used as the most effective modality to support the affected vulnerable communities meet various households needs. The agreed minimum expenditure basket was enhanced to cater for the effects of the Multiple disasters.

The cash disbursements were done through mobile money transfers working with the local mobile money transfer service provider - Mpesa since the national society already has an existing agreement with the Safaricom Foundation to transact cash transfers at zero cost for disaster responses; however, the transfer value included a withdrawal fee since the beneficiaries had to pay the transaction charges for cash withdrawal.

Targeting and linkage with shock responsive social protection

The Government of Kenya called upon partners to support its initiatives in supporting population affected through existing national response structures including shock responsive social protection. KRCS used the piggybacking linkage with national social protection system by harmonizing beneficiary registration tool with that of the Government. The response targeted vulnerable communities who are not currently supported through the government social safety nets to support horizontal expansion efforts and reach as many vulnerable people as possible. The newly targeted beneficiaries were shared with the government single registry secretariat for review and inclusion in the national social assistance single register.



Coordination

The response was coordinated within the Kenya Cash Working Group (KCWG) using the group's partnership matrix to avoid duplication. This also included discussions with the County Steering Group (CSG) in all the three target counties who guided KRCS in reviewing the targeting criteria as well as allocating the geographical sites in each county. KRCS coordinated closely with the Social Protection Secretariat in ensuring that the people already registered under different social safety nets are not included in the KRCS response to avoid double-dipping.



COVID-19 Prevention Measures

Remote targeting in the face of COVID-19 was the best approach to limit interactions, however this also faced challenge in verifying the beneficiaries. KRCS therefore carried physical verification observing strict prevention measures such as wearing of face masks, use of hand sanitizers where there was no water and soap to wash hands, social distancing and working with very few people in any given meeting. These sessions were also used to sensitize communities on COVID-19 and prevention messages, dispel rumours and reduce stigmatisation of those infected with the virus. The project inception meeting with the CSGs as well as County staff was done virtually. To reduce exposure of staff, volunteers and the community, the Post distribution monitoring was done remotely from KRCS County offices through phone calls to sampled households. This replaced the household visits which are normally conducted during Post distribution monitoring. Posters with COVID-19 Prevention messages were produced in English and Swahili languages and pinned at strategic points where communities could read the messages. Those who could read were encouraged to.



Results of the Multi-Hazard Response



2,145

Total No. of most vulnerable households targeted in Garissa, Mandera and Turkana Counties.



38%

of the beneficiaries were People living with disabilities. 84% of these were from Turkana County.



66%

of the beneficiaries were women. Most were the household heads.



8%

of the beneficiaries were Households with chronically ill family members.



7%

of the beneficiaries were Elderly.



99%

of the beneficiaries reported satisfaction with the multi-purpose cash transfer.



150%

% Increase in the Transfer Value for the multi-hazard response compared to previous transfer values for single hazard responses.

Community Voices collected from all the 3 Counties on the Response

“

I purchased a goat which is now pregnant, this will help me in future when I sell it; I've named it Red Cross.

Sara – beneficiary

”

“

My family is now getting 2 meals a day, beforehand we had none or very little. My wife sells charcoal but due to COVID her business collapsed

David Emuria – beneficiary LWD

”

“

Only Red Cross has responded to us during covid-19, no one else not even the government has come to speak to us for this we are very grateful.

PDO Chairperson Mike -Turkana

”

“

I repaired my donkey cart – I use the donkey cart to ferry water and firewood and charcoal for my business. The Cart has resuscitated my charcoal and firewood business. It is also a means of transport; Since we don't have means of transport in our village, we use the cart to transport the very sick to hospital at night. This is our car in this village.

Fatuma - Garissa

”

Factors of Success and Lessons Learnt

Updated Multi-Hazard Contingency Plan

The KRCS has developed a National Contingency Plan, that is updated twice in a year. The Multi-hazard contingency plan allow a coordinated approach to disaster preparedness and response operations to increase efficiency and achieve all humanitarian goals as per the mandate. KRCS operationalized the Multi-hazard contingency plan in 2020 to address the humanitarian needs created by the multiple hazards in Kenya. The existence of the update Multi-hazard Contingency plan facilitated smooth response as guided by difference case scenarios and assumptions therein.

Data driven process

With limited resources and huge humanitarian gaps i.e. 43 of 47 counties affected by floods, 29 out of 47 counties affected by desert locust, and all 47 counties in Kenya with active covid-19 cases; there was need to have an objective targeting approach. With data preparedness capacity within the national society, a disaster risk index was calculated, and impact maps of desert locust, floods and covid-19 overlaid to highlight counties worst affected by the three disasters. These maps provided guidance on areas to prioritize for cash

assistance right down to the ward level during the multi-hazard response.

Innovative and flexible funding

While most partners focused on single hazard response, the British Red Cross provided funding to support the multi-hazard response in Kenya; an innovative evidence-based approach that was based on the data driven methodology where the most impacted communities were targeted. This was based on the bilateral engagement between the British Red Cross and the Kenya Red Cross linked to other ongoing long-term Programmes.

Coordination

Different partners played a huge role in the success of the multi-hazard response. The Kenya CWG through its sub-group on minimum expenditure basket (MEB) had developed the harmonized MEB guidelines that guided in the calculation of the transfer value. This also enhanced collaboration and harmonization efforts of transfer value across the different actors implementing CVA. The targeting was also coordinated within the Kenya CWG using the groups partnership matrix to avoid duplication. At the county level, KRCS coordinated the response with the partners at the CSG.

The CSG reviewed the targeting criteria and provided guidance on the target location at granular level. This was done to avert cases of double dipping and overlaps with other partners. KRCS plays a huge role in advancing the social protection agenda in the country. The social protection secretariat was involved in the targeting phase through the sharing of data collection tools. KRCS submitted beneficiary's data back to the secretariat to enhance the single registry. It is anticipated that KRCS will at a later stage require the data to implement anticipatory actions under the early warning early action program.

Collaboration for Inclusion with other Programmes

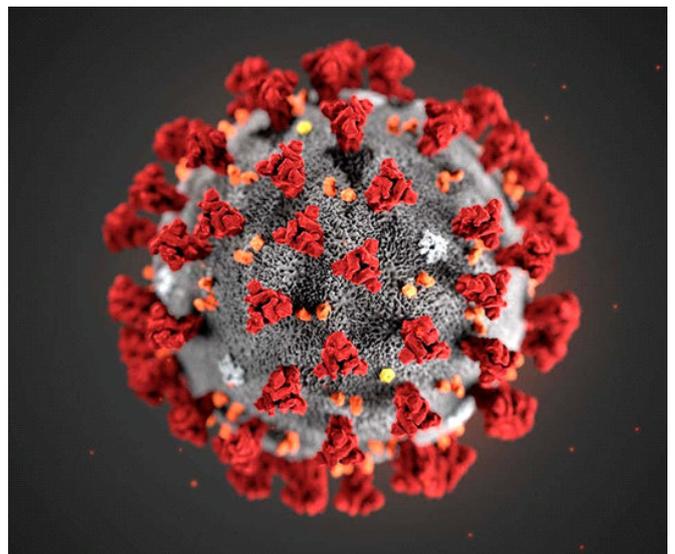
In Mandera and Turkana Counties, there were programs that had just been concluded due to funding by other partners supporting PLWDs who had been affected by floods and desert locust invasion. To ensure continuity, KRCS inherited some data from National Council of People with Disability (NCPWD) and Christ for the Blind Mission (CBM), thus saving time for fresh registration, minimising exposure of PLWDs during the covid-19 pandemic and thereby disbursing cash assistance efficiently to the communities.

Community Engagement and Accountability (CEA)

The response had robust operationalization of KRCS CEA framework. This entailed community-based targeting, where the community committees were involved in validation of targeted households. An effective community feedback mechanism was utilized that included use of a toll-free line and feedback boxes where the communities were able to give their feedback freely. The response team responded to the feedback given by the communities in within 72 hours. The toll-free line posters were disseminated to communities during forums as well as placement in strategic spots for ease of access by the communities.

Cash Assistance as a Response Option

KRCS utilized its cash preparedness capacity to effectively respond to the multiple emergencies. The unrestricted multipurpose cash assistance enabled the targeted communities to address their own needs due to flexibility and dignity that comes with cash assistance. From the supported communities' perspective, the cash assistance gave them the chance to address varied priority needs with ease; 100% of those interviewed during the PDM indicated they preferred cash rather than any other form of humanitarian assistance. The transfer value for the multi-hazard was also higher at ksh.7,514 compared toksh.3,000 that the communities used to receive during single-hazard response √mostly drought response.



Main constraints and challenges

Accessibility to Encashment Points: in some areas in Turkana county, there were no Mpesa agents nearby. The beneficiaries incurred high transport costs on motorbikes. The inaccessibility to encashment points was also contributed bad roads as a result of flooding. This contributed to hiked transport costs.

Community Perception on COVID-19: during community engagement process, KRCS tried to sensitize the communities on the need to observe COVID-19 prevention measures. However, the community in some villages had negative perception and little knowledge on COVID-19 and in most cases flouted the laid-down prevention measures. This resulted to reduced community engagement through community meetings to reduce exposure.

Available Resources vs Needs Identified: the needs assessment identified huge number of vulnerable people that required humanitarian assistance; the available resources could only reach few vulnerable people and could not reach more people as per the community expectations. In some counties, the target locations were scattered all over the county; spreading the response very thin in quest of representation in distribution of the limited resource. There is need to continue provision of support to the needy communities more so the PLWD and the displaced persons in camps.

Remote Way of Working: while conducting the remote PDM, it was noted that some community members shared phones, thus were inaccessible when the owners of the phones travelled. Due to rampant crimes through calls from people claiming to have transferred money to wrong numbers, thereby misleading innocent people to send them money, there were cases of beneficiaries that were apprehensive of the remote PDM calls from volunteers, some respondents used derogatory language when speaking to the enumerators, regardless of efforts to introduce themselves as KRCS volunteers and prior information

that they would receive a call from KRCS. It was quite difficult to interview PLWD like the dumb and the deaf remotely; they had to use caretakers to help in getting the information that was needed, this then took a lot of time since they had to translate and was subject to some information being lost during translation. Connectivity challenges, low battery, conflict with community calendars, among others were some the challenges experienced during the remote way of working in adherence to covid-19 prevention measures.

Low digital literacy: although the cash was transferred to beneficiaries»phones, there were cases whereby they couldn't operate their own phones including those not able to read the message alert when the cash was disbursed. There were cases where the beneficiaries realized they had received the cash during the remote PDM calls.



Next Steps and recommendations

Formalization of cooperation opportunities:

KRCS continues to work with the Social Protection Secretariat within other covid-19 related interventions. To ensure continued collaboration, including support to the early warning early action interventions, there is need to formalize the ways of working between KRCS and the Secretariat through a memorandum of understanding indicating clearly areas of synergy. This would ease data sharing for efficient response saving time and resources during responses

Inclusion of vulnerability index in targeting:

since the different vulnerability levels were not considered during targeting, all the households including the extremely vulnerable received the same transfer value. The communities should be involved to co-design a vulnerability score matrix that can be used to rank beneficiaries based on the level of vulnerability and subsequently the transfer amount.

Provision of PPE (Masks and Handwashing Facilities) to communities:

for transparency, community-based targeting was the most effective approach; these required communities to meet in open spaces. Due to negative perception on COVID-19 it was difficult to fully adhere to social distancing. There is therefore need provide masks, handwashing facilities or sanitizers to communities during community meetings as well as ensuring adherence to social distancing.

Devise more effective remote community engagement approaches:

With the current COVID-19 pandemic, it is vital to reduce exposure of staff, volunteers and communities. Effective remote mobilization of communities through local radio channels, community leaders or loudspeakers should be incorporated in response designs.

Use of technology - Digital Identity:

Developing a secure, self-sovereign digital identity through which

beneficiaries can self-register for cash assistance to be delivered will be quite helpful. This could be coupled with robust digital literacy campaigns. The self-registration platform would reduce exposure to covid-19 pandemic.

Updating Scenarios in the Multi-Hazard Contingency Plan:

The Contingency Plan as developed provides different scenarios and planning assumptions per disaster without envisaging overlap of multiple disasters. Scenarios and assumption planning should be updated in cases where there is an overlap of multiple hazards in the county.

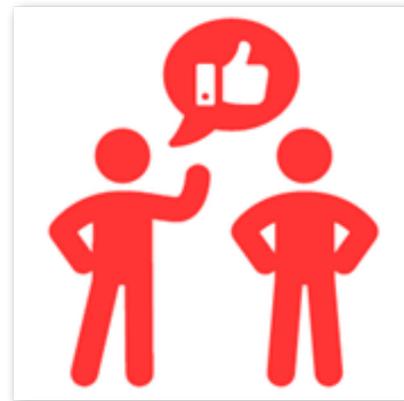


Photo © BRC and KRCS

Beneficiary Stories



KRCS has helped me and the community greatly; we used to receive food ration and Ksh. 3,000 as cash assistance from KRCS; but now we get more than ksh.7,500.

I have enough stock of food courtesy of the cash I received. I use the rest of the cash for daily expenditure like buying vegetables.

Ebla Ibrahim Aur,
65 years old; physically disabled
beneficiary in Garissa



My kids were unwell, and I was able to pay for medication and even now as students are resuming to school, I am able to provide them with the supplies they need to return to school, we are confident and comfortable. KRCS has opened our eyes please do not leave us in the dark.

David Emuria - Turkana



In my observation, this BRC support was more meaningful than the ksh.2,000 provided via social protections program and the Ksh. 3,100 one off payment we gave in January. This had a higher economic impact; their livelihoods were replenished since the hazards had paralysed income sources for most families especially due to the pandemic."

Intalo Mohammed - project officer CBM



Contact information

For more information on this case study please contact:

British Red Cross: Daniel and Noel: danielwanyoike@redcross.org.uk & NoelAwiti@redcross.org.uk

Kenya Red Cross Society: Fredrick Orimba: orimba.fredrick@redcross.or.ke