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Helpdesk Research Report: Humanitarian response to the post-election violence in Kenya in 2007/8

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Query: What are the main conclusions/lessons/recommendations from reviews and evaluations of the humanitarian response to the post-election violence in Kenya 2007/8?

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Contents

1. Overview

This literature review identifies reviews and evaluations with conclusions, lessons learned and/or recommendations on the humanitarian response to the post-election violence (PEV) in Kenya in 2007/8. The research interprets 'humanitarian response' to cover the interventions promoting human welfare in the aftermath of the PEV in Kenya in 2007/8. Findings cover different aspects of the humanitarian response, including the overall response (preparedness, coordination), integration of protection concerns, early recovery programmes, funding approaches and instruments and security for humanitarian organisations. The research does not focus on peacebuilding or governance issues.

The main conclusions and lessons learned on the **overall humanitarian response** are that:

- None of the actors involved were prepared for the extent and intensity of the violence and the resulting humanitarian emergency. A key lesson is that the new Inter-Agency Standing Committee (IASC) issued guidelines for contingency planning should be used.

- There was a lack of a clear policy and institutional framework for the initial coordination. The situation improved when the Kenyan government designated leads. Kenyan Red Cross Society's role as lead implementing agency was appreciated.

- The cluster approach adopted to strengthen the coordination is thought to have worked well, but with key lessons learned including: the importance of i) supporting national structures first and foremost; ii) incorporating all partners; iii) strengthening field- Nairobi coordination; and iv) improving inter-cluster coordination.

- Faith-based organisations and technology both played important roles in the response.

The main conclusions and recommendations on **the response to the extensive and fluid displacement** include the following.

- The humanitarian response was effective in delivering life-saving assistance to internally displaced persons (IDPs) and other affected populations where they were registered and accessible, although there was still much that needed to be done to meet internationally accepted standards for camp conditions.

- Displaced people outside the camp did not receive the same standard of humanitarian response, and IDPs outside the camps and their host communities had distinct needs requiring a different approach from the assistance provided to IDPs in the camps.

- Finding voluntary and 'durable' solutions was important, and this required taking into account the underlying causes of the crisis, tackling broader socio-political reforms and working with Kenya's national protection institutions.

- The perception that assistance was disproportionately targeted at one community eroded the condition for healing and reconciliation.

Lessons learned and recommendations on **the integration of protection issues in the humanitarian response** include: i) addressing the shortfall on the response to sexual exploitation and violence (mainly, but not limited, to women and children); ii) meeting challenges in implementing ISAC guidelines on mental health and psychosocial support; and iii) improving coordination and building on some positive experiences of HIV programming.

Evaluations of the cash based **early recovery programmes** report an overall positive experience across various interventions and identify lessons learned and recommendations for areas such as meeting the needs of the most vulnerable, working closely with local structures, building on the successful M-Pesa experience, ensuring community-based targeting, preparing clear communication briefs, and reviewing the budgetary cap on direct cash transfers.

Findings on **funding approaches and instruments** used in the PEV humanitarian response highlight the importance of having rapid, timely, flexible, longer-term and more predictable funding.

Learning points on **security for humanitarian organisations** included: the vulnerability of national staff and the importance of having evacuation plans and relocation policies prepared in advance; a standardised set of security levels and indicators; Kenyans in the Security Subgroup; and an SMS system to distribute breaking news that can be set up quickly and efficiently.

2. Overall response

Preparedness

None of the actors involved – government, national organisations, international organisations – were sufficiently prepared for the extent and intensity of the violence and the resulting humanitarian emergency. The reviews and evaluations concur that there was little preparedness and contingency planning prior to the crisis (see Joint U.N. Programme on HIV/AIDS 2008; Aeagbo and Iyi 2011; OCHA 2008; Diagne and Solberg 2008). The disaster management capacity of the Kenyan government was seriously challenged (Aeagbo and Iyi 2011; OCHA 2008), while international humanitarian agencies presence had been 'largely developmental' and response systems needed to 'urgently be put in place' (Inter Sector Working Group 2012).

A key lesson learned is that the new Inter-Agency Standing Committee (IASC) issued guidelines for contingency planning should be used, especially in countries experiencing political turmoil particularly in the run up to general elections, according to a review of UNHCR internally displaced people (IDP) operations during the PEV (Diagne and Solberg 2008). The review goes on to specify that the contingency plans should take into account national partners' inputs notably those from the Red Cross movements (Ibid.).

Other recommendations on preparedness highlight the need for 1) a coordinated network of community-based organisations and faith-based organisations, ideally coordinated by the UN, **and 2) pre-identification of vulnerable households (and their phone numbers)**, in order to prepare for mobile money transfers (expert comment).

Coordination

There was a lack of 'a clear policy and institutional framework' for the initial coordination of the PEV humanitarian response (KNDR 2008). According to the Kenyan government's 2009 National Policy on Disaster Management, the poor coordination of disaster response activities stemmed from a lack of standard operating procedures and disaster emergency operation plans. This resulted in duplication of efforts, waste of resources, prolonged recovery and weak prevention and preparedness (Government of Kenya 2009).

There was initial confusion and lack of coordination on designated government leads (Diagne and Solberg 2008), **but this improved over time** as the government designated the government entry points for the humanitarian community to coordinate the various interventions (Diagne and Solberg 2008; Spaak and Ngendakuryio 2011).

The government designated the Kenyan Red Cross Society the lead implementing agency and a number of reviews/evaluations report this worked well (see Aeagbo and Iyi, 2011; Diagne and Solberg 2008; OCHA, 2008)**.** According to the review in the Emergency Humanitarian Response Plan (OCHA 2008), this is because 1) the KRCS had strong operational capacity across the country and 2) humanitarian agencies supported the leadership of the KRCS and liaised closely with them on all assistance delivery to the displaced. Diagne and Solberg (2008) finds that the partnership between UNHCR and the KRCS paved the way for timely and more coordinated emergency interventions for the benefit of the IDPs. In contrast Wanyeki (2008) concludes that the KRCS did not have the capacity to handle a humanitarian effort of this size. Few donors have provided consistent and

predictable support that would allow for medium-term capacity building activities with the KRCS (Mowjee and Sweeney 2010).

A cluster approach was adopted to strengthen coordination of the international community's relief efforts (Diagne and Solberg 2008; Spaak and Ngendakuryio 2011). Diagne and Solberg (2008) question the applicability of introducing such an approach in the context of a 'strong and assertive' government structure, 'overwhelmed by crisis but at no time dysfunctional'.

OCHA (2008) finds the cluster approach functioned well, identifying room for improvement on strengthening coordination at the decentralised level, strengthening reciprocal information flows from field to national levels, undertaking a comprehensive analysis of assessment information and monitoring and evaluation data, including all humanitarian partners in national and decentralised coordination structures, securing flexible funding and coordinating response to humanitarian needs in urban areas and for displaced populations not in camps.

The UNHCR review concludes that the inter-cluster coordination did not function properly and attendance at inter-cluster coordination meetings was low. (Diagne and Solberg 2008)

The same review also finds that Nairobi-field coordination was not always smooth, especially during the emergency phase. The field wanted immediate practical advice from the capital on issues such as gender-based violence, identification, tracing and family reunification, special care for vulnerable cases, but perceived the clusters in Nairobi spent too much time in processes and meetings (Ibid.). In the protection cluster the disconnect led to a situation where the field was developing standard operating procedures for Mental Health and Psychosocial Support when IASC Guidelines on the issue already existed. (Ibid.)

The review also examines the coordination of individual clusters – camp coordination and camp management (CCCM), shelter and protection – and identifies key areas for improvement.

- An important lesson learned for the CCCM concept, which should be replicated elsewhere, is that where national capacity exists to manage camps, UNHCR and the CCCM cluster can play a key role in providing technical and direct support to a national counterpart thereby focusing on an advisory and technical role rather than an implementing role.
- When feasible, shelter standards should be agreed and defined during contingency and preparedness planning and the shelter cluster lead should be assertive with key actors (donors, government, RC/HC) to ensure consistency and transparency about shelter standards and the composition of different packages offered to IDPs.
- The protection cluster's inclusive and consultative approach was valued, but there was a lack of consistent follow-up and sharing of information; having a dedicated cluster coordinator was highly valued; some of important work was not sufficiently capitalised on or supplied to the mediation team and the government with key protection concerns; some of initiatives within the cluster appeared to be relatively UNHCR driven; and it struggled to move beyond establishing a coordination framework into joint and strategic action in the field, as well as at Nairobi level.

    (Diagne and Solberg 2008)

The UNHCR review (Diagne and Solberg 2008) concludes that UNHCR performed its cluster lead role well but with some shortcomings, and there was an initial lack of understanding among partners, in particular government, about UNHCR's role in IDP situations. The evaluation recommends that UNHCR staff managing clusters are trained and prepared to coordinate and lead

them in a collaborative and inclusive manner to ensure appropriate complementarity amongst all actors. (Ibid.)

Other points on the overall response

Faith-based organisations (FBOs) played an important role in the humanitarian response, in the main working alongside, and largely complementing, secular agencies such as UNHCR and the Kenyan Red Cross (Parsitau 2011). FBOs organised appeals and provided services (e.g. prayer and trauma counselling) (Ibid).

Technology played an important role in the humanitarian response in 1) fundraising campaigns (via SMS and blogs), for example leveraging SMS money transfer to support the Red Cross and 2) electronic payment systems using mobile phones, which can significantly reduce costs and leakage, while promoting financial inclusion of the poor (Arnold et al 2011) and is fast and efficient, especially in urban areas (expert comment).

This research did not find an independent and holistic ex post review or evaluation of the humanitarian response to the crisis; Mowjee (2012) says stakeholders would find an evaluation for such crises useful for identifying lessons.

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3. Displacement

Response to those displaced in camps

The humanitarian response was effective in delivering life-saving assistance to IDPs and other affected populations where they were registered and accessible (OCHA 2008) and the basic needs of the displaced in camps, in terms of protection, food, education, health, water and sanitation, were largely met due to the combined efforts of communities themselves, the government, civil society organisations, aid agencies and international donors (Elhawary 2008).

However, there were still shortfalls to meeting internationally accepted standards for camp conditions. Particular challenges were: a critical shortfall in the protection of women, girls and children at risk from sexual and gender based violence (OCHA 2008); lack of access due to insecurity with roadblocks delaying the provision of relief (Elhawary 2008); concerns over deterioration of conditions with the passage of time and the arrival of the rainy season (Ibid.); overcrowding and poor planning in some sites posing fire hazards and increasing the risk of disease outbreaks (OCHA 2008). One review identifies that more work should have been done to actively support alternatives other than camps (Diagne and Solberg 2008).

The OCHA 2008 review lists the recommended activities for the then ongoing CCCM strategy, stating that the establishment of camps will only be a last resort; safe and sustainable exit strategies will be put in place; all stakeholders will be engaged; GIS/mapping inventory of all sites will be undertaken; IDP participation will be ensured; mobile units will be used for camp management where needed; common standards and guidelines will be applied across the camps; a risk reduction approach will be applied; and cross-cutting issues (gender, HIV/AIDS, environment, peace building) will be mainstreamed.

Looking specifically at the role of UNHCR, many UNHCR CCCM activities were found to be successful (GIS mapping and the provision of site maps for coordination and operational planning; training activities on CCCM issues for a variety of actors including government officials at the district level, KRC staff, other partners and the IDPs; and salary payments of camp managers), **but the registration process was difficult and there was a policy and operation gap on camp closure and clean-up** (Diagne and Solberg 2008).

Response to displaced people outside of the camps

Displaced people outside the camp did not receive the same standard of humanitarian response. Without accurate data and no mechanism to identify, locate and assess their needs and intentions, studies conclude that the response to those displaced who sought refuge with host families and other communities was 'less effective' (OCHA 2008), constituted 'neglect' (KNDR 2009) and 'a significant failing' (Elhawary 2008). The UNHCR review concludes that the 'so called integrated IDPs' were 'insufficiently mapped and monitored' and that the protection cluster should have invested more resources to monitor the protection situation of this part of the displaced population (Diagne and Solberg 2008).

The government's response to the IDP situation (in particular) served to further heighten the image of an ethnically biased state, one of the most important consequences of the humanitarian response to Kenya's PEV (expert comment).The KNDR report (2008) finds that assistance was perceived as being only for people in camps and returning IDPs, and that while it is widely acknowledged that the Kikuyu were the majority among the displaced in camps, the perception that assistance was disproportionately targeted at one community eroded the condition for healing and reconciliation in return areas. The relief effort was dogged by consistent allegations of corruption, with complaints of forged lists of beneficiaries, genuine IDPs missing from lists (KNDR 2008).

IDPs outside the camps and their host communities had distinct needs: OCHA 2008 concludes that the host communities also needed support as their resources were overstretched by the burden of accommodating IDPs and that the modalities of aid delivery to IDPs in host communities are more complex, requiring a higher degree of community-based targeting.

Facilitating a durable solution

Reviews and evaluations concur on the importance of finding voluntary and 'durable' solutions to the displacement; this requires taking into account the underlying causes of the crisis and tackling broader socio-political reforms (OCHA 2008, Elhawary 2008, Lynch 2009), and working with Kenya's relatively strong national protection institutions (Diagne and Solberg 2008). Displacement is not a new phenomenon and Elhawary (2008) warns that portraying return as a durable solution in the absence of clear processes to resolve the underlying issues giving rise to it risks embedding the conditions for further violence in the future

The coerced return and arbitrary deadline of the government-led IDP return plan called 'Operation Nyumbani' (return home) raised clear protection concerns. Diagne and Solberg (2008) conclude this created 'a new emergency' exacerbated by poor conditions in the transit sites and uneven access to humanitarian assistance and access to basic public services. Elhawary (2008) advises the humanitarian community to be very cautious about facilitating return in the absence of adequate physical and socioeconomic security, and recommends humanitarian agencies to be better informed about the underlying causes of displacement, including grievances over land.

Elhawary (2008) and OCHA (2008) both call for undertaking a proper assessment of IDPs inside and outside camps, and from previous displacements, in order to determine their profile, needs and intentions so that interventions can be catered to them, as a crucial step to finding a durable recovery process. Lynch (2009) points out that a concentration on displacement as a post-election issue conspicuously ignored the 380,000 IDPs who existed prior to the 2007 election.

4. Protection

Integrating protection

Sutton (2008) finds that poor programming practices led to IDP protection risks. She identifies that part of the challenge in Kenya and other emergency contexts is the lack of clear agency standards to guide protection integration or to measure the accountability and quality of non-mandated agencies' responses to protection concerns. In order to address this gap, an inter-agency group has developed agency standards for the integration of protection in humanitarian action.

Diagne and Solberg (2008) find that compared to other clusters, the protection cluster received less attention and investment from the government of Kenya and the KRC. On the one hand there was no clear focal point agency in the government to deal with general protection issues; on the other the RC/HC's office seldom met with the protection cluster and/or provided high-level advocacy on behalf of the work of the cluster (Ibid.).

Responding to sexual exploitation and violence

Several reviews highlight a critical shortfall in the protection of women, girls and children at risk from sexual and gender-based violence, the need for increased attention in the humanitarian response to sexual and gender based violence, and the need for psycho-social care and counselling (Elhawary 2008; OCHA 2008; Shekhawat 2008; Wanyeki 2008).

Implementing the ISAC guidelines on mental health and psychosocial support (MHPSS)

The Horn and Strang (2008) review identifies issues with the implementation of the ISAC guidelines on mental health and psychosocial support such as no code of conduct or training for volunteers, a range of different levels of understanding on what MHPSS involves among the actors involved, unavailability of the IASC Checklist for Field Use, presentation of the guidelines to provide immediately recognisable help to people working in the midst of an emergency, government ministries working in silo and physical health often prioritised over MHPSS issues. One very positive lesson is the value of the presence of a MHPSS expert in the country, to advocate for the guidelines and to steer the participatory development of local guidance.

Integrating HIV in the humanitarian response

The UNAIDS review (2008) found a lack of operationalisation of coordination structures – 'HIV in emergency was 'everyone's business, and no one's responsibility'; particular challenges were undertaking rapid national assessments and limited funding (Joint U.N. Programme on HIV/AIDS 2008). The review concludes that HIV needs to be configured as a multisectoral, cross-cutting intervention from the outset of the crisis and preferably during the preparedness stage. Other key

lessons identified by the review include the need to map HIV services and providers, train all actors and establish contingency plans for ART continuation and prevention services. (Ibid.)

Odek and Oser (2011) find that the PEV experiences help highlight the importance of factoring HIV into disaster preparedness and response planning. They warn that written contingency plans must be augmented by appropriate skills and capacities, resources, clear assignment of roles and responsibilities, and effective coordination mechanisms. They conclude there have been significant strides to implementing the recommendations from the UNAIDS review and identify the following areas for further development: continuing work towards including HIV programming as an integral aspect of disaster management plans, structures and processes; formally engaging key implementing partners in planning and in implementing emergency plans; formalising the extensive and strong informal networks within some agencies and among stakeholders at the local level; educating patients on the importance of keeping their medical records with them in times of emergency (Ibid.).

Vreeman (2009) finds that during the crisis the vulnerable, HIV-infected paediatric population had disruptions in clinical care and medication, putting children (in particular from tribes targeted by violence) at risk, but unique programme strengths may have minimised these disruptions. These strengths included: i) the AMPATH response built on an infrastructure of clinics, food and medical distribution services, networks of community health workers and a comprehensive electronic medical record system; and ii) the unified attitude and commitment of AMPATH personnel (Vreeman 2009).

Despite considerable challenges, MSF was able to keep medical services and highly active antiretroviral treatment (HAART) functioning in the midst of PEV in Kibera, Nairobi (Reid et al 2008). Reid et al (2008) attribute these results as being due to a relatively short crisis with order restored quickly, and MSF's preparedness and commitment to continued care, good patient literacy and strong community support. Recommendations identified include: undertaking advanced contingency planning even in contexts that appear stable; being able to adapt a programme rapidly; establishing a communications structure with close ties to the community; facilitating daily situation assessments; using a 'patient passport' to receive care at other health centres; in times of anticipated instability, consider extending patients' medication supply and increasing stocks of medications in the health centres; and developing a simple, emergency data management system (Ibid.).

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5. Early recovery

A selection of key lessons learned from reviews/evaluations of the cash transfer interventions (see Action Contre la Faim 2008, and summarised in Pietzshe 2009, 2012; Datta et al 2008; Brewin 2010; MacAuslan 2010; Nicholson 2009), and some supplementary expert comments, are:

- **collapsed urban markets recovered quite fast**, making cash distribution a very useful tool (expert comment)
- clear demonstration that it is possible to implement emergency cash transfer programmes even in **densely populated and insecure urban areas** (Action Contre la Faim 2008)
- many businesses were destroyed, and **the combination of cash for food security and grants for rebuilding livelihoods was successful** – more so than giving grants to people who did not previously have businesses, because this group face other constraints in running businesses (such as knowledge, connection, and security) (expert comment)
- **assessments (prior to project design and interventions) with sufficient livelihood, market and risk analysis are critical** (Nicholson 2009)

- **the business development model needs to be reconsidered for very vulnerable (bed-ridden, very elderly) individuals and households** (MacAuslan 2010)
- **community sensitisation and community-based targeting is critical to ensure local ownership** (Nicolson 2009); poverty scorecards and a house-to-house approach are one approach to capturing the poorest, and community leaders could be involved in a supervised validation stage (MacAuslan 2010)
- **the M-Pesa system is particularly attractive** in that it offers a solution to one of the biggest problems facing NGOs involved in cash transfers – that of ensuring security of cash while being counted and transported (Brewin 2010) – and is generally popular with recipients and effective (MacAuslan 2010). Issues with the M-Pesa system included (but not limited to): need to increase ratio of mobiles per family (Datta et al 2008); a quick mechanism is needed to deal with lost SIM cards (Ibid.); and making collection work for the most needy (Brewin 2010, MacAuslan 2010).
- **good to prepare clear communication briefs for use in an emergency situation** to ensure speedy implementation does not impact on communication (MacAuslan 2010)
- **aid agencies should review restrictive policies such as budgetary caps** on direct cash transfers (Ibid.)
- **coordination mechanisms to facilitate cross-institutional learning within and between partners** should be established (Nicholson 2009).

6. Funding

The fact that non-appeal funding in 2007 was nearly the same amount as donors have directed to projects in the appeal points to a need for clusters to function more effectively, according to OCHA 2008. The report recommends bringing the key implementing organisations into the common planning system and in developing their parts of the appeal so as to make it clear to donors and other stakeholders on who plans to do what and where, and how much it will cost.

NGOs receiving funding channelled through UN agencies find that these are not as timely and flexible as the funding that the UN agencies receive, according to the 2010 evaluation of Sida humanitarian assistance (Mowjee and Sweeney 2010). The report recommends Sweden to work with like-minded donors to ensure that UN funding procedures for NGOs are more effective and reflect better the conditions that the UN agencies themselves enjoy.

The UNHCR review recommends predictable funding for UNHCR which allows it to step in with moral and financial leadership in these complex IDP situations (Diagne and Solberg 2008). The review concludes that having programme implementation contingent on securing money impacts on the predictability and credibility of UNHCR especially in relation to its cluster lead role.

International non-governmental organisations (INGOs) were apparently slow to get funding and implement programmes, compared to local non-governmental organisations (NGOs), according to Horn and Strang (2008).

Mowjee and Sweeney (2010) find that multi-annual framework agreements that translate into longer-term, more predictable funding for the local partners of [bilateral donors] and international NGOs are useful instruments for implementing Good Humanitarian Donorship principles in chronic emergency situations.

CERF funds were instrumental for strengthening the humanitarian response capacity of at least three agencies (FAO, WHO, and IOM) at the time of the PEV, according to a 5-year evaluation of CERF (Spaak and Ngendakuryio 2011). The evaluation noted CERF processes could be more inclusive and consultative; prioritisation and allocation of funding to the different clusters/sectors is sometimes seen as arbitrary; agency monitoring is not shared; the ERF (another UN pooled fund) has a different management structure limiting complementarity; the contractual relations of UN agencies and their NGO implementing partners are neither well documented nor well understood (Ibid.)

7. Security

One main lesson for humanitarian organisations' security was that national staff are more vulnerable than expatriates (while most security plans are written with expatriate staff in mind) (Breholt and Penny 2008). Other lessons are that: it took too long to set up the SMS system to distribute breaking news; it was important to have Kenyans in the security subgroup to provide much deeper contextual analysis and historical background; the security situation in field locations varied greatly; Nairobi does not lend itself to easy evacuation route planning; and agency personnel were often exposed to extreme threats when travelling to distribution sites. Their recommendations include: setting up a template for evacuation plans and a policy document for relocation was particularly important for smaller agencies; preparing at the least minimal plans and guidelines in advance; and using a standardised set of security levels and indicators (Ibid.).

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9. Additional Information

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