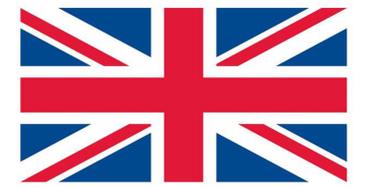




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MULTI-SECTOR NEEDS ASSESSMENT (MSNA)

Garissa, Marsabit, Mandera & Turkana Counties

Presentation of findings

June 2023



REACH Informing
more effective
humanitarian action



Contents

- 01** Objectives
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01

Assessment Objectives



Background

- Garissa, Mandera, Marsabit and Turkana counties have experienced various shocks in the last 12 months. (Drought, flooding, livestock diseases etc.).
- The four counties were classified to be in integrated phase classification acute food insecurity (IPC AFI) phase 3 in February 2023 and over half of the population experiencing high food consumption gaps (IPC AFI phase 3 or higher.)
- The shocks have eroded household resilience across different sectors and increased multisectoral gaps.



Objectives

- Understand the current drivers and underlying causes of severe food insecurity, high malnutrition rates, and excess mortality in the worst affected counties of Northern Kenya with an intersectoral lens.
- Strengthen the quality of food security and nutrition analysis at IPC analysis, and linked analysis systems in Kenya to enable informed decision making
- Develop and implement an intersectoral tool with representatives at the sub-county level in order to provide points of comparison, triangulation of the National drought management Authority (NDMA) and Ministry of Health (MoH) assessment and strengthen the humanitarian data collection and nutrition information landscape of Kenya.



02

Methodology



Methodology

Design:

- Quantitative approach
- Household(HH)-level structured interviews
- face-to-face interviews with self-reported head of HH or adult with knowledge about the HH.
- Target population-Host community

Data Collection Dates:

18th May – 4th June 2023

Sample size:

County	Number of Surveys
Garissa	1,376 (6,656)
Mandera	1,327 (7,327)
Marsabit	902 (4,822)
Turkana	1,346 (8,391)
Total	4,951 (27,196)



Sampling strategy:

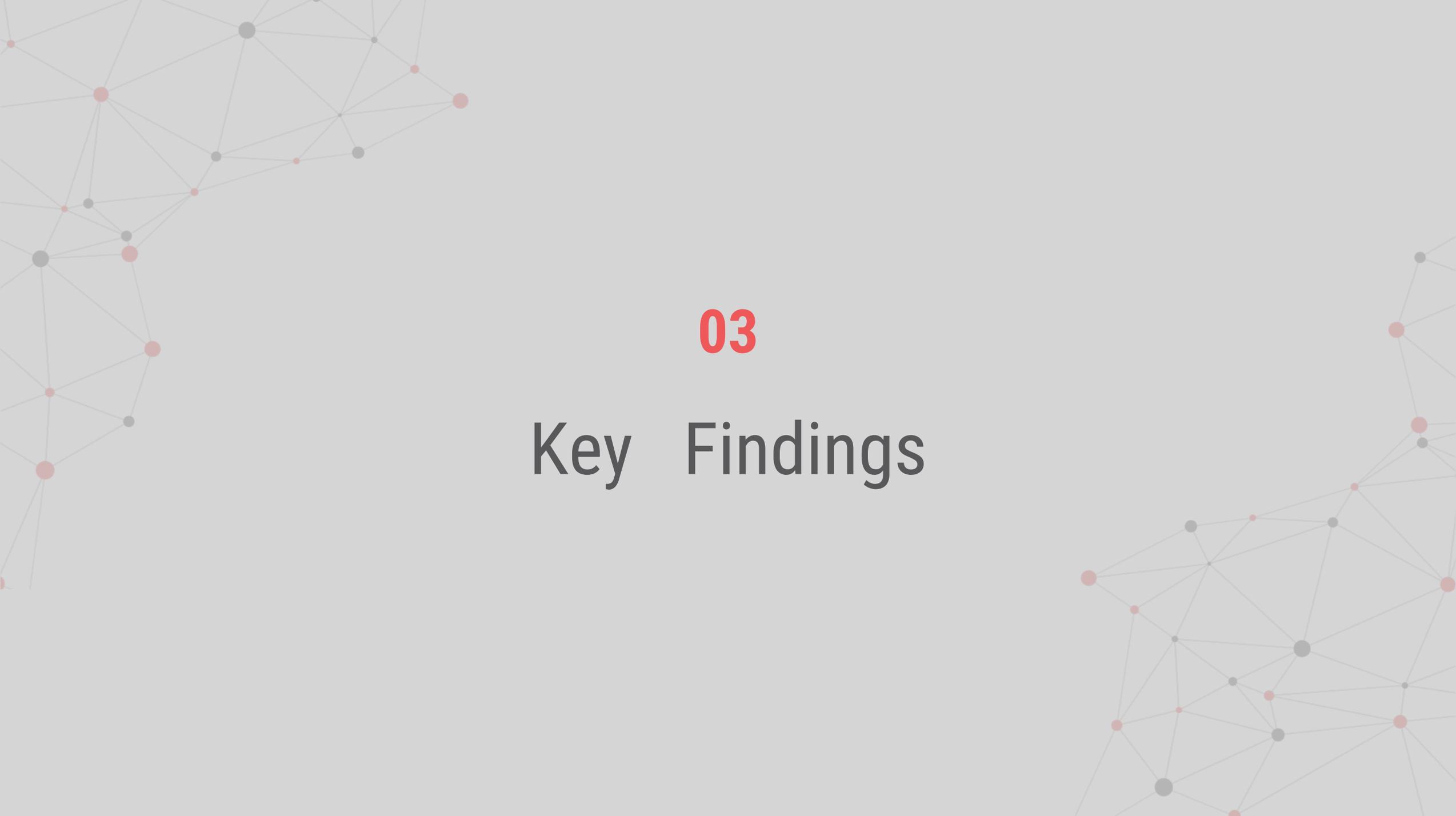
Stratified simple random sampling technique.

Population data from 2019 KNBS census.

Representativeness:

95% confidence level and a +/- 7% margin of error at sub-county level.

Subsets may have a wider margin of error or lower level of confidence.

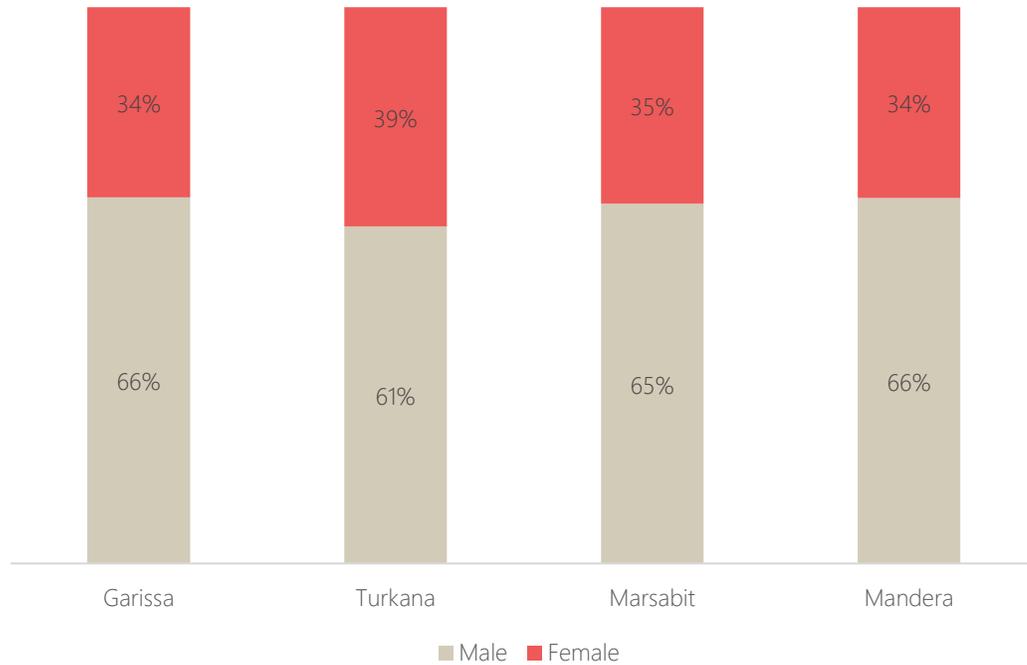


03

Key Findings

Demographics

% of households by sex of head of household



Average household size per county

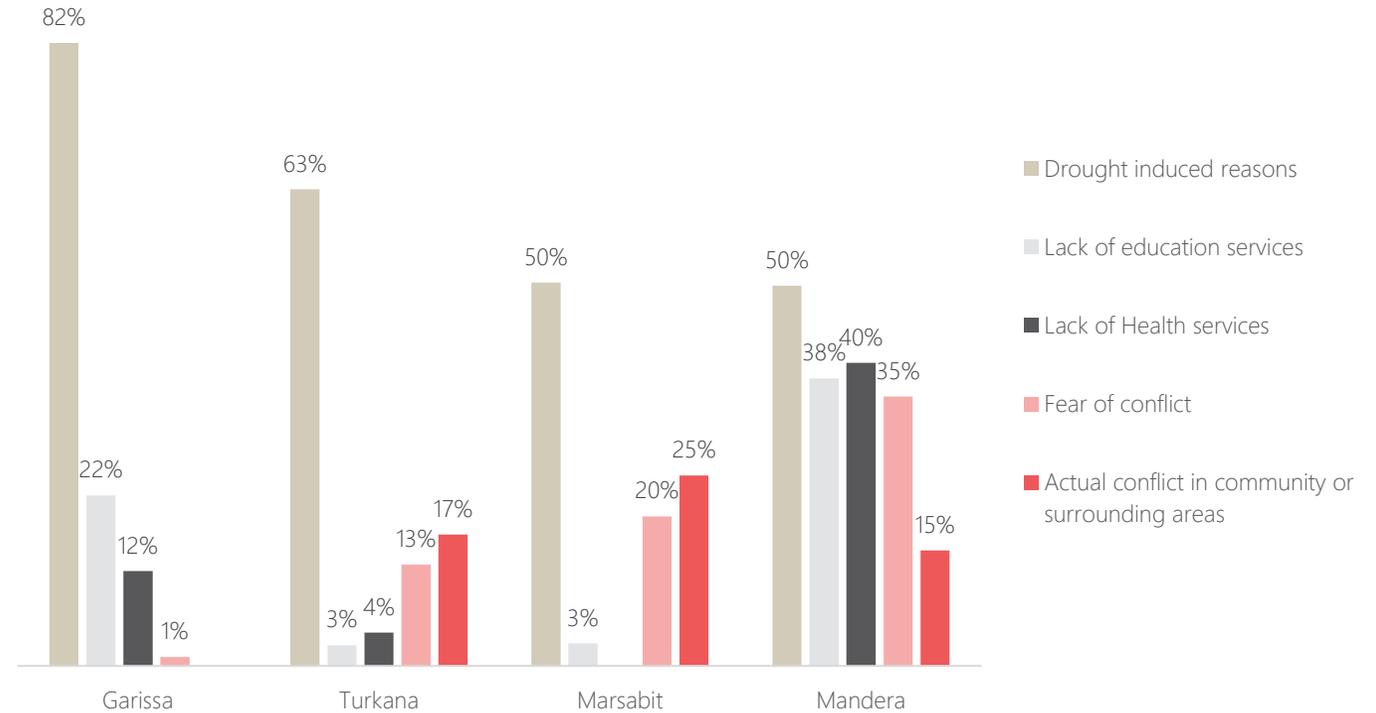


Protection

% of households by duration they have lived at the current location at the time of data collection:

	Garissa	Turkana	Marsabit	Mandera
0-6 months	-	1%	-	5%
7 months-1 year	-	1%	-	3%
More than 1 year-2 years	1%	2%	2%	4%
More than 2 years-3 years	2%	1%	2%	2%
More than 3 years-5 years	3%	3%	2%	5%
More than 5 years	94%	92%	94%	82%

Top reported push factors for households who arrived in their current locations in the 3 years prior to data collection:¹



- A majority of HHs that had arrived in their current locations in Mandera (96%), Garissa (94%), Turkana (89%) and Marsabit (84%) in the 3 years prior to data collection, had come from within the same counties but different locations.
- However, 5% of the HHs who had arrived in Marsabit in the 3 years prior to data collection had come from Ethiopia.

Safety & Security Status

A considerable proportion of HHs in Garissa (48%), Turkana (44%), Marsabit (33%), and Mandera (27%), reported that there was at least one place in their location that women and girls avoided because they felt unsafe.

Commonly reported places that women and girls avoided because they felt unsafe by % of HHs at the time of data collection:¹

- Markets
- Water points
- On the way to collect firewood

% of HHs reporting that men and women experienced safety and security concerns in their area of residence at the time of data collection:

	Men	Women
Garissa	37%	43%
Marsabit	39%	38%
Mandera	37%	36%
Turkana	53%	58%

Top reported safety and security concerns for men and women by % of HHs at the time of data collection:¹

MEN	Garissa	Turkana	Marsabit	Mandera
Being kidnapped	23%	5%	3%	1%
Being robbed	17%	29%	17%	1%
Being killed	15%	30%	20%	4%
Being threatened with violence	8%	16%	17%	11%
Arbitrary arrests	3%	1%	-	6%
Discrimination or persecution (because of ethnicity, etc.)	2%	-	1%	10%

WOMEN	Garissa	Turkana	Marsabit	Mandera
Being robbed	5%	19%	5%	1%
Suffering from sexual harassment or violence	15%	24%	15%	5%
Suffering from verbal harassment	18%	16%	18%	8%
Suffering from physical harassment or violence (not sexual)	11%	16%	11%	6%
Being threatened with violence	10%	15%	10%	11%
Being kidnapped	12%	14%	12%	
Being forcibly married	2%	4%	2%	13%
Female Genital Mutilation (FGM)	4%	-	4%	8%

Child Protection

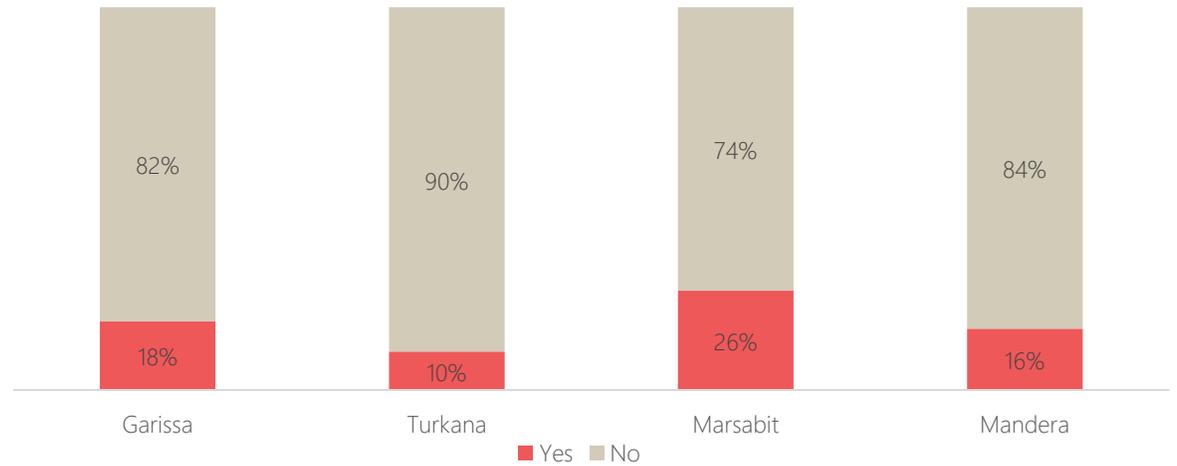
14,543

children aged below 18 years in assessed households

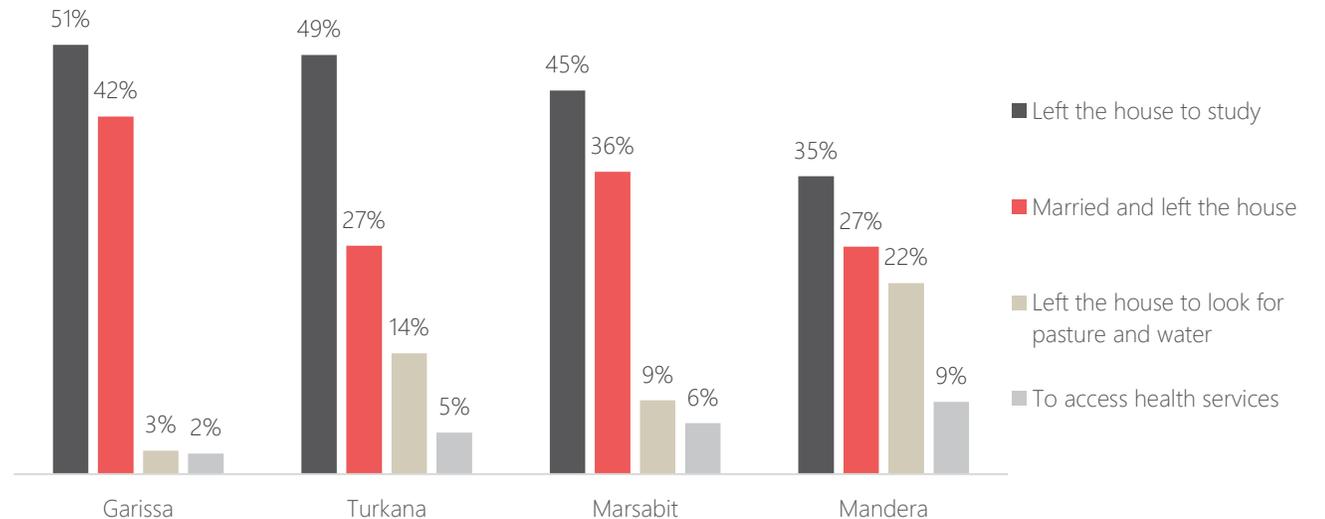
Number of children aged between 7 and 17 years who were married per county at the time of data collection (n=6,927):¹

Garissa	39
Mandera	12
Marsabit	9
Turkana	5

% of HHs reporting having at least one child aged below 18 years not living in the household at the time of data collection:¹



Top reported reasons for children leaving the households:



Child Protection

% of HHs reporting that boys and girls experienced safety and security concerns in their area of residence at the time of data collection:

	Boys	Girls
Garissa	47%	49%
Marsabit	39%	38%
Mandera	35%	38%
Turkana	56%	60%

Top reported safety and security concerns for boys and girls by % of HHs at the time of data collection:1

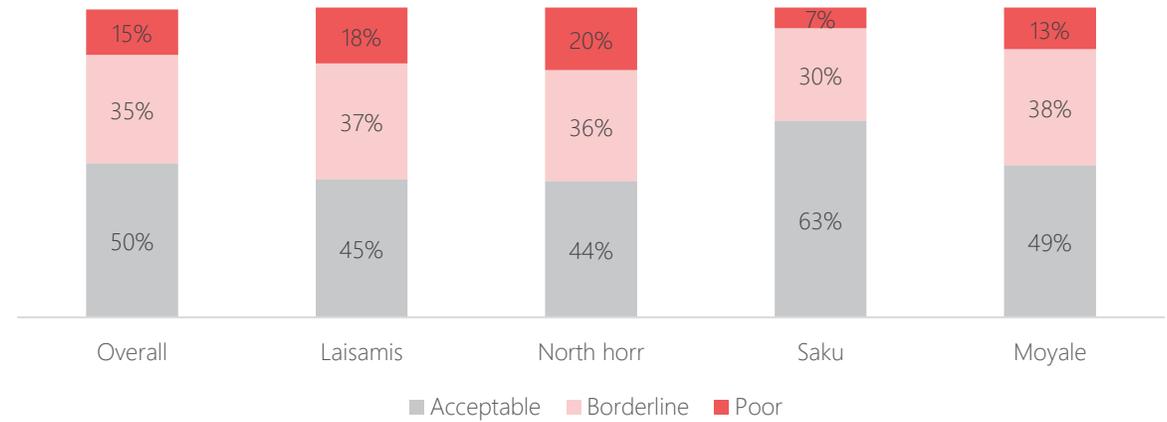
BOYS	Garissa	Turkana	Marsabit	Mandera
Being threatened with violence	14%	17%	15%	13%
Discrimination or persecution (because of ethnicity, status, etc.)	3%	1%	1%	9%
Suffering from verbal harassment	13%	12%	9%	8%
Being killed	14%	24%	18%	1%
Being kidnapped	19%	8%	3%	1%
Being robbed	20%	22%	15%	-

GIRLS	Garissa	Turkana	Marsabit	Mandera
Female Genital Mutilation (FGM)	11%	-	6%	15%
Being forcibly married	15%	18%	12%	15%
Being threatened with violence	9%	13%	8%	9%
Suffering from verbal harassment	21%	17%	17%	9%
Suffering from sexual harassment or violence	27%	30%	11%	4%
Being kidnapped	14%	17%	11%	-

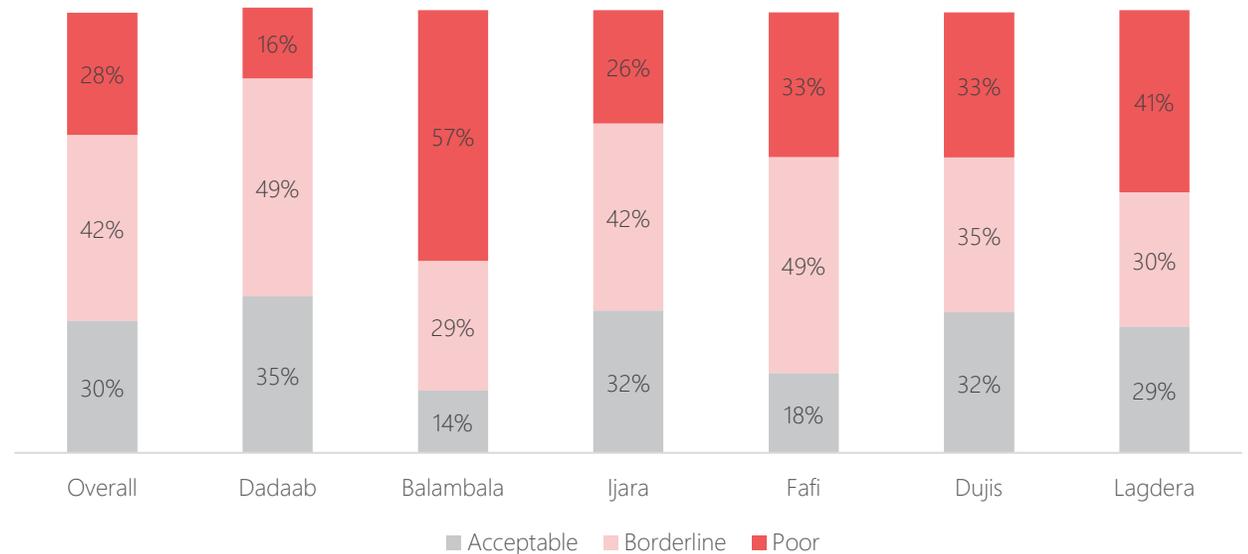
Food Security (FCS)

Food Consumption Score (FCS): used to measure dietary diversity, food frequency, and the relative nutritional importance of food groups based on seven-day recall period of food consumed at HH level.

% of HHs per FCS per subcounty, Marsabit



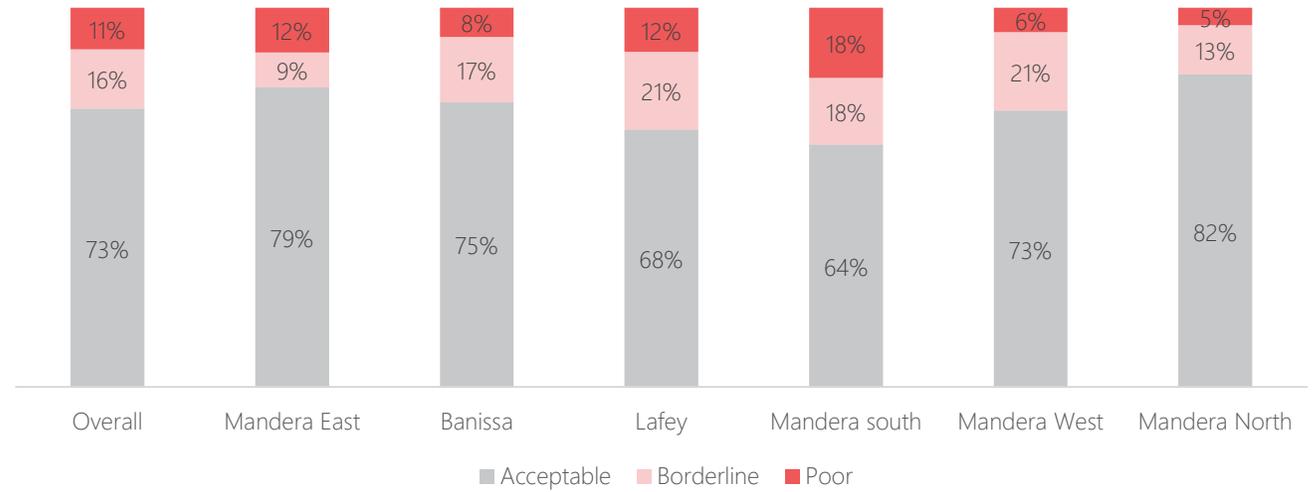
% of HHs per FCS per subcounty, Garissa



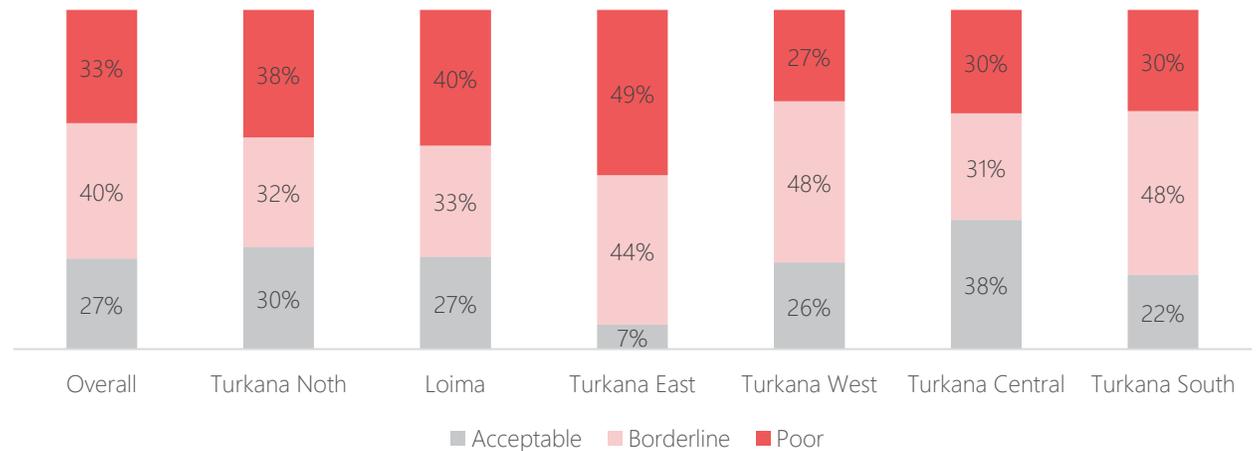
Food Security (FCS)

Turkana and Garissa were found to have more than 20% of their HHs facing severe food consumption gaps (poor FCS-indicative of IPC phase 4 levels.) Higher gaps were observed in Balambala and Turkana East with about half of the HHs with poor FCS.

% of HHs per FCS per subcounty, Mandera



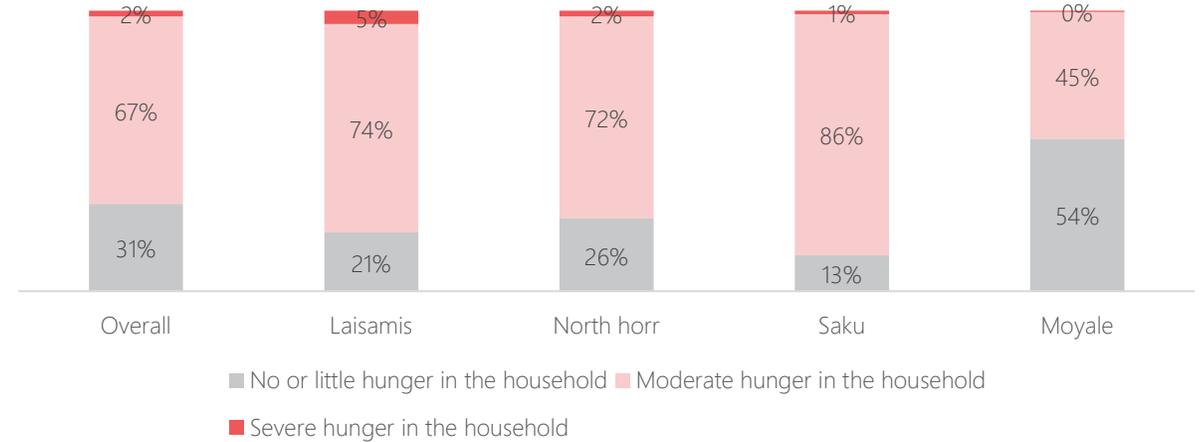
% of HHs per FCS per subcounty, Turkana



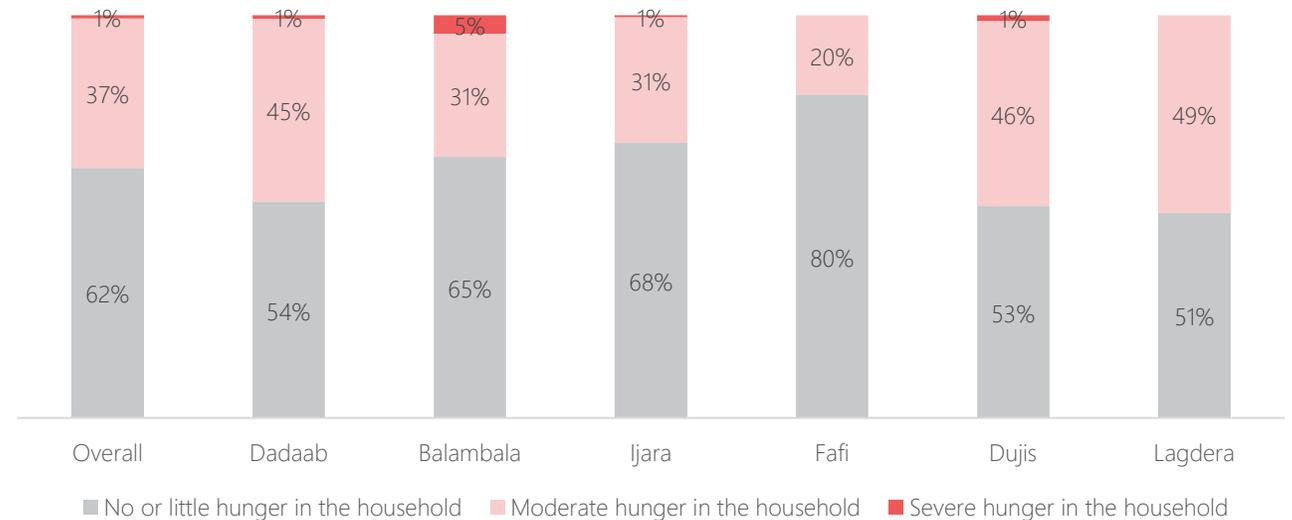
Food Security (HHS)

Household Hunger Score (HHS): used to measure household hunger using three questions and three follow-ups on potentially experienced food deprivation in the past 30 days and the frequency.

% of HHs per HHS per subcounty, Marsabit



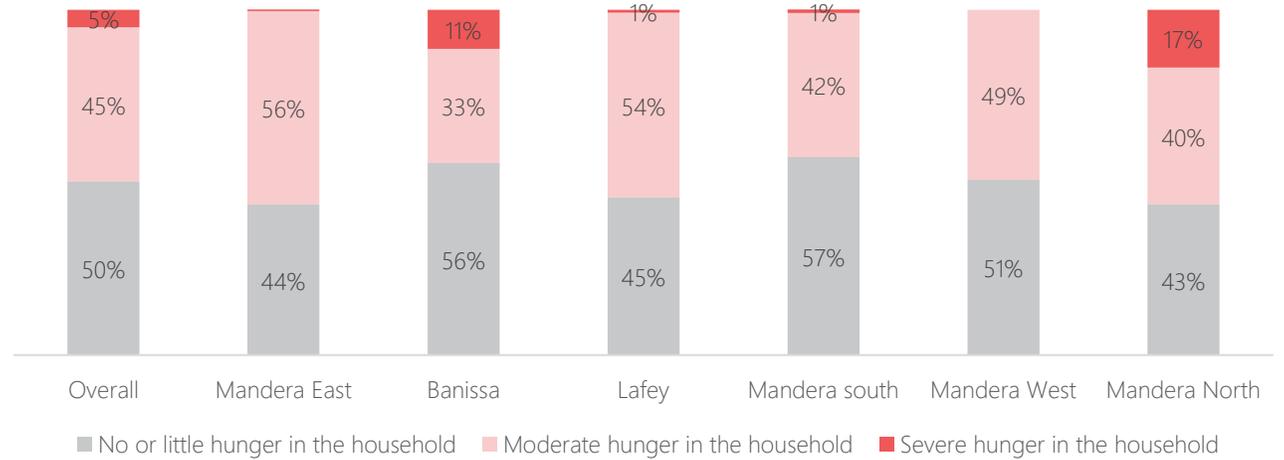
% of HHs per HHS per subcounty, Garissa



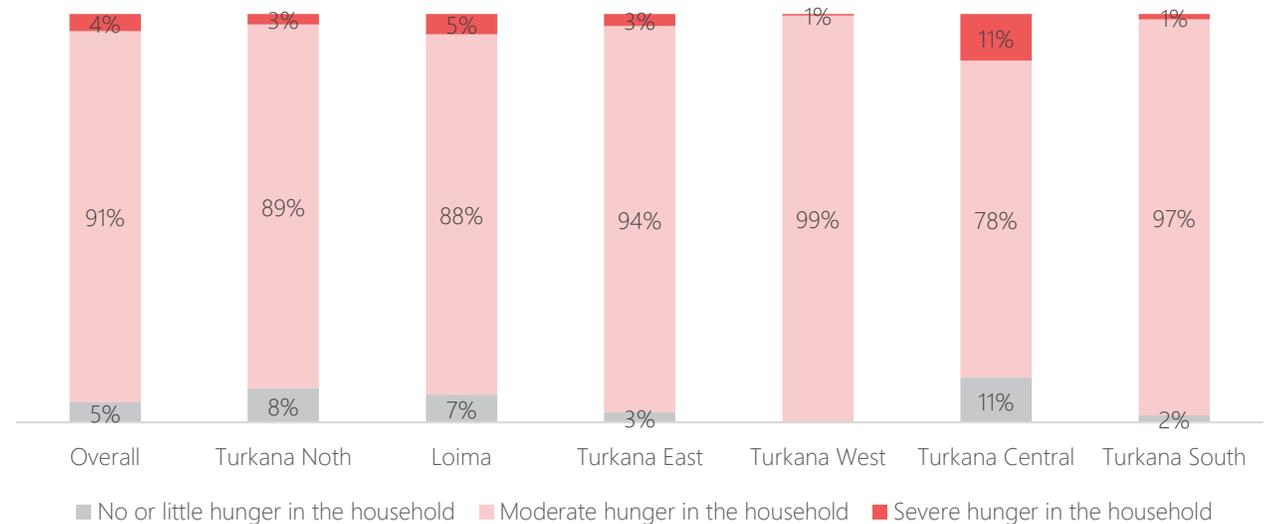
Food Security (HHS)

Turkana central subcounty was found to have the highest proportion of HHs experiencing severe hunger in the 30 days prior to data collection.

% of HHs per HHS per subcounty, Mandera



% of HHs per HHS per subcounty, Turkana

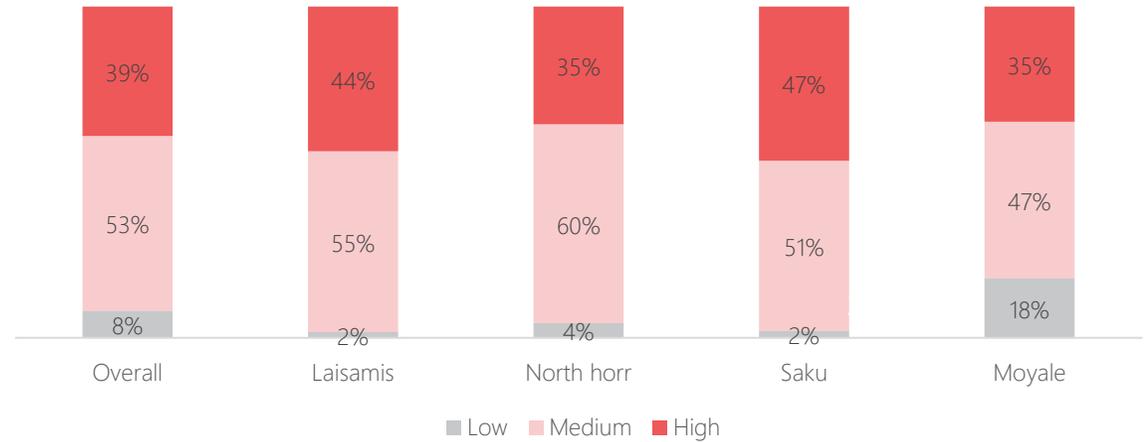


Food Security (rCSI)

Reduced Coping Strategy Index (rCSI): used to measure the behaviour of HHs over the past seven days when they did not have enough food or money to purchase food.

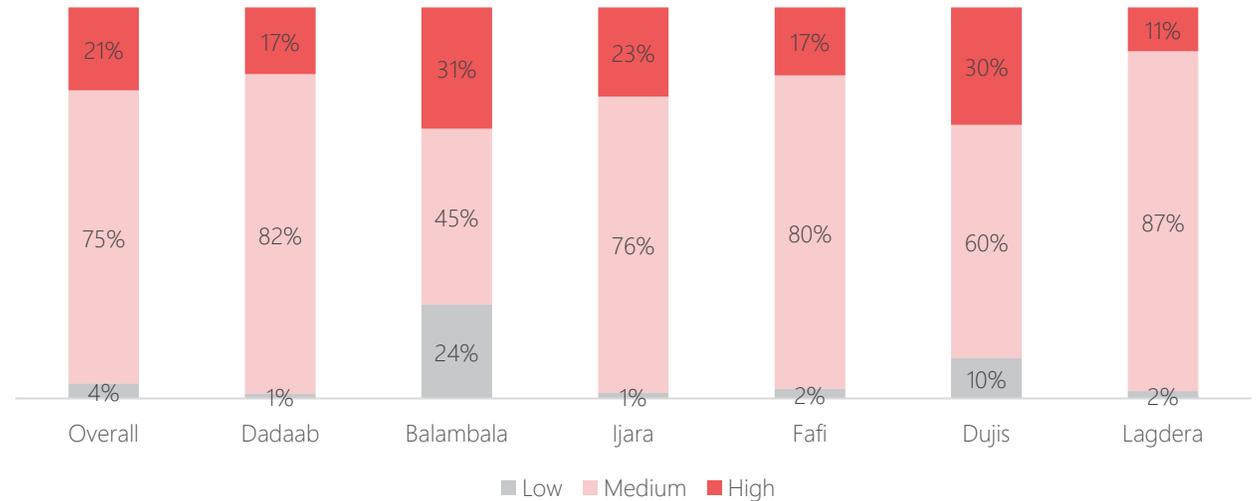
Average rCSI **16.92**

% of HHs per rCSI per subcounty, Marsabit



Average rCSI **13.44**

% of HHs per rCSI per subcounty, Garissa

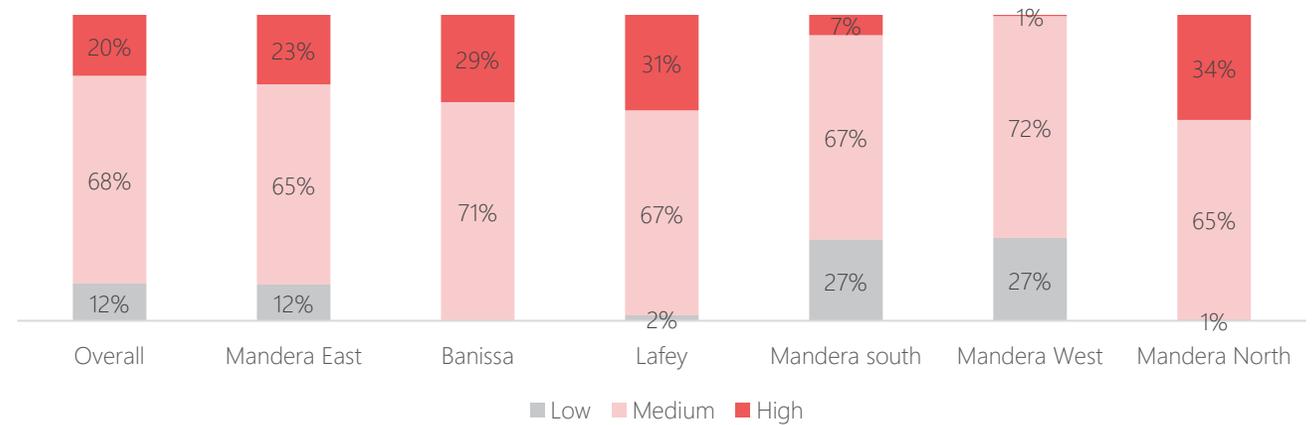


Food Security (rCSI)

All four counties were found to have 20% or above, of HHs with an rCSI score of 19 and above (indicative of IPC phase 3 levels.) Turkana and Marsabit counties were found to have a higher average rCSI score of 17.

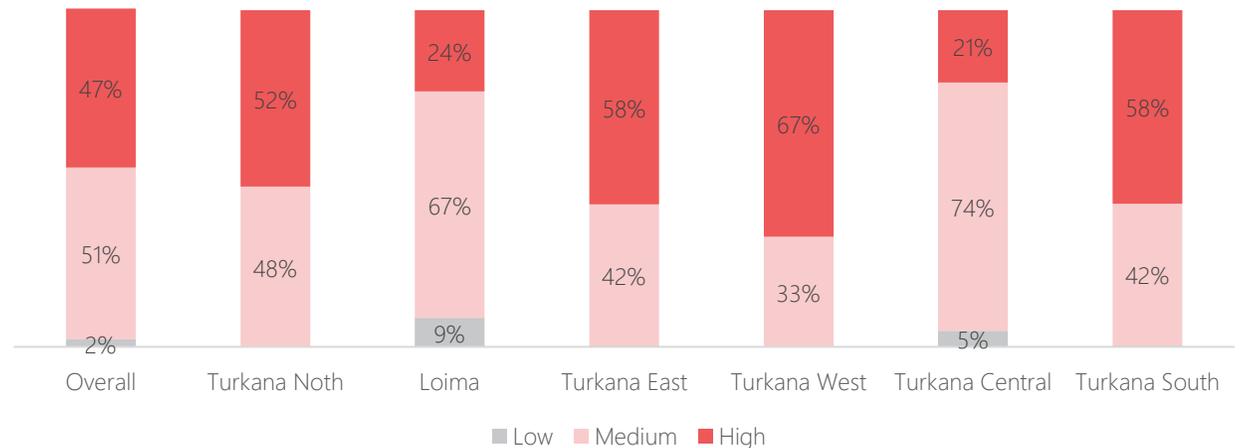
Average rCSI 13.25

% of HHs per rCSI per subcounty, Mandera



Average rCSI 17.48

% of HHs per rCSI per subcounty, Turkana



Livelihoods

Livelihood coping strategy index (LCSI): is measured to understand longer-term HH coping capacities. It is used to classify HHs into four groups: HHs using emergency, crisis, stress, or neutral coping strategies to cope with livelihood gaps in the 30 days prior to data collection.

The use of emergency, crisis, or stress-level LCS typically reduces HHs' overall resilience and assets, in turn increasing the likelihood of food insecurity.

All four counties were found to have more than 20% of HHs using emergency levels coping strategies indicative of IPC phase 4 levels.) with Turkana and Mandera having half of the population using the emergency levels coping strategies.

The most reported negative livelihood coping strategies adopted because of a lack of food or money to buy food:

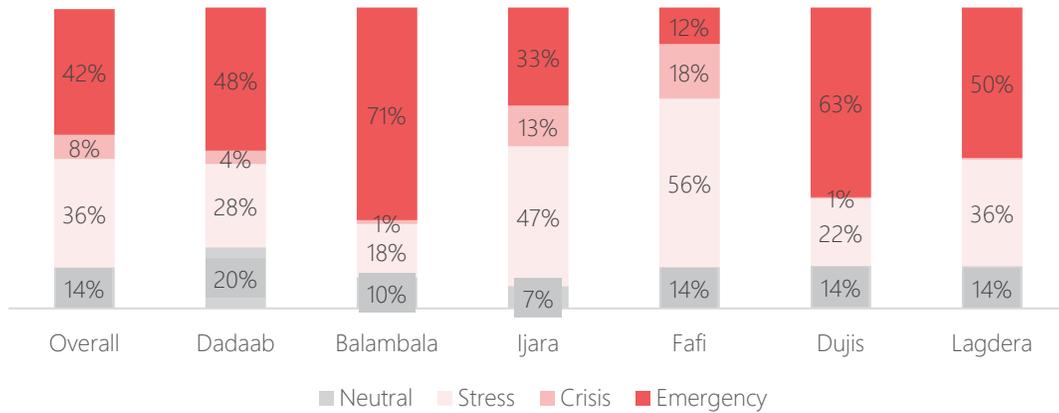
	Mandera	Garissa	Marsabit	Turkana
Purchase food on credit	67%	57%	68%	76%
Borrow money	50%	55%	50%	48%
Begging	34%	21%	12%	47%
Spent savings	14%	10%	21%	15%
Sold more animals than usual	39%	19%	27%	18%

Top reported reasons for using LCS in the last 30 days prior to data collection:

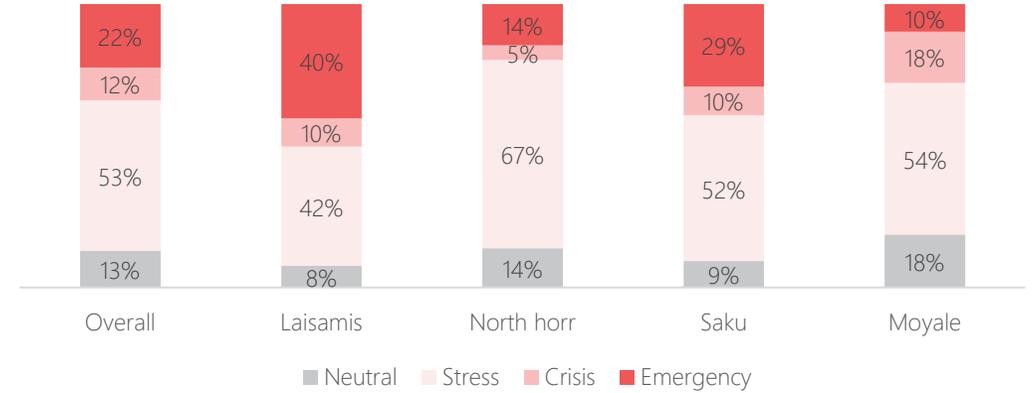
	Mandera	Garissa	Marsabit	Turkana
To access food	92%	98%	99%	99%
To access healthcare	67%	70%	59%	49%
To access shelter	62%	44%	28%	15%
To access education	42%	17%	55%	35%

Livelihoods (LCSI)

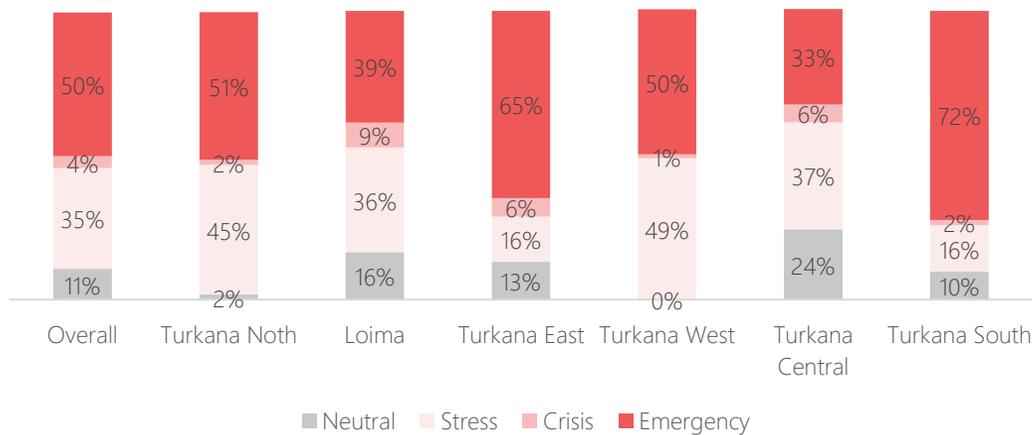
% of HHs per LCSI per subcounty, Garissa



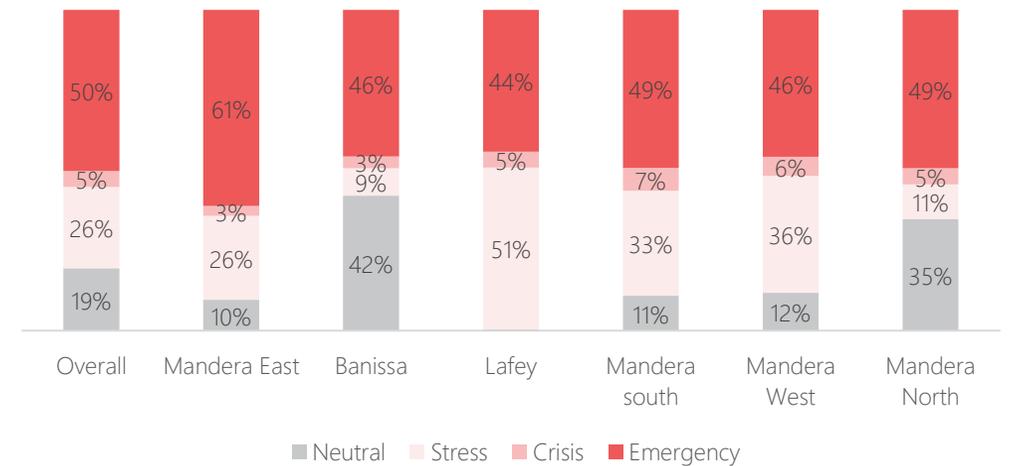
% of HHs per LCSI per subcounty, Marsabit



% of HHs per LCSI per subcounty, Turkana



% of HHs per LCSI per subcounty, Mandera

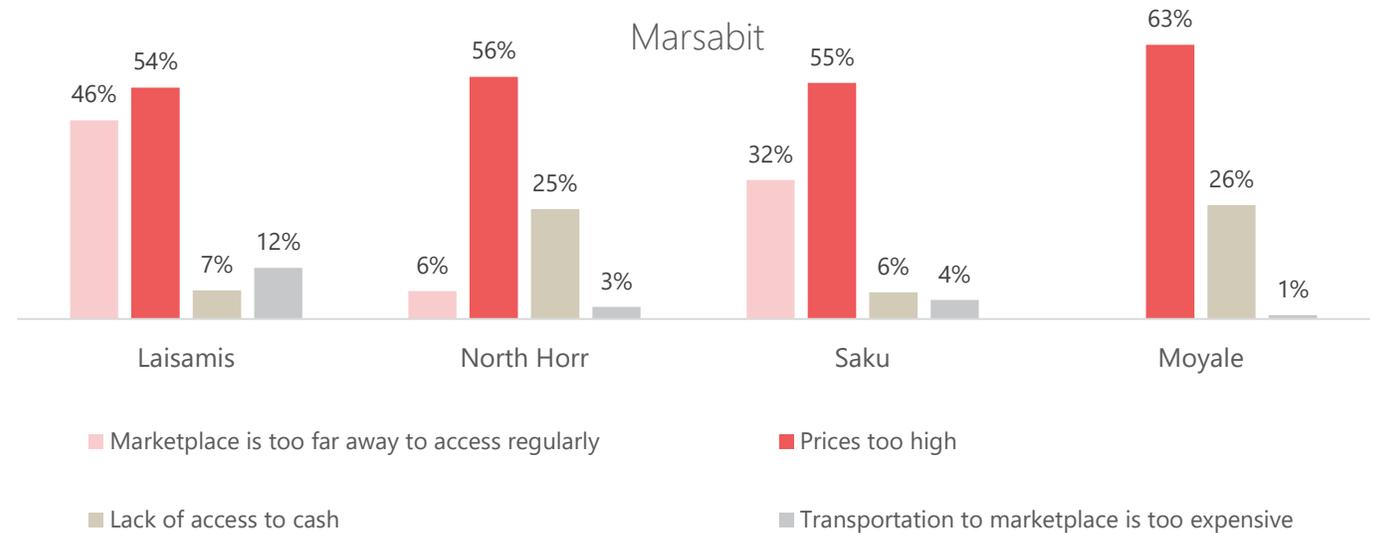
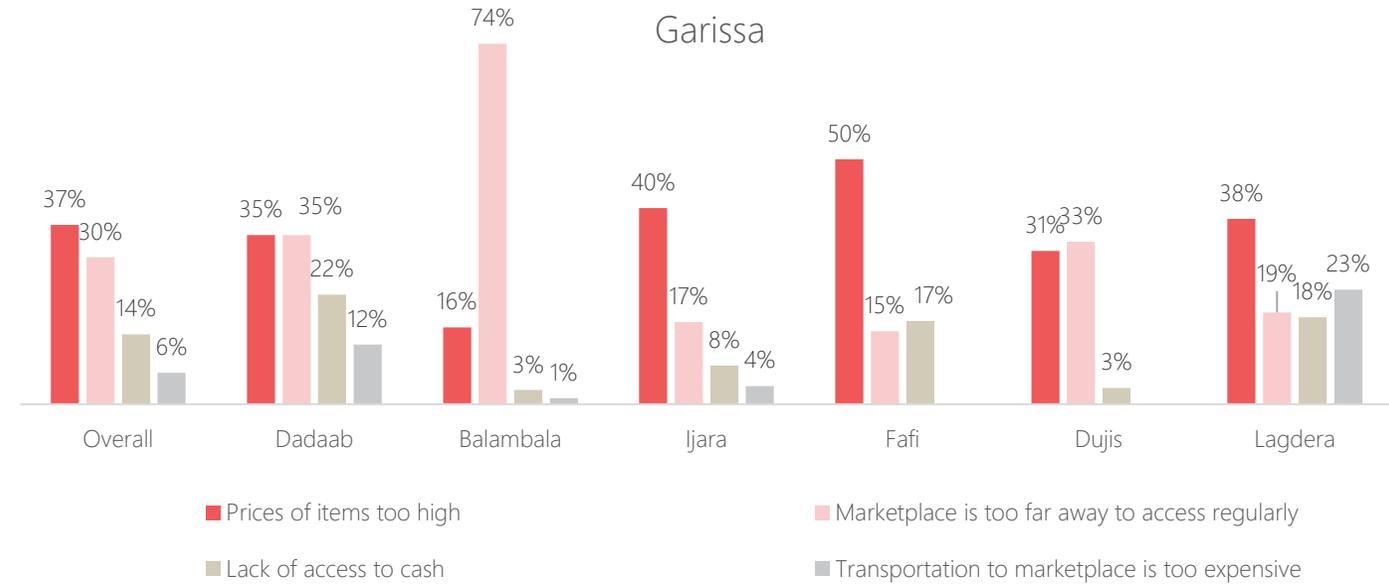


Livelihoods

% of HHs reporting experiencing challenges when accessing marketplaces in the 30 days prior to data collection, per county:

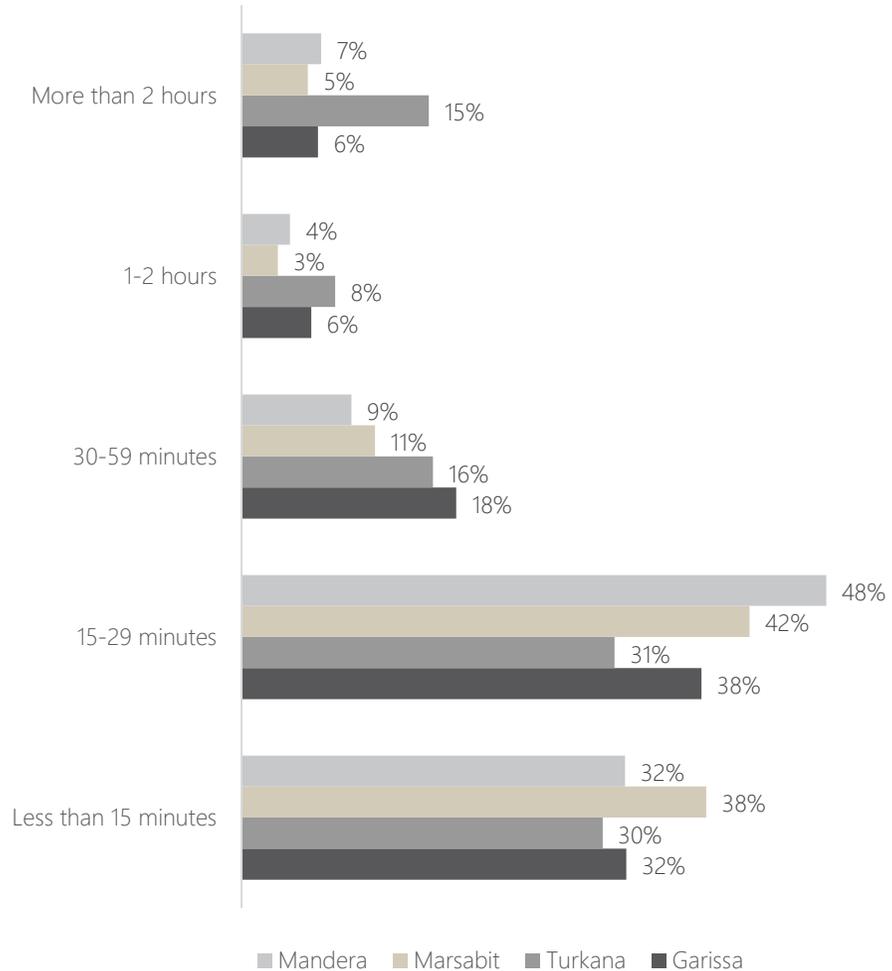
Garissa	66%
Marsabit	70%
Mandera	48%
Turkana	71%

Top reported difficulties in accessing marketplaces by % of HHs in the 30 days prior to data collection:

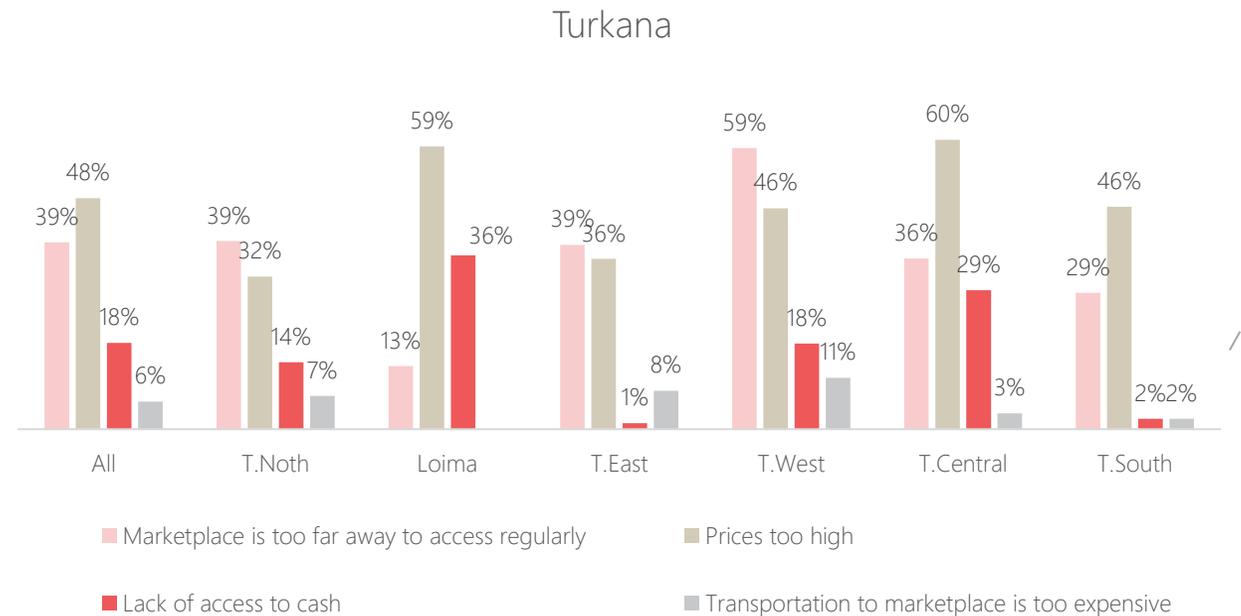
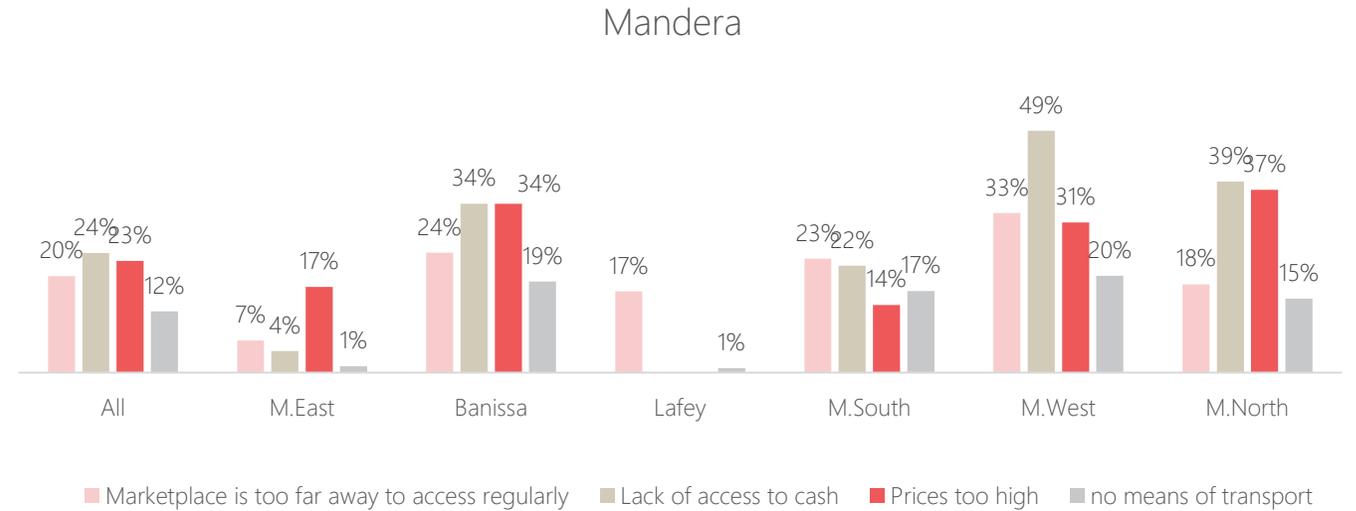


Livelihoods

% of HHs by reported time taken to reach the nearest marketplace on foot in the 30 days prior to data collection:



Top reported difficulties in accessing marketplaces by % of HHs in the 30 days prior to data collection:



Livelihoods

Average monthly income in Kenya Shillings (KES) in the 30 days prior to data collection, per county:

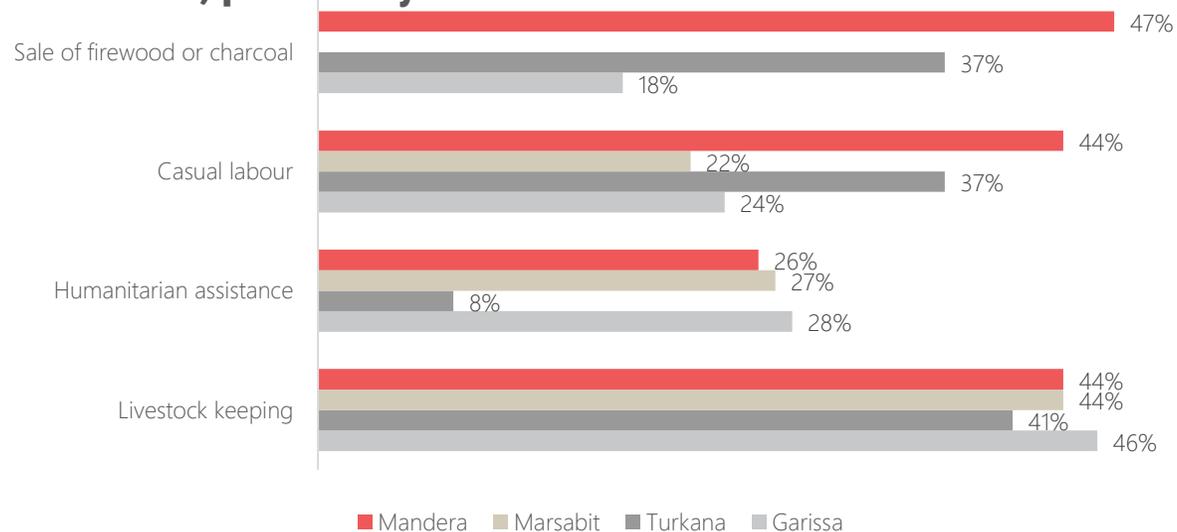
Garissa	7,615
Marsabit	12,540
Mandera	9,351
Turkana	7,688

Average monthly expenditure in KES in the 30 days prior to data collection, per county:

Garissa	11,259
Marsabit	12,576
Mandera	13,202
Turkana	6,585

Expenditure is higher than income which likely results in debts and unsustainable, negative coping such as begging and ultimately eroding their coping capacities.

% of HHs per most top reported source of income in the 30 days prior to data collection, per county:



% of monthly expenditure share in the 30 days prior to data collection:

	Garissa	Mandera	Marsabit	Turkana
Food	60%	51%	43%	65%
Shelter/rent	27%	14%	27%	24%
Repayment of debt for food	21%	20%	15%	21%
Education	-	10%	32%	22%

Livelihoods

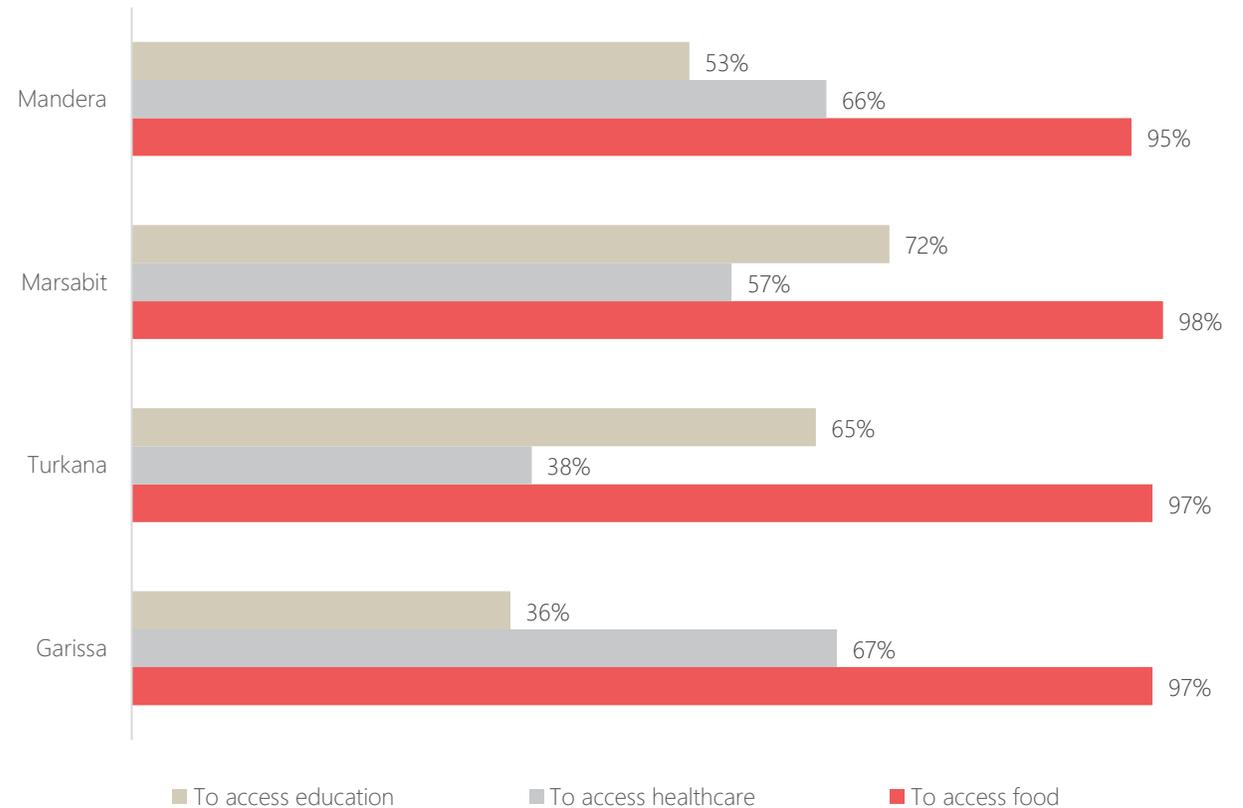
% of HHs reporting being indebted and average debt in KES at the time of data collection, per county:

Garissa	89%	17,697
Marsabit	80%	9,920
Mandera	88%	1,3197
Turkana	62%	5,222

% of HHs reporting having non-monetary debts (mostly food, education and health care) at the time of data collection, per county:

Garissa	72%
Marsabit	66%
Mandera	52%
Turkana	59%

Top reported reasons for taking on debt at the time of data collection:



A considerable proportion of HHs in Garissa (46%), and Mandera (11%), had to borrow money to pay other debts in the 3 months prior to data collection indicative of debt dependency and difficulty to pay debts.



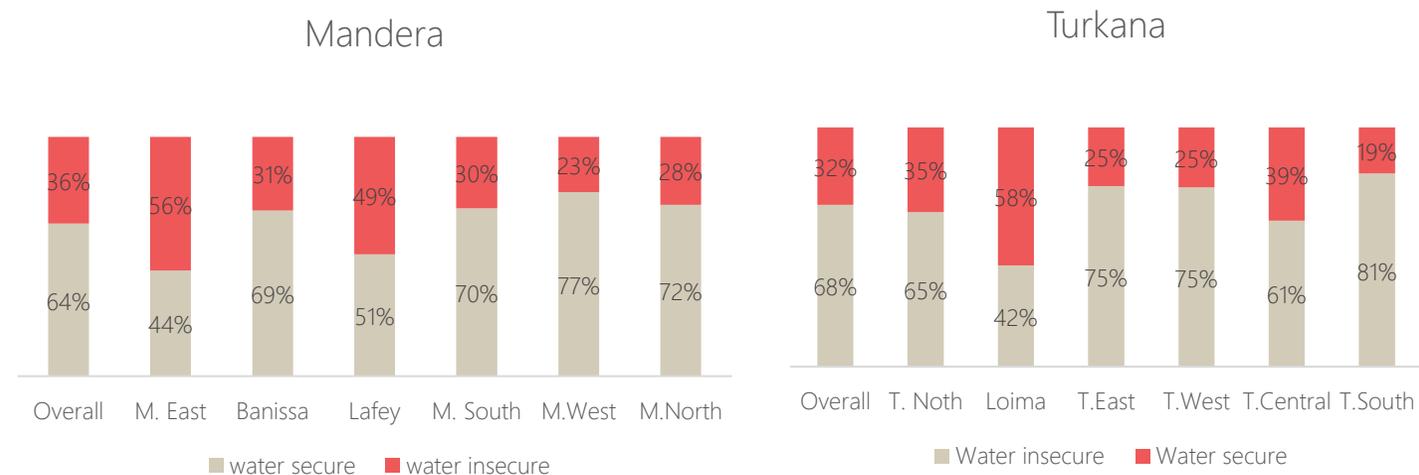
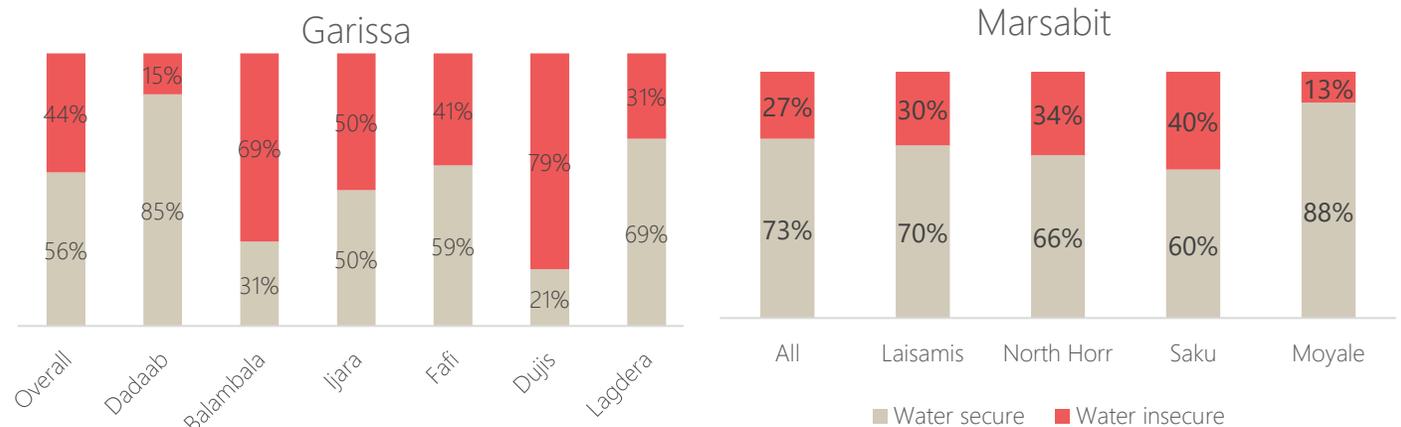
Top reported sources of drinking water at the time of data collection:

	Garissa	Marsabit	Mandera	Turkana
Handpumps/boreholes	21%	17%	18%	9%
Public tap/standpipe	9%	19%	-	33%
Dam	7%	7%	35%	-
Rain water	-	22%	-	-

% of HHs reporting taking more than 30 minutes to go to the main water source, fetch water, and return to the premises in the 30 days prior to data collection, per county:

Garissa	16%	Balambala
Marsabit	19%	Laisamis
Mandera	13%	M.west
Turkana	39%	T.west

% of HHs per water security based on HWISE in the 30 days prior to data collection:





WASH

HHs in Turkana (75%), Garissa (55%), Mandera (55%) and Marsabit (52%) reported experiencing challenges related to water access in the 30 days prior to data collection.

Top reported challenges related to access to water at the time of data collection:

	Turkana	Marsabit	Garissa	Mandera
Waterpoints are too far	23%	12%	16%	12%
Safety concerns at main water points	6%	11%	-	11%
Insufficient number of water points	37%	9%	13%	-
Not enough containers to store the water	18%	22%	11%	22%

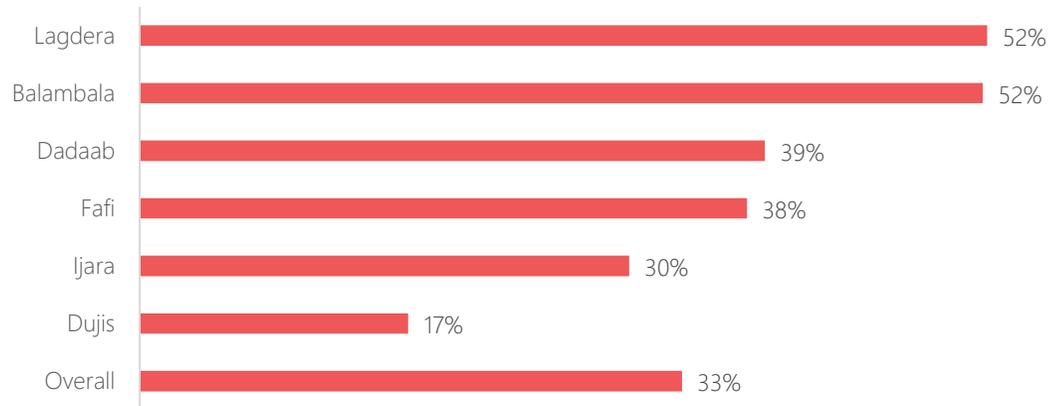
Top reported coping strategies for lack of adequate water in the 30 days prior to data collection:

	Mandera	Garissa	Marsabit	Turkana
Rely on less preferred (unimproved water sources) for drinking	45%	28%	25%	40%
Rely on surface water for drinking water	29%	19%	11%	37%
Rely on less preferred (unimproved) for other purposes	15%	-	13%	26%
Rely on surface water for other purposes such as cooking and washing	14%	-	-	22%
Fetch water at a source further than the usual one	13%	12%	40%	20%
Send children to fetch water	7%	12%	-	12%

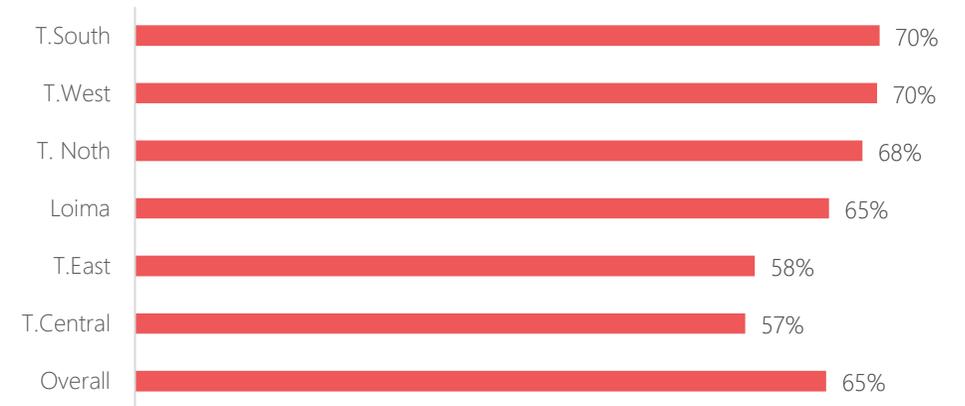
Sanitation & Hygiene

% of HHs reporting not having access to a sanitation facility or using open field or bush for defecation at the time of data collection:

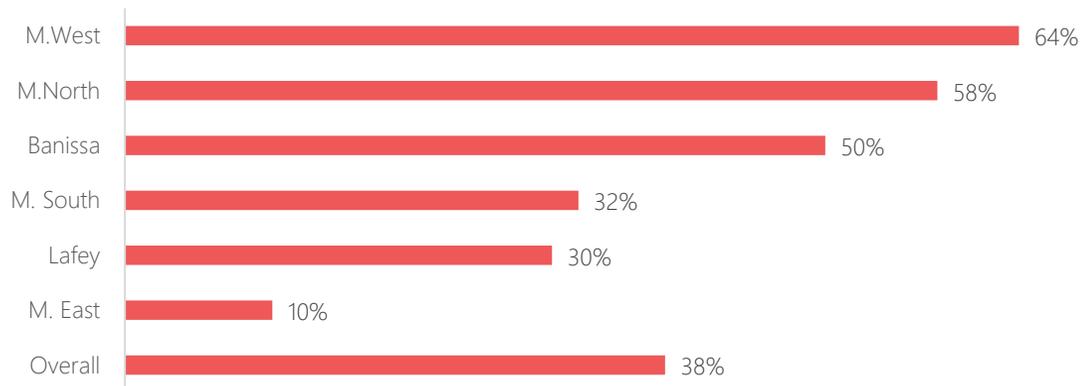
Garissa



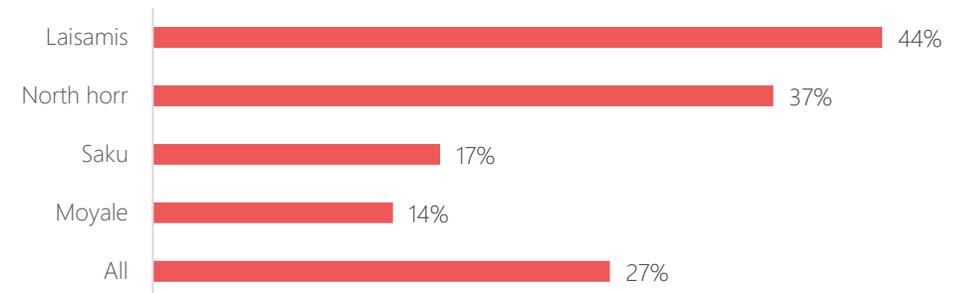
Turkana



Mandera



Marsabit



Sanitation & hygiene

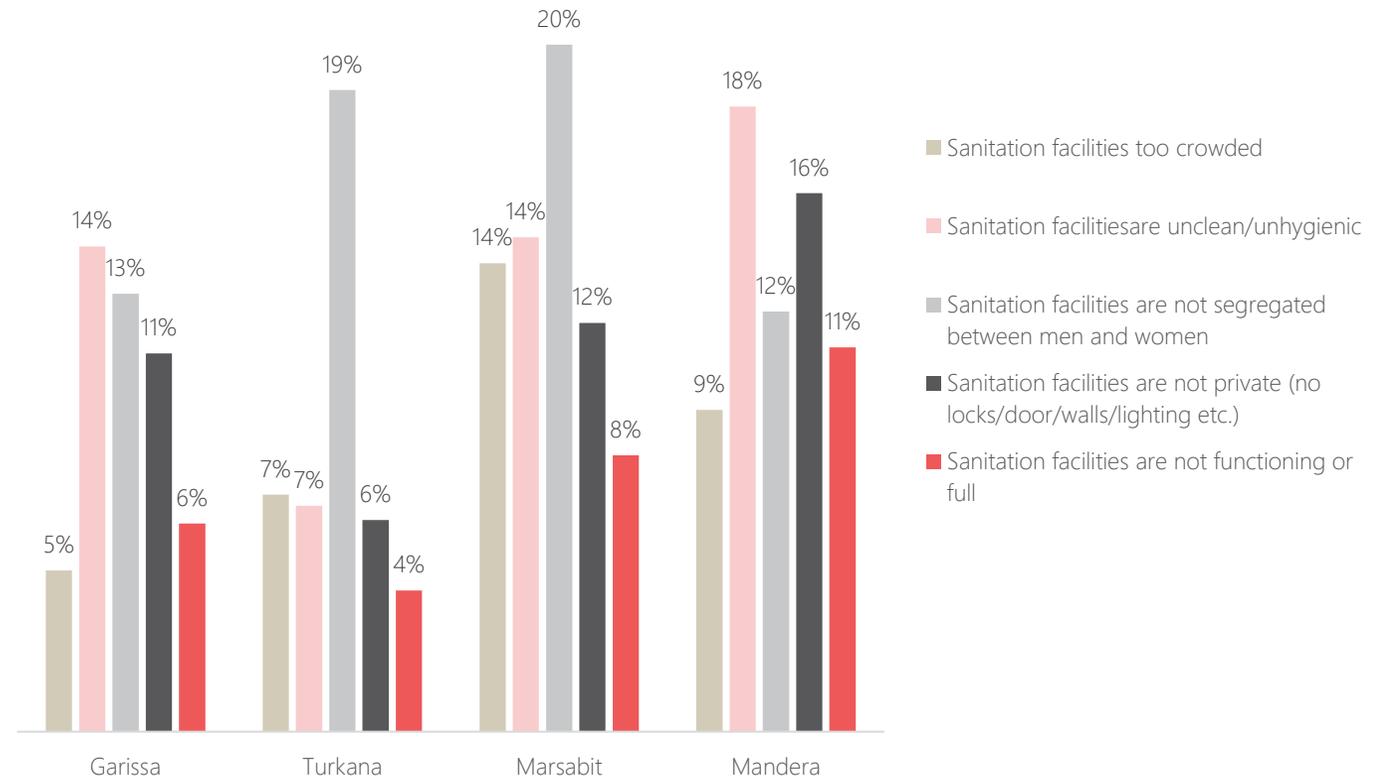
A considerable proportion of HHs in Marsabit (42%), Turkana (27%), Mandera (24%) and Garissa (21%) reported sharing latrines with other HHs at the time of data collection.

On average, one latrine was shared among five HHs in Garissa and among four HHs in the other three counties.

% of HHs reporting experiencing problems related to sanitation facilities at the time of data collection per county:

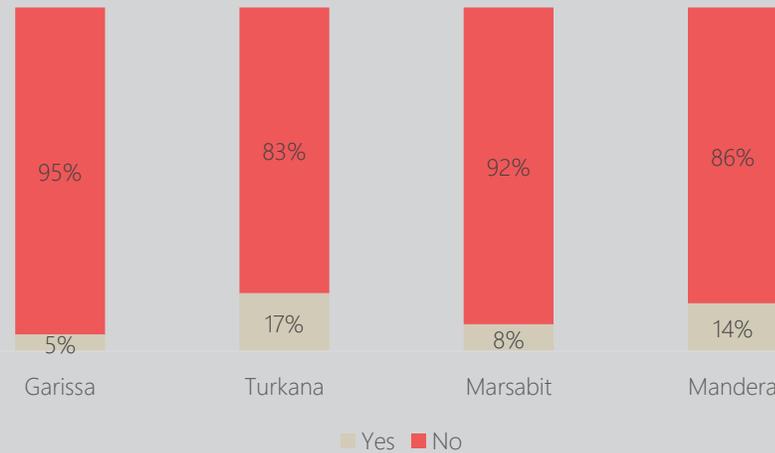
Garissa	37%
Marsabit	51%
Mandera	40%
Turkana	30%

Top reported problems related to sanitation facility:



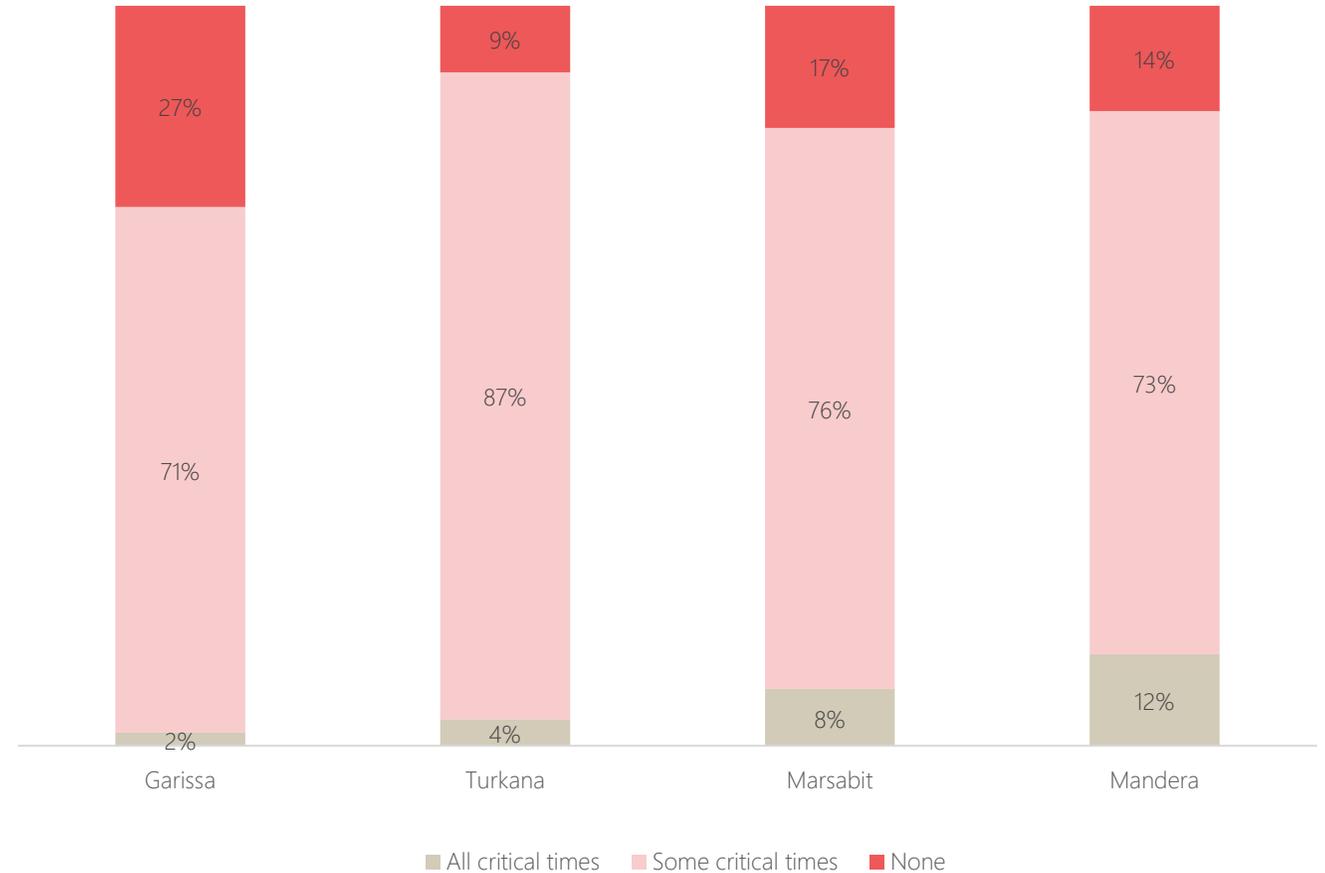
Sanitation & hygiene

% of HHs with fixed hand-washing stations per county:



- **Over 90%** of HHs in Garissa, Mandera and Marsabit, and 67% in Turkana who had fixed handwashing stations reportedly had water at the stations.
- A high proportion of HHs in Turkana (67%), Garissa (73%), Marsabit (85%) and Mandera (90%) reportedly had soap at the hand-washing stations

% HHs by members washing hands during critical handwashing occasions.



Health and nutrition

% of HHs reporting having had at least one member with a health problem and in need of accessing healthcare in the 3 months prior to data collection:

	Needed
Garissa	16%
Marsabit	14%
Mandera	18%
Turkana	23%

Government health facilities were the top reported health facilities accessed by over 80% of HHs across the four counties who accessed health care when they need it in the 3 months prior to data collection.

Of the HHs that accessed health care, 74% of HHs reported experiencing challenges when accessing healthcare when needed.

Top reported challenges experienced by HHs when accessing healthcare in the 3 months preceding data collection:

	Mandera	Garissa	Marsabit	Turkana
Long waiting time	9%	18%	28%	30%
Could not afford consultation cost	10%	15%	8%	17%
Could not afford treatment cost	19%	27%	28%	21%
Specific medicine/treatment or service needed was not available	31%	15%	62%	21%
Could not afford cost of transport	7%	12%	8%	5%

About a third of them (37%) were **not able to access the needed health care in the 3 months prior to data collection. Mainly due to:**

Long waiting time for services 21%
 Could not afford cost of treatment 12%

Health and nutrition

% of HHs reporting children aged below 5 years and pregnant and lactating women (PLW) having been screened for malnutrition in the in the 6 months prior to data collection

	Children	PLW
Garissa	51%	59%
Marsabit	94%	93%
Mandera	47%	57%
Turkana	57 %	48%

The screening for malnutrition was mostly done by:

- Community health workers
- Community health volunteers
- Medical health workers

Number of children aged below 5 years per county at the time of data collection:

Garissa	329
Marsabit	473
Mandera	1,063
Turkana	1,142

% of children below 5 years that had received vaccination at the time of data collection.



The most reported barrier to accessing vaccination is the far distance to health facilities.

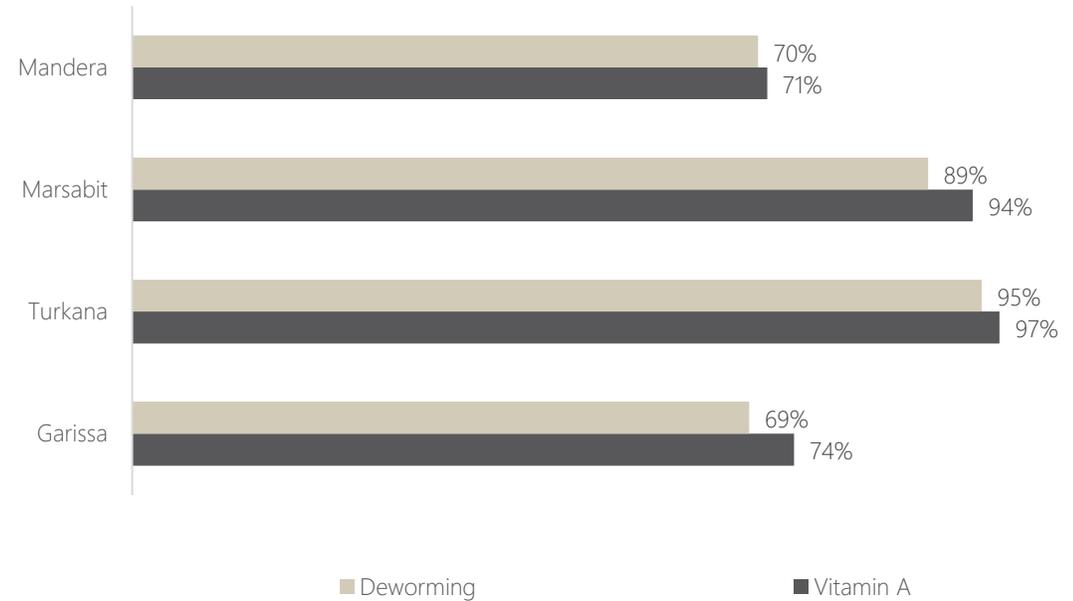
Health and nutrition

% of children below 5 years that had reportedly suffered from illness in the 2 weeks prior to data collection

	Turkana	Garissa	Marsabit	Mandera
Fever	25%	23%	17%	25%
Diarrhea	10%	21%	5%	11%
Cough	22%	11%	8%	10%

Of these, **99%, 97%, 93% and 89%** in Turkana, Mandera, Garissa and Marsabit sought for healthcare assistance. They mostly sought the healthcare assistance in government health facilities.

% of children below 5 years that had reportedly received vitamin A and deworming in the in the 6 months prior to data collection:



The most reported barriers for accessing vitamin A and deworming were:

- Far distance to health facilities.
- Not knowing where to seek for the services
- Child not being at home during community outreach

Health and nutrition

Number of children aged below 2 years per county at the time of data collection

Garissa	41
Marsabit	134
Mandera	500
Turkana	500

Indicator	Garissa	Turkana	Marsabit	Mandera
Timely initiation of breastfeeding- within 1 st hour	52%	96%	93%	83%
Predominant breastfeeding under 6 months-breast fed within 24 hours prior to data collection	99%	80%	93%	80%
Continued breastfeeding at 1 year	95%	84%	92%	91%
Timely introduction of solid, semi- solid or soft foods (6-8 months)	100%	89%	91%	94%
Minimum acceptable diet (good)	7%	20%	20%	6%
Minimum dietary diversity score (good)	17%	21%	20%	6%
Minimum meal frequency score (good)	58%	71%	88%	76%
Child under treatment for malnutrition	45%	18%	40%	17%

Health and nutrition

Number of HH members per county at the time of data collection:¹

County	Number of HH members
Garissa	6,656
Mandera	7,327
Marsabit	4,822
Turkana	8,391
Total	27,196

% of HH members with any difficulty/ disability per county at the time of data collection:¹

Garissa	8%
Marsabit	3%
Mandera	4%
Turkana	5%

Number of HH members experiencing any difficulty with the following at the time of data collection:¹

Disability	Garissa	Turkana	Marsabit	Mandera
Seeing	250	139	94	64
Hearing	192	83	46	45
Remembering/ concentrating	117	32	24	41
Selfcare	135	163	20	199
Walking	210	74	33	91
Communicating	132	17	26	60

Summary of Key Education Findings (preliminary)

- A high proportion of school-aged children in Garissa (83%), Turkana (86%), Mandera (85%) and Marsabit (81%) reportedly **enrolled in formal school** during the 2022-2023 school year
- **Almost all children (99%) enrolled in formal education, reportedly attended school regularly**, i.e. at least 4 days in a week during the 2022-2023 school year.
- Top reported reasons for dropping out of school:¹

Cannot afford education related costs

- Turkana 68%
- Marsabit 37%

Children helping at home

- Marsabit 35%
- Garissa 31%
- Mandera 26%
- Turkana 19%

Lack of interest/priority from parents

- Mandera 20%
- Marsabit 17%

Prefer that they attend madrasa classes first

- Mandera 31%

Schools far from residence

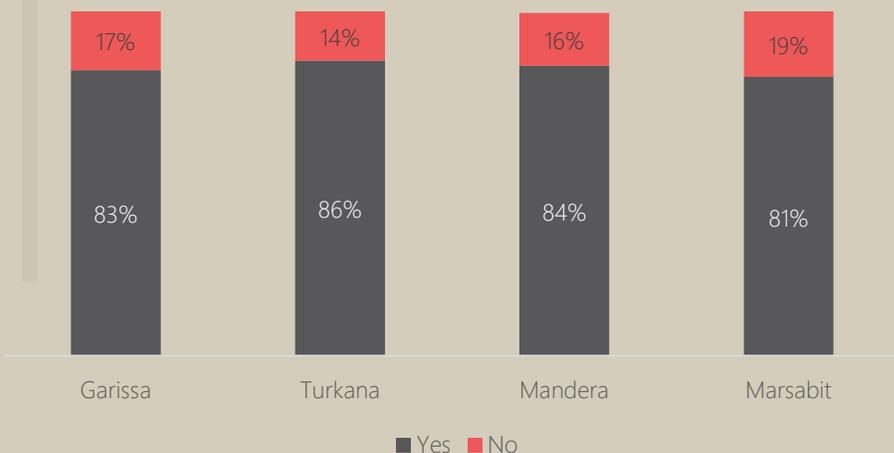
- Garissa 26%

Education

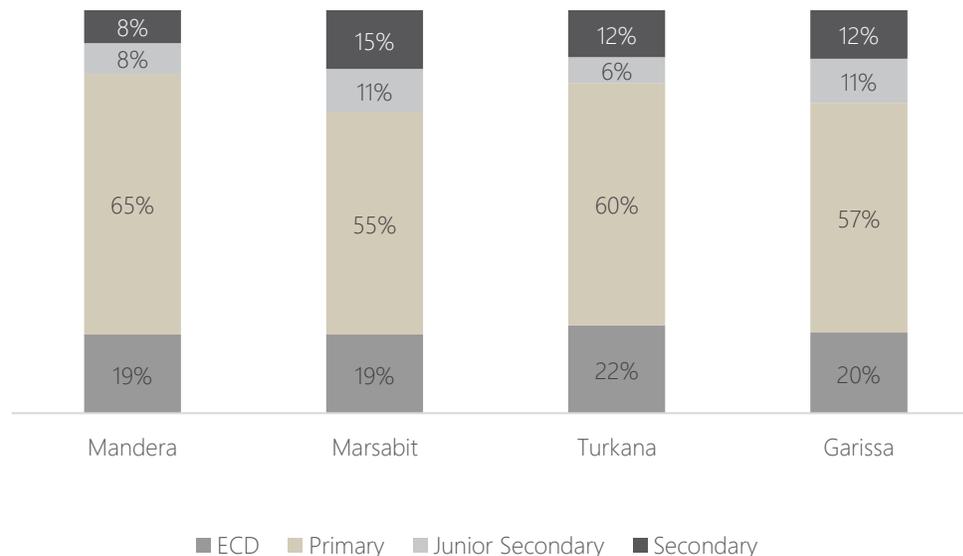
Number of school-aged children per county.

Garissa	2,714
Marsabit	2,080
Mandera	3,586
Turkana	4,881

% Of school-aged children reportedly enrolled in formal school during the 2022-2023 school year:



% Of school-aged children reportedly enrolled in formal school during the 2022-2023 school year, per education level, per county:



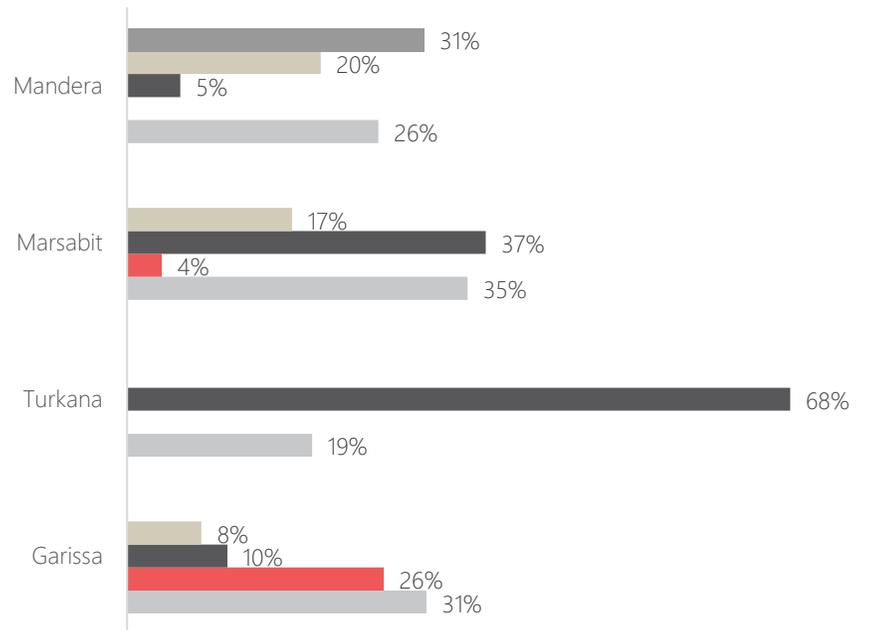
99% of children enrolled in formal education, reportedly attended school regularly. i.e. at least 4 days in a week during the 2022-2023 school year.

% of children not enrolled in formal education, per last time they were enrolled:

	Garissa	Turkana	Marsabit	Mandera
Never enrolled	80%	81%	82%	90%
Less than 2 year ago	17%	10%	14%	9%
More than 2 years ago	3%	9%	4%	1%

Education

Top reported reasons for dropping out of school:¹



- Prefer that they first attend madrasa classes first
- Lack of interest/priority from parents
- Cannot afford education-related costs (e.g. tuition, supplies, transportation)
- Schools are far from residence
- Children helping at home (look after livestock or farming)

HHs in Turkana (29%), Garissa (26%), Mandera (14%) and Marsabit(7%) reported having children aged below 4 years attending school mainly due to:

	Garissa	Turkana	Marsabit	Mandera
Children's interest in school	46%	81%	30%	56%
Interest from parent/caregiver	8%	10%	81%	16%
To access food	32%	9%	10%	14%
Caregiver not at home	8%	4%	14%	10%
To access water	42%	19%		5%

Shelter

- A considerable proportion of HHs in Garissa (12%), Turkana (6%), Marsabit (4%) and Mandera (3%) **reported that their main shelter had major damages and was at risk of collapsing.**
- **Firewood and charcoal** were the main reported sources of fuel for cooking as reported by HHs in Garissa (98%), Turkana (99%), Marsabit (95%) and Mandera (97%).
- The use and search for firewood reportedly resulted in:
 - Injuries attained when fetching firewood
 - Health issues related to smoke from firewood
 - Increased fear of being kidnapped when fetching firewood

AAP

- Top reported priority needs at the time of data collection

	Turkana	Garissa	Marsabit	Mandera
Food	94%	96%	97%	97%
Healthcare	41%	77%	64%	71%
Shelter/housing	27%	73%	23%	63%
Livelihood support	39%	11%	47%	11%

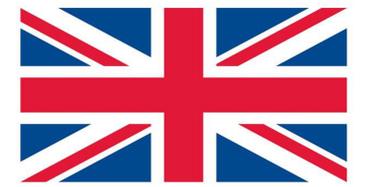
- Over **60%** of HHs across the four counties had reportedly not received any type of humanitarian assistance in the 6 months prior to data collection.
- Over 30% of HHs reported not being satisfied with the assistance received mainly because the **assistance was not sufficient**.



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