



General data of the country

a. Data

Country	Kenya
Population	48.46 million
IHDI	0.391
Maternal mortality	510
Gender-related Development Index	0.919
Population within UNHCR mandate	2.056.291
INFORM index	5.9
Fragile State index	96.4
GINI Index	48.5
Net official development assistance received	1.620,000

b. Humanitarian law instruments ratified by the country

- Mine Ban Treaty / Status: 23/01/2011
- Convention on Cluster Munitions / Status: 03/12/2008
- UN Convention on the Rights of Persons with Disabilities / Status: 15/05/2008

c. Geopolitical analysis

In early 2017 the condition in arid regions of Kenya deteriorated significantly due to drought. This led to heightened food insecurity, decreased health and nutrition status at a time when political instability has also increased.

Within this context, the welfare of people with disabilities and vulnerable people is at a greater risk of neglect and provision of services such as education and health.

The country is now focusing on the 2022 elections and the achievement of the big five Jubilee aspirations; accessible and affordable healthcare, manufacturing, food security and affordable housing within the devolved county governments.

Kenya is ranked 146 out of the 188 countries on the Human Development Index. Increased circumstances of gender inequality have had a negative impact on inclusive human development and economic growth of the population especially in areas such as the labour markets, access to education and appropriate healthcare. Correspondingly, as a recognized vulnerable group, the rights of people



with disabilities are oftentimes neglected, which also contributes to increased poverty and sub-standard living conditions.

The country also has a large population of refugees, which is concentrated in the North-Eastern and North-Western regions. Dadaab camp has a population of around 240,000 refugees, mainly Somalis fleeing from civil war. Kakuma camp and Kalobeyei settlements host more than 180,000 South Sudanese refugees. These vulnerable populations are in need of healthcare and food. People with disabilities living in these situations face additional challenges.

Presence of HI in the country

In 1992 HI launched its activities in Kenya through an emergency food aid program in Garissa, following the famine and civil war in Somalia. For the next four years, HI focused on improving surgical treatment at Garissa Provincial Hospital for refugees and support to the primary health care system in neighbouring communities. Since 2001, the association in Kenya has been building the capacities of local partners at the national, provincial and community levels. Since 2006, HI has taken a leading role in the development of HIV&AIDS awareness, prevention and treatment for persons with disabilities in the country. It began bolstering its support for the physical rehabilitation and education of children with disabilities in Kibera and Dandora informal settlement areas and persons with disabilities in the Dadaab refugee camps in 2007. In 2009 HI also implemented an inclusive education project in Nairobi aimed at ensuring marginalized children have equal access to education opportunities.






In August 2013, the organization also launched a regional project in Kenya and Tanzania, which contributes to the implementation of the International Convention of People with Disabilities. An on-going Mother and Child Health Care Project was launched in informal settlements in 2014 which seeks to improve the health status of new-born children in marginalized populations within Nairobi. In the same year an Armed Violence Project was started in North-Western Kenya in a bid to reduce the incidences of violence within the region. In 2016, a Road Safety Health and prevention project was also introduced in a bid to advocate for legislation ensuring the safety of children on Kenyan roads.



Projects

Domain	Title of action	Donor	Duration
HEALTH AND PREVENTION	Empowerment of civil society partners for the evolution of disability-friendly mother and child health services	EU- MNCH	11/01/14 – 31/10/18
HEALTH AND PREVENTION	Child protection-confronting sexual violence against children including those with disability	UBUNTU PHASE 2-AFD	01/01/16 – 31/12/18
INCLUSIVE POLICIES	Promoting the role of youth in peaceful elections	DRL SAFERWORLD	04/01/17 – 31/12/18
SOCIAL INCLUSION	Inclusive education	PORTICUS	07/01/18 – 30/06/19
SOCIAL INCLUSION	Enhanced protection, empowerment, and improvement of quality of life of persons with disabilities and older persons in Dadaab and refugee hosting communities	BPRM DADAAB-KAKUMA	09/01/18 – 31/08/19

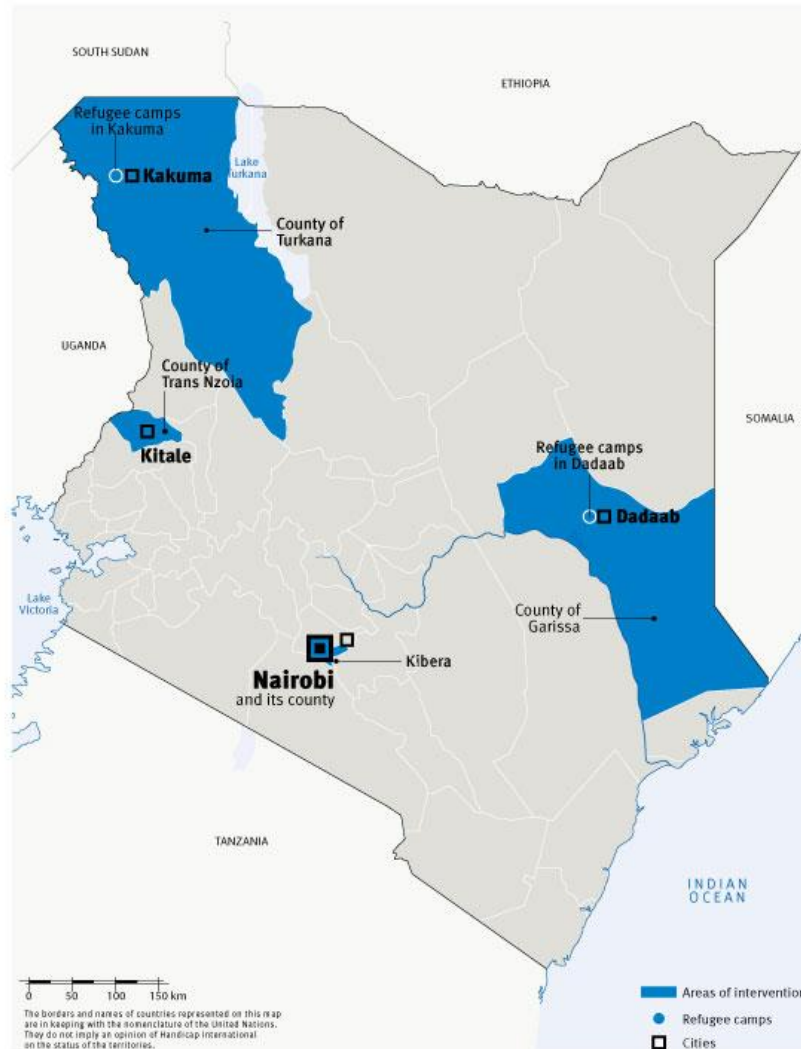
Donors

EU	
AFD	
Bureau of Population, Refugees, and Migration	
DRL via SAFERWORLD	
PORTICUS	




HI team in Kenya

The program currently consists of 64 staff.



Kenya



Projects in detail

Sector of intervention	Objectives of the projects in this sector	Types of intervention	Beneficiaries (nature and numbers)	Operational partners	Location
 <p>Functional rehabilitation</p>	<p>Support to the Most Vulnerable People in Dadaab and Kakuma Refugee Camp</p>	<p>Enhance protection and boost self-reliance of the most vulnerable refugees within the Camps</p> <p>Improving protection of persons with disabilities and reducing their vulnerability through increased awareness and access to protection mechanisms as well as key mainstream humanitarian services</p> <p>Ensuring persons with disabilities' access to health and rehabilitation services to improve their overall well-being, inclusion, and participation</p>	<p>In Dadaab: 4,967 people with disabilities and the older persons (2,256 adult PWD, 1,338 children with disabilities, 623 older persons, 250 refugee hosting community PWD, 500 anticipated influx)</p> <p>In Kakuma: 5,605 in Kakuma, 800 in Kalobeyi and 300 host communities</p>	<p>The partners in both camps include: UNHCR and humanitarian operators such as IRC, NRC, LWF, DRC</p>	<p>IFO, IFO 2 and Dagahaley camps of Dadaab</p> <p>Kakuma 1, Kakuma 2, Kakuma 3, Kakuma 4, Kalobeyi of Kakuma refugee camp.</p>
  <p>Health & prevention</p>	<p>Empowerment of Civil Society Partners for the Evolution of Disability-Friendly Mother and Child Health Services (MNCH)</p>	<p>Improving the health status of marginalized mothers, new-borns and young children in Kenya</p> <p>Improving the long-term capacity of civil society in partnership with state actors, to implement effective Mother and Child Health (MCH), nutrition and family planning services for marginalized populations in Nairobi, especially those with disabilities.</p>	<p>3 Local civil society organizations: ANDY, NFSS, Light and Hope</p> <ul style="list-style-type: none"> - At least 5 local Disabled People's Organizations-DPO (2,000 Youth with Disabilities) and 2 Parents Groups of Children with Disabilities (150 members) - At least 20 staff from Kasarani and Langata Health Districts - At least 1,100 community health workers and community health extension workers 	<p>Action Network for the Disabled Youth (ANDY), Nairobi Family Support Services (NFSS), Light and Hope for Children with Disabilities</p>	<p>Kibera and Korogoccio on the Empowerment of Civil Society Partners for the Evolution of Disability-Friendly Mother and Child Health Services</p>



			- Kenya Medical Training College- KMTTC (educates 80% of Kenya's health care providers)		
 Protection	Stopping Sexual Violence against Children with Disabilities	Empowering children, families, communities, services and authorities to protect children against sexual violence Help survivors and their parents/guardians access immediate assistance and promote their sustainable reintegration and inclusion. Enforce the rights of children,	- 400 sexual violence survivor children and/or isolated disabled children - 237 children included in activities linked with children's participation - 2 local associations locales will benefit from trainings - 200 family members will benefit from positive parenting training - 120 services providers - 30 local administrators and community leaders - 60 positive masculinity champions - about 172 active community members - at least 30 national authorities, OSC, international organizations and donors representatives	Catholic Diocese of Kitale (CDK), Chanuka Youth Development Programme (CYDP) and Tuwani Community Gender Representative -Community Based Organisation (TUWANI CGR)	Kitale, Transzoia county
 Social inclusion	Professional Fellows Program on Inclusive Disability Employment in Kenya, Uganda and Tanzania Drought Emergency Response in Moyale and Mandera	Help prepare the next generation of leaders of inclusive disability employment advocacy for their critical roles in empowering people with disabilities to succeed economically Ensure men, women, boys and girls with disabilities and the elderly persons benefit directly from the available services as provided by the bright consortium through mainstreaming of disability in	20 mid-level professionals from Kenya, Tanzania, and Uganda (Professional Fellows) Eight U.S. professionals selected from among hosts to participate in a two- week trip to visit their respective Fellow consortium partners	AUCD, ICI	Nairobi



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