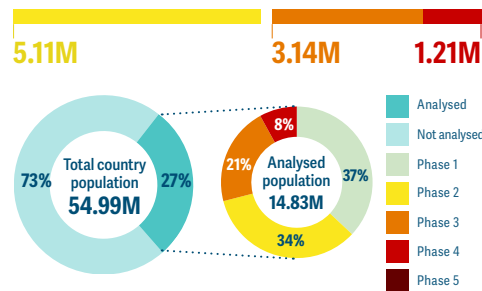


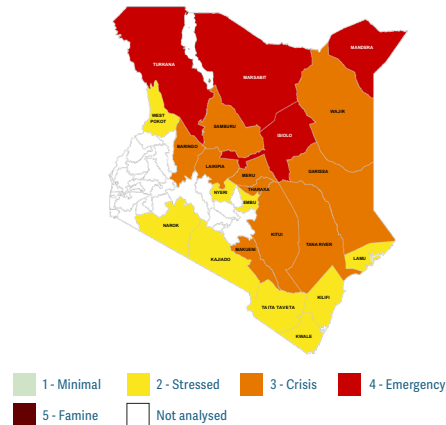
Kenya

ACUTE FOOD INSECURITY PEAK 2022

4.35M people or **29%** of the analysed population in IPC Phase 3 or above, **October–December 2022**



IPC acute food insecurity situation, October–December 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: Kenya IPC TWG, September 2022.

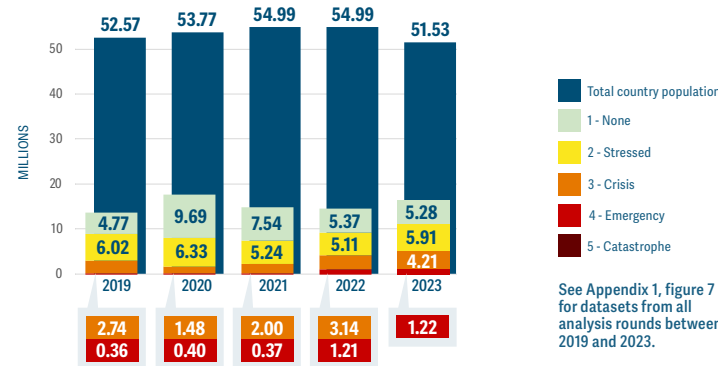
Food crisis overview

The number of people facing Crisis or worse (IPC Phase 3 or above) from October–December 2022 was almost 90 percent higher than in the last quarter of 2021 in the arid and semi-arid lands (ASALs), which account for 80 percent of Kenya’s land mass and 27 percent of its population. At 4.4 million, this was the highest in the history of IPC analyses (IPC, September 2022).

The number of people in Emergency (IPC Phase 4) has increased nearly fourfold since 2021, from 368 000 to 1.2 million. The worst-affected counties were Isiolo, Mandera, Marsabit and Turkana, all of which were classified in IPC Phase 4.

The worsening situation is attributed primarily to the cumulative effect of five consecutive poor rainy seasons (both long and short rains), as well as food price volatility following high national demand, low local availability, high fuel costs and supply disruptions linked to the war in Ukraine (IPC, September 2022).

Numbers of people by phase of acute food insecurity, 2019–2023



Source: Kenya IPC TWG.

Further deterioration projected for 2023

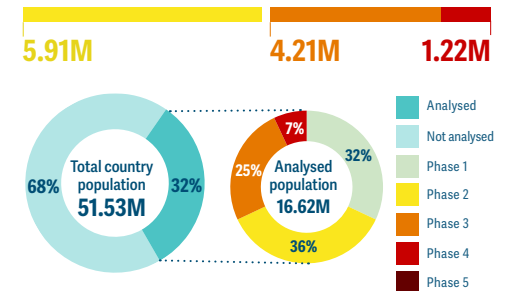
The food security situation is expected to deteriorate further during at least the first half of 2023, especially in northern and northeastern areas as the March–May long rains will likely be below average. Counties of Turkana, Mandera, Marsabit, Wajir and Garissa – predominantly pastoral areas – are likely to deteriorate from IPC Phase 3 to IPC Phase 4 (IPC, February 2023). Above-average food prices are likely to persist through 2023 driven by reduced local production and high import costs that will further erode household resilience and capacity to meet food needs (FEWS NET, November 2022), as well as affecting terms of trade.

Acute food insecurity since 2016

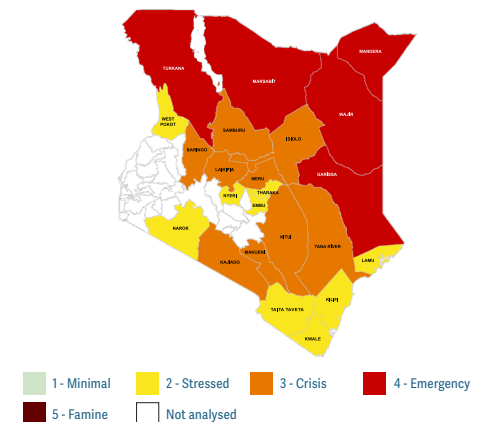
Kenya (the ASALs) has been categorized as a food crisis in all seven editions of the GRFC and as a major food crisis since 2017. The number of people facing IPC Phase 3 or above has fluctuated but increased significantly from 2021 both in terms of magnitude and severity, with the counties of Isiolo, Mandera, Marsabit and Turkana consistently classified in IPC Phase 4.

ACUTE FOOD INSECURITY PROJECTION 2023

5.43M people or **32%** of the analysed population in IPC Phase 3 or above, **March–June 2023**



Projected IPC acute food insecurity situation, March–June 2023



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Source: Kenya IPC TWG, February 2023.

Since 2020, despite a lower number of people analysed in the ASALs, the number of people in IPC Phase 3 or above more than doubled, and the number in IPC Phase 4 more than tripled, reaching 1.2 million in 2022 from 0.4 million in 2020.

The country is prone to extreme climate events and related conflict over scarce resources and recently other shocks have led to a deterioration in food security. COVID-19 restrictions between 2020 and 2021 disrupted food supplies and cross-border movements of goods and people, contributing to food price volatility (GRFC 2022). Prospects of a post-pandemic recovery dimmed in 2022 due to the drought and the effects of the war in Ukraine.

Drivers of the crisis, 2022–23

Weather extremes Five consecutive poor rainy seasons since October 2020 have severely affected pasture and water availability in the ASALs and have placed livelihoods under extreme pressure. As of December 2022, drought conditions were reported in 22 ASAL counties, with nine counties classified in drought phase Alarm and 13 in Alert (National Drought Management Authority, January 2023).

Many water points dried up or diminished in quality (USGS USAID/FEWS NET, Dec 2022). Nearly 5 million people did not have access to enough water for drinking, cooking and cleaning (HNO, 2022).

Declining pasture and water availability led to a deterioration in livestock body conditions, which in turn impacted livestock price and productivity. Milk production was estimated at 30–80 percent below the average of the previous five years in May (FAO-GIEWS, July 2022) with an impact on children's diets in the arid areas (IPC, September 2022). In 2022, due to pasture shortage and water insecurity, 2.5 million livestock died, causing economic losses of more than USD 1.5 billion (GoK, November 2022).

Maize production in key producing areas in the west of the country is estimated at 10–15 percent below the long-term average following the delayed onset of seasonal rains and dry spells during critical growth stages (FAO, December 2022). In marginal southeastern

and coastal agricultural areas, more substantial cereal production shortfalls were recorded, with maize production officially estimated to be 50 and 80 percent, respectively, below average (FAO, March 2023).

Economic shocks Global price shocks following the war in Ukraine translated into domestic price increases, eroding household purchasing power. Kenya is largely dependent on imports to meet domestic demand for commodities such as edible oils, petroleum goods and fertilizers (IPC, September 2022).

The increased import bills while the country faces a heavy debt load and diminishing investment are depleting foreign exchange reserves and causing rapid currency depreciation, contributing to higher costs of living. Annual inflation peaked at 9.6 percent in October 2022 driven by food inflation (15.8 percent) and high transport costs (11.6 percent) (KNBS, October 2022).

In the ASALs, local cereal prices continued to soar through the end of 2022 and remained well above the national average. Food prices are pushing up the overall cost of living for households in these areas, with food inflation continuing to be in double digits throughout the last quarter of 2022 (WFP, February 2023).

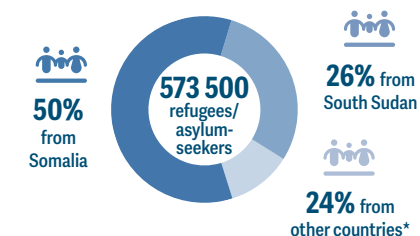
Conflict/insecurity Resource-based conflict was recorded in most of the ASAL counties, instigated by competition for scarce pasture and water caused by the drought, coupled with longstanding rivalries between communities (IPC, September 2022).

DISPLACEMENT

Refugees Kenya hosts over 573 500 refugees and asylum-seekers, mainly from Somalia and South Sudan. In 2022, over 50 000 refugees arrived, mostly from Somalia, many malnourished (UNHCR, December 2022).

Around 83 percent of refugee populations reside in camps in two of the country's poorest and most food-insecure counties – Garissa bordering Somalia (Dadaab camp), and Turkana bordering South Sudan (Kakuma camp), while the rest (17 percent) live in Nairobi.

Refugees have fled conflict and drought in neighbouring countries, 2022



* including Democratic Republic of the Congo, Ethiopia, Burundi.
Source: UNHCR, December 2022.

The food security situation of the refugee population deteriorated in 2022 due to inflation and high levels of household debt, as well as the impacts of halved food rations linked to insufficient funding. In Kakuma camp, as of August 2022, the price of wheat flour and rice was 40–50 percent above the three-year average, while that of maize was 70 percent above. In Dadaab, the price of wheat flour was 59 percent above average, while maize and beans prices were 13–17 percent above. The year-on-year price of vegetable oil more than doubled in both camps (UNHCR-WFP JAM, 2022).

In 2021, child wasting levels were just under the 'high' prevalence at 9.6 percent in Kakuma and 8.5 percent in Dadaab. In both camps, there was a 60 percent increase in severe wasting admissions compared with 2020. Anaemia levels were a severe public health problem for children aged under 5 years and women of reproductive age in all camps (SENS 2021).

Disease outbreaks (measles, acute watery diarrhoea and cholera) were other aggressive aggravating factors that are likely to have affected the nutritional situation in refugee camps in 2022 (UNHCR, 2022). Staffing levels in health institutions in the camps were insufficient, compromising the quality of service provision (UNHCR-WFP JAM, 2022).

NUTRITION

Number of children under 5 years old with wasting, July–October 2022



115 700 pregnant and lactating women acutely malnourished, 2022

Source: Kenya IPC TWG, September 2022.

Between July and October 2022, the nutrition situation in many counties in Kenya's drought-stricken ASALs was Extremely Critical (IPC AMN Phase 5) and Critical (IPC AMN Phase 4).

During this period, around 884 500 children aged 6–59 months needed treatment for wasting, of whom 222 700 were severely wasted. About 75 percent of the wasted children were in the ASALs and 25 percent in non-ASAL and urban areas (IPC, September 2022). The number of children suffering from wasting was projected to increase to over 970 200, of whom 240 600 were severely wasted, in February–May 2023, with the majority (70 percent) in the ASALs. The number of acutely malnourished pregnant and lactating women was projected to increase from around 116 000 in 2022 to 142 000 in 2023 (IPC, February 2023).

Based on the July 2022 IPC AMN analysis in the ASAL areas, wasting levels were Extremely Critical (IPC AMN Phase 5) in Turkana North and Turkana South as well as Laisamis in Marsabit county (>30 percent). Turkana West, Turkana Central, Samburu, Mandera, Wajir and Garissa counties, as well as Tiaty subcounty in Baringo and North Horr in Marsabit were in Critical (IPC AMN Phase 4) (IPC September 2022). The situation was even worse than during the 2011 Horn of Africa crisis in Turkana South.

The situation was projected to worsen from November 2022. In March–May 2023, Mandera and Wajir counties, North Horr, and Turkana North subcounties were projected to be in IPC AMN Phase 5 (IPC, February 2023).

Drivers of undernutrition

Food insecurity and lack of access to healthy diets Poor food consumption was identified as a major contributing factor to child wasting due to very low milk production reported in pastoral drought-affected areas where milk is a major contributor to children's diets. Food insecurity led to poor dietary intake in both children and women, expressed by low dietary diversity and meal frequencies. During March–May 2023, suboptimal rainfall was expected to further aggravate food insecurity due to continued low milk production and the poor body condition of animals while limited crop production in the agropastoral areas will reduce food availability (IPC, February 2023).

However, there was a lack of convergence between the acute food insecurity and acute malnutrition classifications: those counties in extremely critical acute malnutrition situations (IPC AMN Phase 5) (Laisamis in Marsabit county, Turkana South, and Turkana North) were classified in Crisis (IPC Phase 3) for acute food insecurity. The counties and subcounties in Critical (IPC AMN Phase 4) were classified in Crisis (IPC Phase 3) for acute food insecurity. This highlights the importance of non-dietary factors contributing to the very high acute malnutrition levels.

Inadequate maternal and child-feeding practices From October–December 2022, childcaring and feeding practices were expected to worsen with the deteriorating food insecurity situation and as families exhausted their coping strategies. Already, exclusive breastfeeding rates for children aged 0–5 months were estimated at 61 percent in 2020 (UNICEF, 2021), which is considered an 'Alert' level. Nearly 29 percent of children (a moderate public health problem) and 43 percent of pregnant/lactating women were anaemic, indicating a severe public health problem (WHO, January 2023).

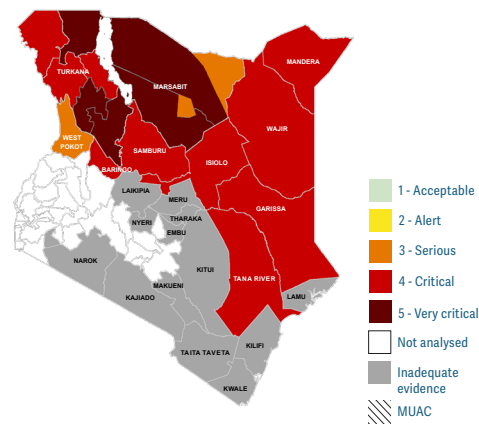
Limited access to health and nutrition services

Humanitarian assistance, including nutrition and health interventions, were hampered by intercommunal conflicts that led to the destruction of infrastructures in parts of Turkana and Marsabit (IPC, September 2022). Around 20–30 percent of the population in ASALs have minimal to no access to essential health services, with outpatient attendance in health facilities having reduced by 42 percent due to population movement, poorly supplied health facilities, insecurity and inadequate outreach (UNICEF, October 2022).

High prevalence of infectious diseases Malaria and upper respiratory tract infections across all counties remained a major contributor to wasting. Also, diarrhoea prevalence was high in Garissa and Laisamis while measles outbreaks were reported in Turkana West, Garissa and Mandera. Low vaccination coverage, low vitamin A supplementation and poor health-seeking behaviour were reported in Garissa while remaining suboptimal in Moyale, Isiolo and North Horr (IPC, February 2023).

Poor household environment Poor access to safe water was a cross-cutting contributing factor to acute malnutrition coupled with poor sanitation. The continued drought in the projection period will worsen water availability, compromising hygiene and sanitation practices, and leading to higher vulnerability to disease. Disease outbreaks of measles and cholera are expected to increase, worsening acute malnutrition (IPC, February 2023).

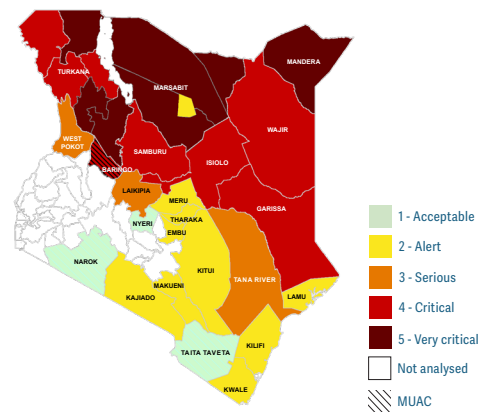
IPC acute malnutrition situation, August–October 2022



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Source: Kenya IPC TWG, September 2022.

Projected IPC acute malnutrition situation, March–May 2023



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Source: Kenya IPC TWG, February 2023.