

CONCERN worldwide







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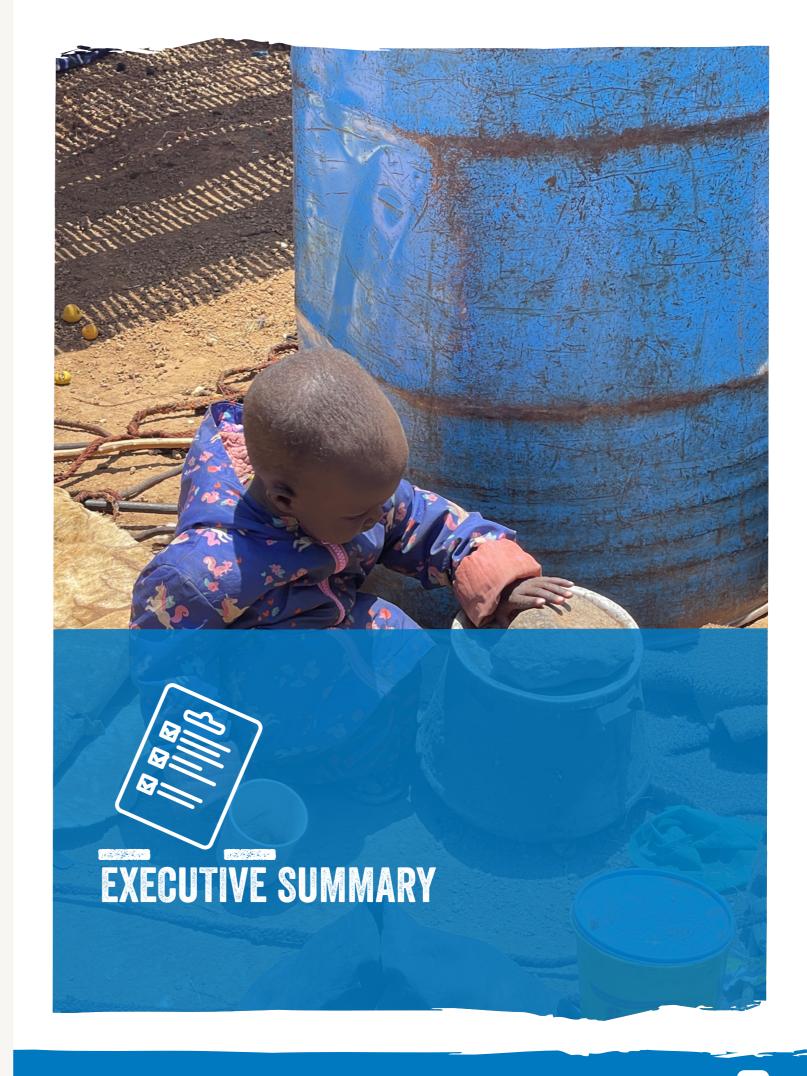


ACRONYMS

ASAL	Arid and semi-Arid Lands			
BCG	Bacille Calmette-Guerin			
CEFMU	Child, Early and Forced Marriage and Unions			
DSTV	Digital Satellite Television			
FCS	Food Consumption Score			
FGDs	Focus Group Discussions			
FGM	Female Genital Mutilation			
FIC	Fully Immunized Children			
GAM	Global Acute Malnutrition			
HMIS	Health Management Information System			
IPC	Integrated Food Security Phase Classification			
IT	Information Technology			
KIIs	Key Informant Interviews			
MOE	Ministry of Education			
МоН	Ministry of Health			
MUAC	Mid-Upper Arm Circumference			
NDMA	National Drought Management Authority			
NGO	Non-Governmental Organisation			
OPV	Oral Polio Vaccine			
PACIDA	Pastoralist Community Initiative Development Assistance			
PEP	Post Exposure Prophylaxis			
PIK	Plan International Kenya			
PWDs	Persons Living with Disability			
RGA	Rapid Gender Assessment			
RNA	Rapid Needs Assessment			
SGBV	Sexual Gender-based Violence			
STIs	Sexually Transmitted Infections			
ТВ	Tuberculosis			
THS	Transforming Health Services			
UNICEF	United Nations Children Education Fund			
WASH	Water, Sanitation and Hygiene			

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EXECUTIVE SUMMARY

The Rapid Gender Assessment aimed at assessing the impacts of severe drought and understanding the level of gender variability among male and female populations of Marsabit county. The report would inform Plan International's humanitarian programming in Marsabit county based on different needs of women, men, boys, girls and persons with disability and to advocate and influence duty bearers that include national and county governments, donors, and other actors to

tailor programming towards the specific gaps and needs of affected people, specifically in relation to gender, age and disability. The assessment would provide information to support women and girls, men and boys with appropriate interventions as well as demonstrate areas of impact and learning for continuous improvement on drought interventions.

KEY OBJECTIVES OF THE ASSESSMENT Identify different needs, Come up with recommendations Identify and understand to inform design of gendercapacities, and available the effects of the community driven sensitive and genderresponsive ongoing drought crisis coping mechanisms humanitarian activities/actions on girls, women, boys of the most vulnerable and interventions by Plan and men in all their International Kenya and other populations within the diversity in the counties. counties. actors in the county.

METHODOLOGY

This was a cross-sectional study applying mixed method approach to inquire into issues of concern for men, women, girls and boys. Quantitative and qualitative methods were adopted to generate information from participants for ease of corroboration and triangulation of facts and views from different sources. Quantitative data

was collected electronically using KOBO collect toolbox while key informant interviews and focus group discussions were used to gather qualitative information from different stakeholders. A comprehensive desk review was conducted to complement the primary data.

KEY FINDINGS OF THE ASSESSMENT

STUDY POPULATION - 460 HOUSEHOLDS

ON AVERAGE 7.8 PEOPLE LIVE IN ONE HOUSEHOLD



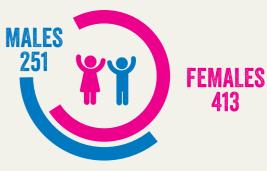


ADULTS (18 - 59 YEARS)



ELDERLY (>60)





CHILDREN (10 - 17 YEARS)





DISABILITY

EXECUTIVE SUMMARY

GENDER ROLES AND RESPONSIBILITIES

The daily schedule which mostly begins from 7.00am to around 9.00pm is basically spread between household chores, schooling, to pasture, to various social activities. This is applicable for girls, boys, women and men. The roles keep changing since the onset of drought and stretch even longer due to drought conditions. For boys aged 6-9 years old, their daily schedule is to help the parents with domestic chores such as fetching water and looking after livestock apart from school work. Young girls (6-9 years old), apart from schoolwork, help parents with domestic chores such as cleaning utensils, washing clothes, milking goats, fetching firewood, preparing breakfast, cleaning the house. Boys of the same age milk goats. This is common even with older girls (13-17 years old) except that they appear to have higher responsibility allocation. For men, before the crisis they would drive the animals to pasture and watering animals besides providing security for the family, school fees for the children, fending food for the family. The women prepare food, fetch water, clean clothes, provide transport for the children. Women also build houses, milk animals especially goats and cows but not camels. The drought crisis made these responsibilities more challenging as women have to travel long distances to collect water and even buy food. More burden was reported on widows. They play men's role. They act as fathers and go extra mile to borrow money to feed families.

ACCESS AND CONTROL OF RESOURCES AND DECISION MAKING

On asset ownership, the study found that 5.7% of female respondents own land alone, 16.7% own dwelling alone and 18.5% own jewellery alone. Most of these assets are owned jointly with husbands. Livestock is 58.9% jointly owned with husband.

On income, livestock is the main source of income before the crisis at 69.1% but has reduced to 60.0% since the crisis. On expenditure, 60% of households spend <\$5 a month.

ONLY



15.7%

OF THE HOUSEHOLDS HAVE ADDITIONAL SOURCE OF INCOME

OF WHICH 59.8% IS FROM SALE
OF LIVESTOCK AND 26.8% FROM
HUMANITARIAN ASSISTANCE.

CONTROL OF FAMILY RESOURCES

65.7% of the respondents mentioned that both husband and wife make joint decision on how to spend money in household. 18.5% of the respondents reported that decisions to spend money is made by husbands compared to 14.1% made by a wife.

ONLY



15.9%

OF THE RESPONDENTS
MENTIONED HAVING OWN
MONEY TO SPEND THOUGH.

ACCESS TO SERVICES

School Attendance Before and After Crisis



61.5%

OF THE RESPONDENTS CONFIRMED THEIR CHILDREN WERE ATTENDING SCHOOL BEFORE DROUGHT.

MORE GIRLS (13.9%) THAN BOYS (9.3%) NOT ATTENDING SCHOOL BEFORE CRISIS

51.1%



SINCE DROUGHT 51.1%
RESPONDENTS REPORTED THAT
THEIR CHILDREN WERE NOT
ATTENDING SCHOOL

14.3% OF GIRLS AND 13.5% OF BOYS NOT ATTENDING SCHOOL SINCE CRISIS

THE STUDY FOUND THAT

61.5%



OF BOYS AND GIRLS WERE ATTENDING SCHOOL BEFORE THE DROUGHT. THE NUMBER HAS REDUCED TO 51.1% FOR BOYS AND GIRLS ATTENDING SCHOOL

SINCE THE DROUGHT. MORE GIRLS (13.9%) THAN BOYS (9.3%) WERE NOT ATTENDING SCHOOL BEFORE CRISIS. THE PROPORTIONS INCREASED TO 14.3% AND 13.5% RESPECTIVELY SINCE THE DROUGHT.

ACCESS TO HEALTH SERVICES

Only 50.7% mentioned having safe access to health facility. It was reported that 54.9% do not have enough money to pay for health services while 35.7% blamed it on non-functional health facility in the area. FGDs and KIIs held in Kargi, Korr, and North Horr revealed that almost everyone (boys, girls, men, women and the elderly) has very limited access and control of resources such as water, food, clothes, non-food items, health services, psychosocial support, legal, referrals due to the environmental condition (drought), empowerment, unawareness and geographical distances.

HOUSEHOLD AND COMMUNITY DECISION MAKING

Further investigation on the key areas of decision-making based on a number of variables: earning money for self, buying or selling assets, visiting relatives, accessing healthcare for self, migration and displacement, whether to have another child or whether children attend school discovered that joint decision is highly reported on whether to have another child (52.0%) or whether children attend school (58.0%). Community decision making is **95.4**% done by elders. More male (62.9%) than female (36.7%) participate in decision making.

PRIORITY NEEDS OF RESPONDENTS

The results from the findings indicate that water (46%), food (25.8%) and cash (16.6%) were the most ranked needs in order of priority. During the FGDs it came out clearly that as a matter of priority the youngsters need food, shelter, education, healthcare, water, clothes, sanitary pads (for girls). The older people, apart from the basic necessities already listed, need financial resources or engagement that allow them to access money to take care of the people under them. The disabled persons among them need special care and amenities.

WATER, HYGIENE AND SANITATION

Access to water source takes more than 60 minutes a trip for 60% of the respondents. The duration for each trip to fetch water is rapidly increasing proportionally with the increase in distance to water source. Vulnerability levels also increase for both girls and women who take leading roles of fetching water. 13.9% of the respondents indicated that the journey to water points is not safe, especially girls and women who are prone to insecurity risks.



EXECUTIVE SUMMARY EXECUTIVE SUMMARY

WOMEN MENSTRUAL HYGIENE NEEDS















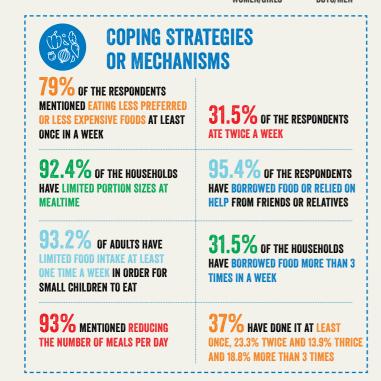
FACILITIES



THE SURVEY ESTABLISHED THAT 40% of women of reproductive AGE DO NOT HAVE THEIR MENSTRUAL HYGIENE NEEDS MET.

DISEASE PREVALENCE IN GIRLS/WOMEN AND MEN/BOYS

(A)	INFECTIONS (STI)	26% WOMEN/GIRLS	9.7% BOYS/MEN
GЮ	URINARY TRACT Infections (UTIS)	9.3% WOMEN/GIRLS	11.2% BOYS/MEN
×	MALNUTRITION	25.4% WOMEN/GIRLS	16.4% BOYS/MEN
\wedge	WATER ROBUE DIOCAGE	12 0%	11 9%



THERE HAS BEEN LONG SEASON OF DROUGHT. LIVESTOCK HAVE DIED IN LARGE NUMBERS DUE TO LACK OF PASTURE AND WATER. NO CLEAN WATER FOR DRINKING. NO FOOD TO EAT SINCE WE HAVE BEEN DEPENDING ON LIVESTOCK..."



12.4% RAPE



16.9% SEXUAL HARASSMENT



16.9% FGM



14.6% DOMESTIC VIOLENCE



39.3% CHILD, EARLY AND FORCED MARRIAGE AND UNIONS

SECURITY AND PROTECTION FOR INDIVIDUALS

LIVING ARRANGEMENTS AND SETTLEMENTS

460 HOUSEHOLDS RESPONDENTS

93.0% in adult (18-60) Headed Households







HOUSEHOLDS



LIVE IN ELDERLY (>60) HEADED HOUSEHOLDS



LIVE IN CHILD

(<18) HEADED

HOUSEHOLDS

RESPONDENTS REPORTED THAT THEY RESIDE IN OWN **SETTLEMENTS**

SECURITY CONCERNS FOR WOMEN, GIRLS



16.8%

11.2%

12.3%

11.8%

SEXUAL ABUSE/VIOLENCE

NO SAFE SPACE AT COMMUNITY

VIOLENCE IN HOME

ATTACKS WHEN TRAVELLING OUTSIDE HOME

INABILITY TO ACCESS SERVICE

NOT ENOUGH PRIVACY

INSECURE DWELLING OR HAS NO LOCKS

ASKED TO MARRY BY THEIR FAMILIES

ATTACK WHEN MOVING WITHIN COMMUNITY

SATELLITE"





15.2% 11.2%

11%

10.7%

14.7%

17.3%

11.1% 2.7%

REPORTING SECURITY CONCERNS



43.3% OF THE RESPONDENTS REPORTED GOING TO COMMUNITY **LEADERS**



RESPONDENTS REPORTED **GOING TO THE POLICE**



6.7% OF THE RESPONDENTS REPORTED **GOING TO NGO**



RESPONDENTS REPORTED GOING TO FAMILY MEMBERS



3.3% OF THE RESPONDENTS REPORTED **GOING TO HEALTHCARE PROVIDER**



3.3% of the respondents REPORTED GOING TO A FRIEND



IT IS EVIDENCED THAT THE COMMUNITY REPORTING STRUCTURES EXIST AT ALL LEVELS, BUT THEIR **ABILITY TO EFFECTIVELY MANAGE THE LEVELS** OF RISKS NEED REASSESSMENT IN VIEW OF THE ESCALATING INCIDENCES OF PROTECTION **VIOLATIONS**

SERVICES AVAILABLE FOR THOSE WHO HAVE BEEN VIOLATED

There are increased incidences of rape, sexual

harassment or indecent touch, domestic

violence, child, early and forced marriage and

unions (CEFMU) and incidences of female genital

GENERALLY, 18.3% OF THE RESPONDENTS

WE FEEL UNSAFE DURING THE NIGHT DUE TO THE INSECURITY OF TEMPORARY SITE(FORA) AND ALSO MIGRATING FROM HOME TO FORA THE TEMPORARY

FOR THE KNOWN PROTECTION FROM VIOLATION INCIDENCES. ONLY 10.4% of the respondents confirmed knowledge of readily AVAILABLE SERVICES FOR WOMEN AND GIRLS WHO HAVE EXPERIENCED PROTECTION VIOLATIONS IN THE COMMUNITY.

KNOWN SERVICES AVAILABLE IN THE COMMUNITY





(PEP)

















CONCLUSIONS

The drought, food and nutrition insecurity and water scarcity continue to worsen in Marsabit due to four consecutive failed rain seasons. The drought situation has diminished pasture and browse availability resulting in livestock deaths, lower milk production and increasing malnutrition among communities. Women, children, people with disabilities and the elderly people in our assessment have been left behind in villages as men travel out to access water and forage.

An increase in protection concerns against children, girls and women were reported by survey respondents. Incidences of rape, domestic violence, female genital mutilation, early and forced marriages and sexual harassment were reported to be on the rise.

Before hunger crisis, findings indicated that most children were still attending school. Since the drought, slightly lower number of respondents reported that their children attended school. The drop of 10.4% in school attendance may be linked to challenges posed by drought.

Men, boys, women and girls in the host communities all have similar critical needs including food, water, education or training, healthcare and psychosocial support. Sanitation facilities, shelter and protection needs were also of primary concern to them.

Gender roles and burden of care have shifted with more women carrying the bigger burden of assuming productive roles of taking care of families and meeting their basic needs. All the women reported to have taken up the role of taking care of children, looking for work to earn living, looking after livestock, trekking long distances for water and taking extra time to go for humanitarian aids to support families.

Many women and girls identified lack of or inadequate access to menstrual hygiene needs across the four regions. These included disposable pads that were the most cited, soap, reusable hygiene cloths or pads, underwear and washing or disposal facilities.

RECOMMENDATIONS

Findings indicated glaring humanitarian needs with significant shift in gender roles where women take up productive roles to sustain their families.

Food Security

- There is need for multi-sectoral response in consultation with affected communities addressing water shortages; access to food; life-saving nutrition; protection and menstrual hygiene needs of girls. We propose provision of multi-purpose cash transfer where appropriate as it presents better/ positive multi-sectoral outcomes.
- Advocate for scaling-up of gender responsive, unconditional social protection and income support measures for the most affected and vulnerable families, including child and femaleheaded households, families with young children and other vulnerable groups.
- More investment is urgently needed to build communities' capacities for resilience to climate-related shocks through expanding asset creation and safety nets; providing climate resilient seed varieties, other farming inputs and production support such as control of pests and diseases, post-harvest techniques, and value-addition through lowcost food processing and preservation to reduce vulnerability among child and womenheaded households.

WASH

- Invest more in the urgent provision of water trucking services while supporting the repair, rehabilitation, extension and maintenance of water structures and systems in all communities, including in schools where the school-feeding programme has been disrupted due to lack of water.
- Actors including Plan International Kenya is encouraged to collaborate with the local government in intensifying construction of water harvesting facilities such as community dams, and drilling and maintenance of boreholes, and promote the development of community-based livelihood assets around the water establishments and nutrition gardens.



 Advocate for improved access to sanitation services. More specific attention to toilets and bathing facilities will help to avert cases of sexual violence against women and girls, and reduce public health related conditions including diarrhoea.

Protection

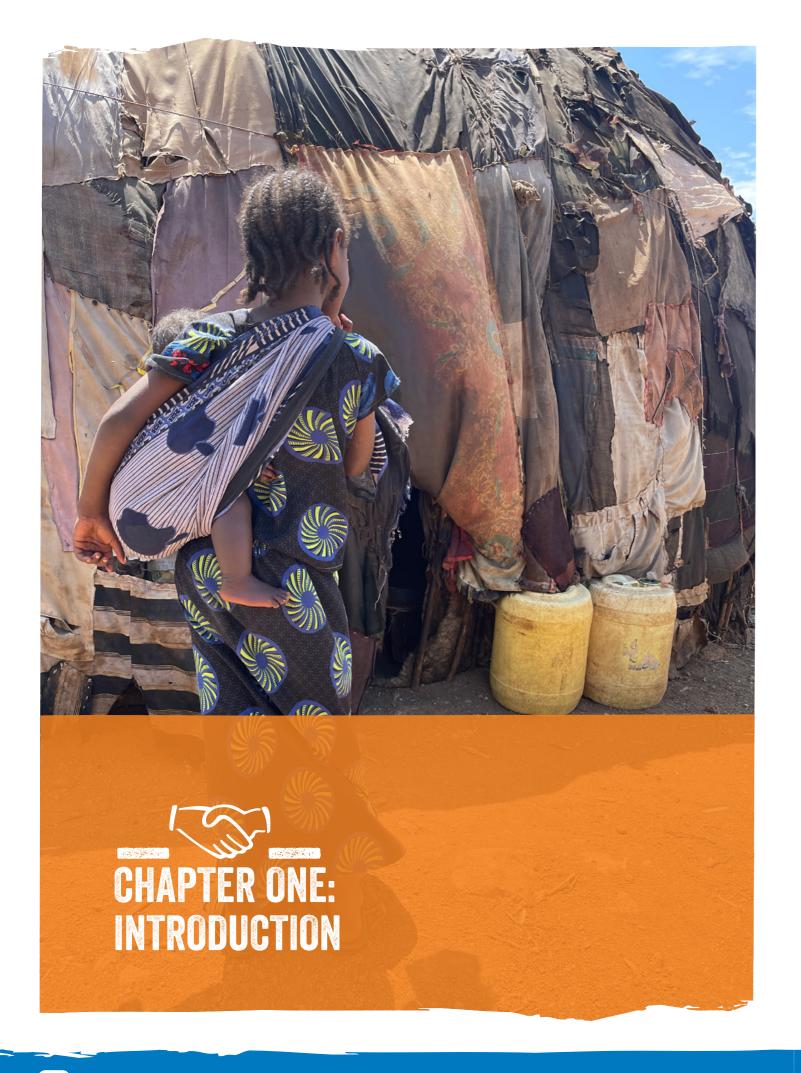
- Provisions for increased protection services must be prioritized for strengthened prevention and response to sexual and gender-based violence, exploitation and abuse.
- Humanitarian actors including Plan International Kenya should invest in the needed capacities to address child safety concerns, dignity and wellbeing during implementation of programmes to avoid causing harm and ensure that accountability mechanisms, including child-friendly feedback mechanisms are established to provide gender and age-responsiveness, safe and confidential ways for children and young people to receive information, provide feedback and meaningfully participate in influencing humanitarian programming.

Education

- Provide school meals programme.
- Advocate for expansion of the school meals programme ensuring that all schools have adequate infrastructure and good hygiene conditions to prepare meals every school day.
- Advocate for investment in school and homebased food production solutions such as school nutrition gardens and community food banks.

Sexual reproductive Health and Rights

- Comprehensive menstrual hygiene awareness creation and provision of Non-food items including hygiene kits -reusable, disposable pads, women panties and soap to adolescent girls and young women
- Strengthen health service provision systems to offer quality medical care and sexual reproductive health services including counselling, psychosocial support services, referral systems, and monitoring and follows ups.



INTRODUCTION

3.1 BACKGROUND AND CONTEXT OF THE EMERGENCY

Kenya's Arid and Semi-Arid Lands (ASAL) regions continue to face one of the worst drought situations in the history of the nation, having experienced its 4th consecutive failed rain season. The last March-May 2022 as were last three seasons of rainfall amount received across most livelihood zones was below the long-term seasonal averages, and this was exacerbated by poor spatial distribution. This negatively affected rangeland and also sparked resource-based conflicts. These resource-based conflicts are coupled with rising food commodity prices due to depressed crop production that coincides with the peak lean season for most Arid and Semi-Arid Livelihood counties.

According to the latest IPC report, these factors imply an increase in the number of people facing high levels of acute food insecurity to 4.1 million; over the 3.5 million initially projected over the same period. This includes 1.1 million in IPC Phase 4 (Emergency) and 3 million in IPC Phase 3 (Crisis).

About 942,500 children aged 6-59 months are affected by acute malnutrition and need treatment. Vulnerable communities' lives and livelihoods have been disrupted beyond their capacity to cope or withstand using own resources, with the result that affected populations suffer serious widespread losses. In addition, the drought situation has increased poverty levels while equally exposing communities and vulnerable groups to new forms of violations. Children and women have been found to be even more vulnerable as the cases of gender-based violence (GBV), child labour, neglect, abuse, malnutrition increase

1.1 IMPACT OF THE DROUGHT ON COMMUNITIES

According to the long rains' assessment report, more than 50% of Marsabit population are classified in Crisis (IPC Phase 3) phase of food insecurity. Majority of the households in the pastoral livelihood zones of Laisamis and North Horr sub-counties are likely to slide to the "Emergency" (IPC Phase 4) in three months' time if intervention measures are not undertaken to address the current situation.

The foregoing situation is as a result of four failed rain seasons in the county that have caused crop failure in the agro-pastoral areas of Moyale and Saku sub-counties. Due to their delayed onset, poor temporal and spatial distribution, the below average rainfall amounts have led to soil moisture deficit that cannot sustain crops to maturity. Pasture condition is poor or depleted in the pastoral livelihood zone. Livestock body condition is poor across livelihood zones with below average milk production.

The current food consumption score (FCS) across the county is 34.5 with 21.5% of households having poor food consumption whereas those with borderline and acceptable food consumption were 40.3% and 38.2%, respectively, across the livelihood zones due to constrained household disposable income. Across the livelihood zones, 18.3-24.8% of households reported an FCS indicative of Emergency (IPC Phase 4), while 40.0-40.5% of the households reported food consumption score indicative of Crisis (IPC Phase 3).

Crisis-emergency food security outcomes are likely to persist due to constrained household disposable income and depletion of livelihood assets as a result of the ongoing severe drought situation. 9.1% of households didn't adopt any of the reduced consumption based

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coping strategies. However, 46.9% and 44% of households employed stress and crisis coping mechanisms when they lacked food or money to buy food. 52.8% and 47.2% of households in the agropastoral livelihood zone applied stressed and crisis reduced consumption coping strategies, respectively, while in the pastoral livelihood zone, 13.1% of households didn't cope with 44.4% and 42.5% of households adopting stressed and crisis coping mechanisms respectively¹.

According to the NDMA bulletin on surveillance data, the proportion of children under five year who are malnourished (MUAC<125mm) in June 2022 was 15.4% compared to 12% in the same period in 2021. According to SMART survey of June-July 2022, the global acute malnutrition (GAM) rate, for Laisamis, North Horr, Saku and Moyale sub-counties were 30.3%, 29.5%, 10.8% and 9.4%, respectively. The Overall GAM rate remained at "Critical" Phase (19.8%). The results indicated that there has been no significant change in the nutrition status when compared to a similar time in 2019 for Moyale and Saku sub-counties. However, Laisamis posted a worsening nutritional



According to the NDMA bulletin on surveillance data, the proportion of children under five year who are malnourished (MUAC<125mm) in June 2022 was 15.4% compared to 12% in the same period in 2021.

status from 20.8% (Critical Phase) in July 2021 to 30.3% (Extreme Critical Phase). Similarly, North Horr exhibited deteriorating nutritional status evidenced by an increased in the GAM rate from 22.6% in July 2021 to 29.5% in July 2022 and remained in the critical phase. The wards that posted the highest cases of acute malnutrition cases include (Illeret, North Horr, Dukana and Maikona) in North Horr sub-county, (Loiyangalani, Korr-Ngurunit

and Laisamis) in Laisamis sub-county, (Karare and Marsabit Central) in Saku sub-county and Golbo in Moyale sub-county.

The proportion of Fully Immunized Children (FIC) in January to June 2022 was 51.8% which is below the same period (63.9%) in 2021. The

proportion of FIC was below the national target of 90% due to reduction of medical outreaches and limited support for integrated outreaches across the county as a result of reduced donor funding. Additionally, long distances to the health facilities have led to limited access to health services thus the below national level targets. On immunization coverage, the proportion of children immunized against Oral Polio Vaccine (OPV 1) and OPV 3 in January to June 2022 were 72.4% and 64.9% respectively compared to 94.6% and 78.4% in the same period in 2021. In January to June 2022, the proportion vaccination for Measles was 61.6% compared to 69.8% in the same period in 2021. Immunization coverage on Measles was 97.5%, 97.4%, 96.8% and 99.8% in Laisamis, Moyale, North Horr and Saku sub-counties respectively based on Bacille Calmette-Guerin (BCG) vaccine for tuberculosis (TB) disease and confirmed by scar as outlined in SMART Survey. Based on routine health management information system (HMIS) data, the proportion of Vitamin A supplementation among the target groups of 6-11 months reduced to 53.6% in January to June 2022 from 72.4% during the same period in 2021. Similarly, among 12-59 months children the proportion of Vitamin A supplementation reduced from 97.5 % in January to June 2021 to 82.1% in the same period in 2022. The reduction in Vitamin A supplementation was attributed to nondisbursement of funds by the MoH through the Transforming Health Service (THS), meant for support of Malezi Bora activities and integrated outreaches as well as insecurity in Saku subcounty. Vitamin A supplementation remained below the national target of 80% for all the age cohorts.

In September 2022, over 85 - 90% of all the livestock species have typically migrated to the dry season grazing areas attributed by rapid depletion of open water sources forage cover across the livelihood zones. In North Horr sub-county, mass livestock migration in search of rangeland resources and water was witnessed as livestock migrated to areas of Sibiloi, Bulluk, Balesa Goda, Elgade, Sabare, Diid Gola, Chari-Ashe, Darade, Sarimo, Gallas, Garwole, Bales-Saru, Hurri Hills

and Batha-Afar. In Laisamis sub-county, majority of livestock from Laisamis ward have migrated to areas of Sebarwawa, Thurusi, Turgung, Pejelo, Koya, Merti, while others have migrated towards Samburu County. Livestock from Korr ward have migrated to areas of Bihai, Sebarwawa, Koya and Samburu County. Livestock in Loiyangalani ward are concentrated around Mt. Kulal, Moite, Palo, Sarima and Naang'ol. In Saku, concentration of livestock in Sagante are within Dokatu, Jaldesa and Kubigallo while those in Karare ward have moved to Kituruni, Songa, Ilpus and within Karare. Majority of livestock in Moyale sub-county outmigrated to the neighbouring Ethiopia. Camels especially from Bute in Wajir have migrated to Walda and Butiye ward in Moyale sub-county in search for water and browse.

With increased livestock migration being witnessed in the dry season grazing areas, there is a likelihood occurrence of resource-based conflict in those areas. Endemic livestock disease incidences reported, outbreak of sheep



LIVESTOCK MORTALITY ACROSS THE COUNTY DUE TO DROUGHT ARE: CATTLE 38628, SHEEP 112879, GOATS 85825 AND CAMELS 34832.

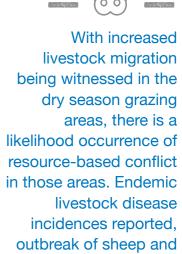
and goat pox, abortions in livestock recorded². According to the long rains' assessment report an estimated livestock mortality across the county due to drought are: Cattle 38628, Sheep 112879, goats 85825 and Camels 34832.

The most affected Sub counties are North Horr, parts of Moyale and Laisamis. Insecurity along the border of Elledimtu in Moyale sub-county, North Horr sub-county (Forolle, Garwole, Darade, Bulluk, Chari Ashe and Badha Afar), Laisamis sub-

county (Salmate, Gudas and Arapal), Jaldesa in Saku sub-county have hindered access of pasture and affected market operations.

The effects of a combination of the aforementioned factors have affected livestock production and commercialization, thereby contributing to food

insecurity at the household level in all livelihood zones. Livestock trekking distance of 38.9 km is exceedingly above the short-term average livestock trekking distance of 17.6 km hence, an indication of significantly longer trekking distances3. Noticeably, livestock trekking distances were typically longer in some parts of the pastoral livelihood zone of North Horr (Turbi and Maikona wards) and Laisamis (Korr /Ngurunit and Kargi/South Horr wards) posted over 50 km. According to NDMA September early warning bulletin, in the pastoral



goat pox, abortions in

livestock recorded².

livelihood zone, the watering interval ranges after 3 days for cattle, 12–14 days for camel and 4-5 days for small stock compared to after 1-2 days for cattle, 4–6 days for camel and 2 days for small stock. In agro-pastoral livelihood zone watering interval is after 2 days for cattle, 7-10 days for camel and 2-3 days for small stock against the normal of 1 day for cattle, 4-5 days for camel and 1-2 days for small stock

Significant reduction in livestock watering frequencies in all the livelihood zones is attributable to poor forage cover and longer livestock trekking distances. With likely persistence of warmer than average conditions, inadequate forage is likely to result in abnormally longer livestock trekking distances in the October, thus further increase in watering intervals for all livestock species across the county.

2 Marsabit Early Warning Bulletin, September 2022.

1 Long Rains Assessment Report 2022.

³ Marsabit Long Rains Assessment Report 2022.

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Household and livestock watering distances are exceedingly above the short-term averages. 95% of open water sources are depleted. Most monitored water points in Marsabit county fell below the median depth. Majority of households (65%) depend on the borehole as the main water source across the livelihood zones. Other water sources applied by the communities include shallow wells, water pans and springs at 24%, 8% and 4% respectively. Reliance on strategic boreholes and shallow wells remains uncharacteristically higher, accelerating rapid decline of water levels across the livelihood zones. Garwole and Marime boreholes in North Horr; Ndikir and Lapikutuk in Laisamis and Ellebor and Adadi in Moyale have broken down according to September 2022 NDMA early warning bulletin.

The aforementioned boreholes are not functioning due to frequent break downs and inadequate fast-moving spare parts. In addition, they are not operationalized due to inadequate funds for the technicians to undertake some of the



Marsabit county insecurity and conflicts have caused displacement, loss of lives and destruction of properties. The number of deaths in the county reported as from March to June 2022 was 44 with a total of 12 injuries reported in the same period.

repairs and maintenance to the strategic boreholes. Current household water access distance is 13.8 km which is significantly above the average household water distance of 7.7 km by 79% of the people. Waiting time ranged between 90-120 minutes against the normal of 45-60 minutes in the agro-pastoral livelihood zone while ranged between 3-4 hours in the pastoral livelihood zone against the normal of 60-90 minutes. Water consumption per person per day was 7-8 litres in agro-pastoral and 5-7 litres in pastoral

livelihood zone compared to the normal 15-20 litres per person per day. The cost of water ranged between Ksh.5-10 in urban areas and Kshs.20/jerrycan from water vendors⁴.

The season of March, April and May 2022, negatively impacted on the enrolment of learners at the pre-primary and secondary level save for pre-primary boys which recorded an increment of 750 (8.7%). At the pre-primary level the girls recorded a decrease of 141 learners (1.6%). At the secondary level both boys and girls recorded a decrease in enrolment which stands at 436 (8.2%) for boys and 521 (8.7%) for girls. The decrease in enrolment is attributed to the girls and boys being increasingly engaged in income generating activities for their families. The significant records in secondary school enrolment were inter alia largely associated with the provision of bursary funds by the county government to over 740 secondary school students. At the primary level both boys and girls recorded an increase in enrolment of 243 (0.9%) and 231 (0.8%) respectively. This is due to the enrolment campaign drive conducted by the UNICEF. Generally, there was a higher enrolment of girls at all levels as compared to that of boys except for pre-primary level.

The low enrolment of boys is largely attributed to them being engaged in domestic labour such as tending the livestock and other income generating activities such as boda-boda. This has been exacerbated by the ongoing drought since boys are engaged in income generating activities. The high enrolment of learners at primary level were attributed to the in-kind school meals program provided by the Ministry of Education, MOE. Based on the discussions during the focused group discussions most parents send their children to school not just for learning but feeding as well. The absence or delay of school meals will negatively impact on the enrolment and attendance of learners⁵.

Marsabit county insecurity and conflicts have caused displacement, loss of lives and destruction of properties. The number of deaths in the county reported as from March to June 2022 was 44 with a total of 12 injuries reported in the same period. The conflict is as a result of fight over natural resources such as water and pasture. There are also the ethnic retaliatory attacks. Deployment of multi-agency operation in the county accompanied by dusk to dawn curfew

was put in place from May 2022 and this has led to reduced tension and killings in the county although some recent cases have been reported in Saku and Laisamis sub county.

The situation has been made worse by the high food commodity prices. As compared to a similar period last year, the price of maize has increased by 92% in the agro pastoral livelihood compared to 70% increase in the pastoral livelihood for the same commodity. Similar trends apply to other staple food commodities. Exceptionally high maize prices were reported in Moite in Loiyangalani ward where a kilogram was retailing at Kes. 200 and that of beans at Kes. 260. The surge in maize prices in all the livelihood zones was occasioned by macroeconomic challenges (increased fiscal tendencies) that led to high cereal prices in the main food commodities markets coupled with a weakened shilling along the Kenya/Ethiopia markets, insecurity and poor market integration. Terms of trade for Laisamis and North Horr subcounties are significantly below the short-term average as a result of poor market functionalities. Due to increased maize prices and declining goat prices, goats-to-maize ratio will deteriorate further thus constrained disposable income and personal consumption of low-income households limiting food access for pastoral households.

According to recent research conducted by on impact of drought on children in Moyale subcounty, drought has forced children to perform tasks that are beyond their age-appropriate capabilities. This leaves children vulnerable to injury, stress and emotional challenges. Children were reported to be involved in child labour outside the home by 17.2% of respondents.⁶

1.2 RAPID GENDER AND NEEDS ASSESSMENT

Plan International Kenya (PIK) conducted Rapid Gender Assessment (RGA) in Marsabit county to inform the drought response for Plan International Kenya and other humanitarian actors, as well as to support county and national government longterm interventions. Immediate efforts will include interventions to mitigate negative impacts of the persistent drought, hunger and food insecurity on the already vulnerable groups.

The assessment results are aimed at providing the humanitarian response staff and other thematic sectors with evidence to support girls, boys, women and men in all their diversity with appropriate interventions and support. The recommendations from the study would highlight areas of attention and provide landscape for sustained improvement on drought and other crisis interventions, influencing and advocacy and fundraising opportunities.

1.3 PURPOSE AND OBJECTIVE OF THE ASSESSMENT

The purpose of Rapid Gender Assessment is to inform Plan International's humanitarian programming in Marsabit county based on different needs of women, men, boys, girls and persons with disability (PWDs); and to advocate and influence duty bearers that include national and county governments, donors, and other actors to tailor programming towards the specific gaps and needs of affected people, specifically in relation to gender, age and disability. The assessment would provide programme staff and other key stakeholders with information to support women and girls, men and boys with appropriate interventions as well as demonstrate areas of impact and learning for continuous improvement on droughts interventions with clear recommendations.

1.4 OBJECTIVES OF THE ASSESSMENT

1.4.1 MAIN OBJECTIVE

This Rapid Gender Assessment aimed at assessing the impacts of severe drought and understanding the level of gender variability among male and female populations of Marsabit county.

⁴ National Drought Management Authority, Marsabit County; Drought Early Warning Bulletin for 2021

⁵ Marsabit County Long Rains Assessment Report 2022.

⁶ Impact of Drought on Children in Moyale Sub-County, Marsabit 2022.

1.4.2 SPECIFIC OBJECTIVES

- i) Identify and understand the effects of the ongoing drought crisis on girls, women, boys and men in all their diversity in the county
- ii) Identify different needs, capacities, and available community driven coping mechanisms of the most vulnerable populations within the county Come up with recommendations to inform design of gender-sensitive and genderresponsive humanitarian responses and interventions by Plan International Kenya and other actors in the county.

1.5 SCOPE OF THE ASSESSMENT

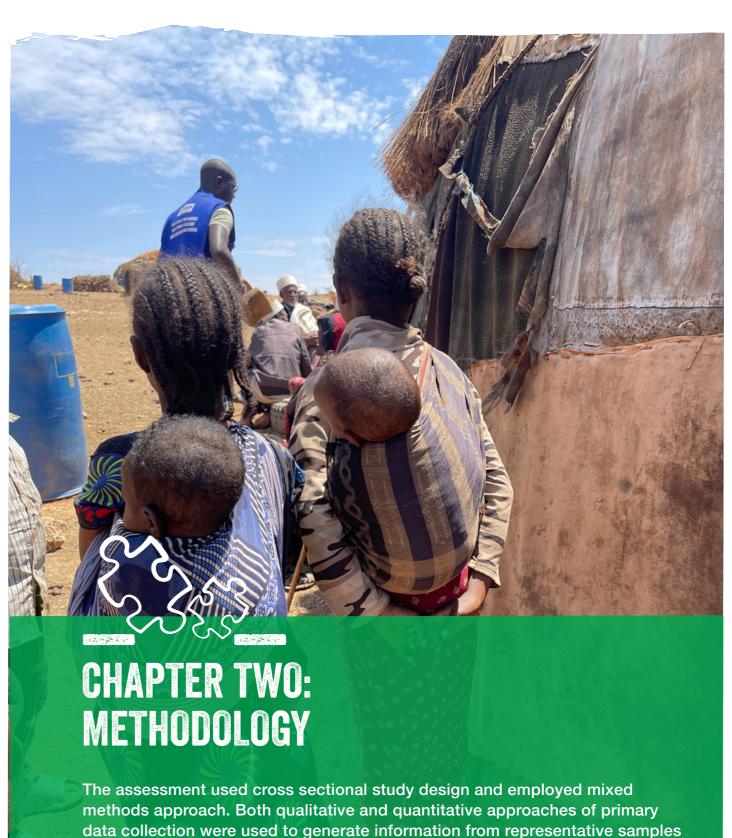
The RGA was conducted in two sub-counties—North Horr and Laisamis of Marsabit county. The targeted wards were Korr, North Horr (Dukana, Hurri Hills) and Kargi. The assessment's target population was drawn from girls, boys, aged 6-9, 10-17, young women and men aged 18-24 and adult male and female aged 25 years and above. The study was keen to establish the situation of women, girls and persons with disability against a background of the drought crisis. Some of the key areas of focus include: Roles and Responsibilities; Access to and Control of Resources and Decision Making; General-Specific Needs and Vulnerabilities; Coping strategies or Mechanisms; and Security for Individuals.

1.6 STUDY SITE

Marsabit county is located in the northern part of Kenya bordering Turkana County to the west, Samburu County to the south, Wajir county to the east and Ethiopia to the north. The county

covers a total area of 70,961.2 Km2 with a population of 459,785 persons (Kenya National Bureau of Statistics, 2019 Population Census). Administratively, the county is divided into four sub counties namely Moyale, North Horr, Laisamis and Saku. The county has three main livelihood zones which include pastoral livelihood zone constituting 81% of the county population, agropastoral livelihood zone comprising of 16% of the population and others having a combined population of 3%. The sale of livestock and livestock products are the main sources of cash income in the pastoral and agro-pastoral livelihood zones contributing 82 and 60% of cash income respectively. Food crop production contributes 20% of cash income in the agro pastoral livelihood zone while in the pastoral livelihood zone, formal waged labour and petty trade contribute 11% of cash income. The proportion of population that is below the poverty line is 80 and 69% in the pastoral and agro pastoral livelihood zones respectively.

The study was done in Laisamis and North Horr sub counties within the wards of Korr, Kargi, Dukana and Hurri Hills. The data sites for Korr villages include Harare, Korr Hallisima, Nahgan 1, Sulate; Dukana villages were Dukana Centre, Kupi Adi; Kargi villages covered Dabsahai Bur, Gaban Nakor, Kiwanja, Pengumo, Garguile, Ririma; for Hurri Hills, the villages were Gubba, Shankara 1, Shankara 2.



The assessment used cross sectional study design and employed mixed methods approach. Both qualitative and quantitative approaches of primary data collection were used to generate information from representative samples of selected respondents. Data was generated from different sources to enable triangulation and comparison of views and facts. Qualitative data was gathered using key informant interviews and focus group discussions from the various target stakeholders, while quantitative data was collected electronically using KOBO Collect tool-kit, which is a cloud-based data collection tool kit. The assessment results were complemented by desk review of available relevant literature from reputable sources.

METHODOLOGY

METHODOLOGY

2.0 SECONDARY DATA COLLECTION

2.0.1 DESK REVIEW

Content analysis of the secondary data and written literature have been significant in examining the drought contexts of gender assessment. The review of literature with intersectional lens have further helped to narrow down to the critical elements informing the themes characterizing the data collection exercise. Documents reviewed, such as the Marsabit Early Warning Bulletin (September 2022), Marsabit long rains Assessment Report (September, 2022), Impact of Drought on Children in Moyale sub county Marsabit (2022), Kenya Drought Response Evaluation Report (2015) with focus on Marsabit and Baringo counties, Integrated Drought Recovery Program for Drought Affected Population in Marsabit County (2019), Emergency Nutrition Response for Drought Affected Communities in Marsabit county-Kenya (2019), Gender Analysis Study (2017)7, documents on culture and conflict8, and women's capacity in peace building9, among other online publications related to the drought crisis prevailing in Northern

part of Kenya, especially the larger Marsabit region, have generated relevant background information about the drought; who is affected, magnitude, mapped needs and response plans in place, and guided construction and farming of the quantitative and qualitative tools available by Plan International Kenya with regard to the Marsabit county gender landscape. Literature review has also provided additional information on available services and resources. In addition, reasonable insight has been gathered on the vulnerabilities such as insecurity, sexual and gender-based violence and malnutrition and disease epidemics vis-a-viz the humanitarian interventions mounted by either the national or non-governmental bodies to the affected populations. The review process has also thrown light onto the cultural issues in the target regions as impacted upon by the drought crisis as they related to gender needs.

The desk review carried through gender analysis and stakeholder mapping has been extremely helpful in generating survey tools for data collection, analysis and the thematic reporting in the findings and discussion section of the rapid gender assessment report.



- 7 Gender Analysis Study, Capacity Strengthening Interventions in Baringo, Marsabit, Samburu, and Wajir County, 2017
- 8 Cultural Factors That Enhance Interethnic Conflict Resolution in Laisamis Subcounty, Marsabit County Kenya, 2021
- 9 Women's Capacity in Peace-Building- A case of Marsabit County in Northern Kenya

2.1 PRIMARY DATA COLLECTION

2.1.1 STUDY POPULATION

STUDY SITES

Korr, Kargi Dukana, Hurri Hills)



HOUSEHOLD PARTICIPANTS

- 460 Respondents were involved in the study
- · 15.2% men
- 84.8% women
- Average age of respondents 38 years old



KEY INFORMANT INTERVIEWS & FOCUS GROUP DISCUSSION PARTICIPANTS

- FGD With Girls 96
- FDG With Boys 72
- FGD With Women 60
- FGD With Men 48

2.1.2 SAMPLE SIZE DETERMINATION

Quantitative survey sample was based on combined target population of two sub-counties of Marsabit. The choice of the target sub counties was informed by the prevalence of drought and reported vulnerability levels of the resident populations from the specific county long/short rains situation reports.

The assessment used Yamane's (1967:886) formula to determine sample size proportions at 95% confidence level, p = 0.05, and using the projected total population of **52,186** persons for North Horr and Laisamis Sub counties with the following wards: Dukana population 18,628; Hurri Hills population 2,500; Korr/Ngurinit population 21,305; Kargi population 9753.

Thus, the sample size for household is computed as follows:

$$n = \frac{N}{1 + N(d^2)}$$

Where n is the sample size, N is the population size, and d is the level of precision.

Using the same formula as above:

$$n = \frac{52186}{1 + 52186 \left(0.05^2\right)} = 397$$

households were targeted being eligible for inclusion in the study. However, 460 households

responded to the interview. Qualitative survey sample was purposive and size determined by perceived level of saturation.

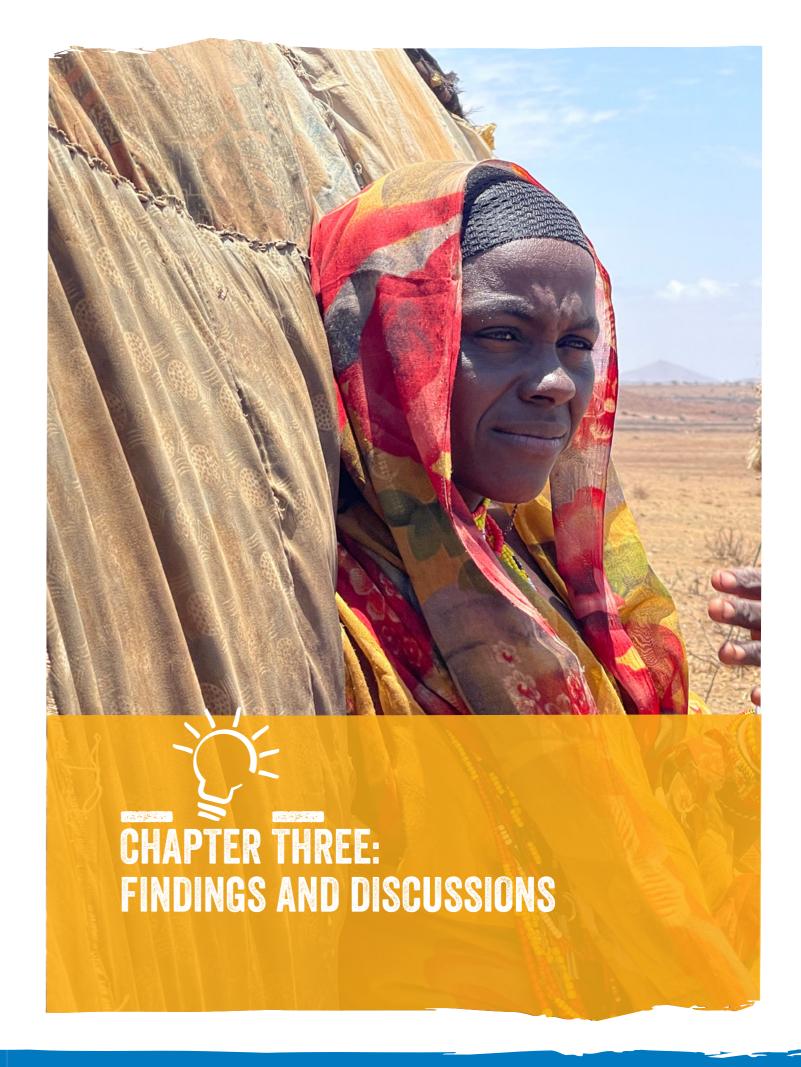
460 households responded to the questions (15.2% males, 84.8% females). 12 focus group discussions each with 8 participants of girls and boys aged 6-9, 10-13 and 14-17 years old was conducted. A total of 96 girls and 72 boys participated in the group discussions. Similarly, focus group discussions with adult men and women aged 25 years and above was conducted with 60 women and 48 men. Youths, male and female age 19-24 were also interviewed. Thirty-six young males and 24 young women were recruited and participated in the study. Key informant interviews were conducted with elders, community leaders, government officers and partners representatives to inform the study. A total of 18 KIIs participated in the study.

STUDY LIMITATION

The study process was riddled with challenges of reaching the target population because of nature of their settlement pattern frequented by migration especially the pastoralists communities. This frequent movement of adults, especially men moving with livestock to look for water and pasture resulted to more interviews with women than men.

2.2 SAFEGUARDING AND ETHICAL CONSIDERATIONS

All members of the survey team were taken through Plan International Children Safeguarding Policy on contact with children, after which they signed the code of conduct and acknowledgement form. The enumerators were also trained on research ethics to meet the highest ethical standards of data collection and assessment throughout the study. Given its sensitive nature, efforts were made to ensure that respondents were fully aware of the risks and benefits involved in participating in the exercise and that confidentiality and anonymity were maintained with an assurance that respondents were free not to participate in the process without jeopardizing any support that they may have been receiving or that is planned. A process of obtaining informed consent and accent for the boys and girls and FGD participants took place using the standard information sheet in accordance to Plan International guidelines.



FINDINGS AND DISCUSSIONS

3.0 INTRODUCTION

This section presents and discusses the assessment findings based on the scope and objectives of the assessment. The presentation pursuant to the stated objectives is made around five (5) thematic areas, namely: Roles and Responsibilities; Access to and Control of Resources and Decision Making; General-Specific Needs and Vulnerabilities; Coping strategies or Mechanisms; and Security for Individuals.

DEMOGRAPHIC ANALYSIS

- 293 are pregnant or lactating women
- Number of children below 5 years (251 males and 413 females)
- 37.6% of the households are female headed households
- 2% of the households are child headed households
- 7.8 persons is the average size of households
- 62.4% of households are male headed households
- 5% of households are elderly headed households

3.1 GENDER ROLES AND RESPONSIBILITIES

Questions were asked to each gender and age group concerning roles performed in the family or society. The roles included collecting water, collecting firewood, housework cleaning, cooking, livestock, food purchase and healthcare of a relative. On gender role, the task of collecting water is 40.4% done by women alone. Homework cleaning and cooking are roles done by women alone at 82.6% and 82.6% respectively. Collecting firewood is one other role done by women alone. This was reported by 78.8% of the respondents. Other roles performed include food purchase which is 57.4% jointly performed with husband. Healthcare of relative is 52.8% jointly performed

by man and woman, with 47.2% still being done by women alone. Assessing the division of labour, the study found that the level of engagement in tasks varied with task. For all engaged in any task, 2% of the respondents are totally involved in farming but 87% of respondents mentioned that women are totally involved in childcare. Women get involved into other roles depending on their marital status.

A summary of FGDs held in Kargi, Korr and North Horr regions revealed the following about roles and responsibilities across gender and age groups around the crisis period. For boys aged 6-9 years old, their predominant daily schedule is to help the parents with domestic chores (fetching water etc.) and looking after livestock apart from school work. Young girls (6-9 years old), basically apart from schoolwork, help parents with domestic chores such as cleaning utensils, washing clothes, milking goats, fetching firewood, preparing breakfast, cleaning the house. Boys of the same age milk goats. This is common even with older girls (13-17 years old) except that they appear to have higher responsibility allocation. For men, before the crisis they would drive the animals to pasture and watering animals besides providing security for the family, school fees for the children, fending food for the family. They would also be out there in the NABO meeting in the shrines. However, as the crisis prevailed and even in the aftermath, local pasture has dried and animals have to be driven far in search of pasture; family needs still need to be attended to and it is not quite easy due to the prevailing drought. The women prepare food, fetch water, clean clothes, provide transport for the children. Women also build houses, milk animals especially goats and cows but not camels. They are welcoming visitors at home too. The drought crisis made these responsibilities even more challenging as the women have to travel long distances to collect water, and even buy food. Women in Korr highlighted the burden of widows. They play men's role. They act as fathers and go extra mile to borrow money to feed families.

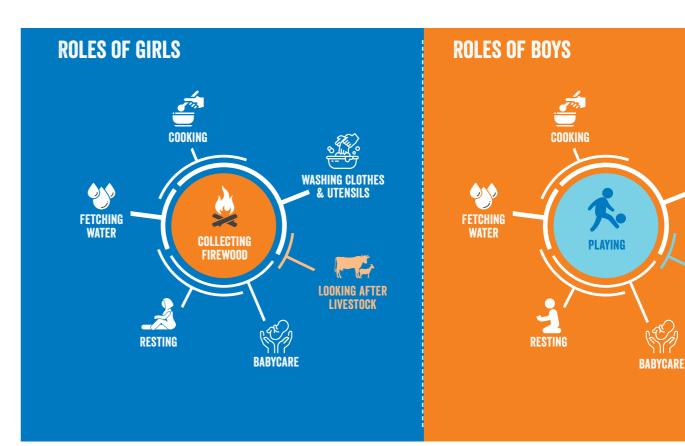
And so, the daily schedule which mostly begins from 7.00am to around 9.00pm is basically spread between household chores, schooling, to pasture, to various social activities...but stretch even longer due to drought conditions as pasture and the whole prospect of looking for food go over long distances.

Elderly men have special roles to play in the community. They preside over traditional cultural activities. Key informant interview with an elder from Hurri Hills discovered the powers conferred on elders which include imposing rules and regulations which must be strictly followed by the members of the community. However, the study found out that roles are changing since drought. Before the drought, the elderly men were to look after livestock in the nearer pastures. Now they look after the young children when their mothers are away from home looking for food for the family and other amenities like school fees for their children. The life has become so difficult for the elderly men because the distance covered to reach grazing land is too far.

"During cultural activities, we, elders impose rules and regulations to be strictly followed by the members of the community. For instance, some people are not allowed to enter cultural shade if one is an outcast, for example pregnant girl before marrying"

-KII. Elder. Hurri Hills

Assessment of roles of girls and boys established that girls and boys perform different roles both at household and community levels as indicated in the illustration below.



Some of the roles are unique to each gender. Few are cross cutting. Particular roles are challenging for girls and make them more vulnerable than boys. The roles of looking after livestock and fetching water since the onset drought are more riskier tasks for girls than for boys. In both roles, distances covered are far wide and keep on increasing as drought progresses. Since drought, looking after livestock involves spending out in the fields without security. An interview with a female principal of a primary school in Dukana discovered the ordeal girls go through in the fields when they are looking after livestock. They undergo sexual harassment, rape and even become pregnant which result to them being considered outcasts.

"If a girl becomes pregnant before marriage, she is an outcast and she is chased away from the family",

She reported.

It is further noted that at the height of the drought crisis parents can no longer afford basic necessities (food, clothing, even shelter) as before. School time for the youth is limited. In most cases, due to death of animals most youths who are engaged in looking after livestock are idle. Activities such as fetching water at the water points cannot be done due to the fact that they are dry. Gardening cannot be done due to lack of rain and water. The community that used to live in harmony now lives under distress as everyone struggles to make ends meet. Long distances have to be covered in search of pastures leading to constant migration of the manyatta thereby causing a lot of instability to the lives of the people.

3.2 ACCESS AND CONTROL OF RESOURCES AND DECISION MAKING

3.2.1 Asset ownership

Female respondents were asked if they own assets alone or with husbands. Among the assets under investigation were: land, dwelling, jewellery. The study found that only 5.7% of female respondents own land alone, 16.7% own dwelling alone and 18.5% own jewellery alone. Most of these assets are owned jointly with husbands. For example, livestock is 58.9% jointly owned with husband. 49.7% women own phones compared to 41.2% men. Children also own mobile phones too, 5.8% by boys compared to 3.3% by girls.

3.2.2 Main Household Livelihood and income

Livestock is the main source of income before the crisis at 69.1% but has reduced to 60.0% since the crisis. On expenditure, 60% of households spend <\$5 a month. Only 15.7% of the households have additional source of income of which 59.8% is from sale of livestock and 26.8% from humanitarian assistance. With persistent biting drought, most households are losing main household livelihood in an alarming rate. From observations along the roads, livestock carcasses littered the fields which formerly served as sources of pasture. Focus group discussions with boys aged 13-17 from Dukana and Kargi expressed fear over the loss of livestock in the affected communities. The boys reported that due to drought they experienced changes such as shortage of food, water and no market for livestock as a result of mass death of livestock and increased diseases. A key informant interview with a male elder from Dukana amplified the same statement, "Since all our livestock has died from the drought, we have nothing to bring back home."



3.2.3 Control of Family Resources

When asked who decides how money is spent at household, 65.7% of the respondents mentioned that both husband and wife make joint decision. However, 18.5% of the respondents reported that decisions to spend money is made by husbands compared to 14.1% who reported that such decisions are made by a wife. Only 15.9% of the respondents mentioned having own money to spend.

3.2.4 School Attendance Before and After Crisis

When asked if their children attended school before and since the crisis, respondents mentioned that 61.5% of boys and girls were attending school before the drought. The number has reduced to 51.1% for boys and girls attending school since the drought. There is a drop of 10.4% in school attendance because of drought. More

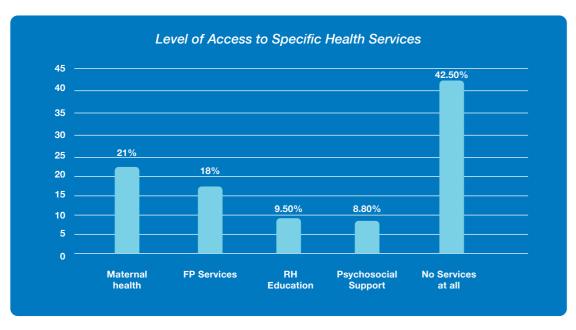
girls (13.9%) than boys (9.3%) were not attending school before crisis. The proportions increased to 14.3% and 13.5% respectively since the drought. The common reason given for not sending children to school is lack of enough money to send both children to school. Children who do not go to school help with domestic work. 22% of girls who do not go to school help with domestic work compared to 4.6% boys who help with domestic labour.

3.2.5 Access to Health Services

When the respondents were asked if they have safe access to health facility, only 50.7% mentioned having safe access to health facility. A follow up question to know why indicated that 54.9% are not having enough money to pay for health services while 35.7% blamed it on nonfunctional health facility in the area.

3.2.5.1 Level of Access to Specific Health Services

Figure 1: Level of access to sexual reproductive health services



The study sought to know if specific services are accessible to the respondents at community level. Low access was reported across all the reproductive health services with 42.5% of the respondents reporting not accessing any service at all, (figure 1). Psychosocial support was least accessed by the respondents. When asked for reasons for poor access to health services, the respondents mentioned no functional health facilities in the area. This was reported by 35.3%, of the respondents. Major barrier to health services is money to pay for services. This was reported by 53.1% of the respondents. Other barrier mentioned is related to perception of service providers. 8.2% of the respondents pointed at lack of female health staff at facility. This is a pointer to elements of privacy, confidentiality and perception of health service providers.

FGDs and KIIs held in Kargi, Korr, and North Horr reveal that almost everyone (boys, girls, men, women and the elderly) has very limited access and control of resources such as water, food, clothes, non-food items, health services, psychosocial support, legal, referrals due to the environmental condition (drought), empowerment, unawareness and geographical distances.

However, in matters of control the adults seem to enjoy more control with men's level of control being superior. In most cases access and control to services such as psychosocial support, referrals, and legal services are absolutely absent. There is very limited access to food, water and health services. In addition, access to essential non-food items is not guaranteed.

The drought crisis precipitated such challenges as: increased diseases due to malnutrition; acute shortage of water; shortage of food; inability to buy clothes; lack of pasture; no markets for livestock; increased deaths of people and animals; lack of school fees since livestock which is the predominant source of family income is not there anymore. unpredictable rain calendar worsening the food situation as no farming can take place; inability to obtain necessities like sanitary pads for the girls due to loss of income. Limited access to the services was reported across all the study sites. A number of factors contribute to this. For instance, lack of sufficient health care facilities hamper access to such services; The other challenge is lack of personnel. Again, the remoteness of the localities introduces the dimension of insecurity. In some places such

as Korr and North Horr, in the absence of such amenities as latrines people recourse to open air or bushes.

3.2.6 Household and Community Decision Making

The respondents were investigated on the key areas of decision-making based on a number of variables: earning money for self, buying or selling assets, visiting relatives, accessing healthcare for self, migration and displacement, whether to have another child or whether children attend school. In all areas of decision making, joint decision was highly reported on whether to have another child (52.0%) or whether children attend school (58.0%). Community decision making is **95.4**% done by elders. More male (62.9%) than female (36.7%) participate in decision making.

Note further that according to KIIs held in Kargi and Korr, men mobilize themselves for meetings at the NABO shrines to make decisions which are then delivered to women and children at home, while in North Horr community's decisions are largely made by elders and chiefs who are largely men. At the household level, even though there were occasions where joint decisions could be permitted, the decision made could easily be vetoed by the man. Women are not so involved since they are considered as children. The decision-making structures as highlighted remain largely the same in crisis or otherwise.

3.3 NEEDS AND VULNERABILITIES

3.3.1 Priority Needs of Respondents

Respondents were asked to rank three priorities for their households from a list of items: health care, food, water, shelter and household items, education, livelihoods, sanitation and hygiene, protection and cash among others. The results from the findings listed indicate that water (46%), food (25.8%) and cash (16.6%) were the most

ranked needs in that order of priority. At the household level there was expressed need for humanitarian support as well. Generally, cash transfer is the most preferred need according to 36.3% of the respondents followed by beddings reported by 20% of respondents. Safer shelter construction materials also reported by 17.6% of the respondents as a need. Others include mosquito net which is preferred by 16.4%, Tarpaulins by 3.3% respondents. Children related needs also include provision of school fees to curb school dropout due lack of school fees after the loss of livestock which has ever since been the main source of livelihood for most families.

During the FGDs it came out clearly that as a matter of priority the youngsters need food, shelter, education, healthcare, water, clothes, sanitary pads (for girls). The older people, apart from the basic necessities already listed, need financial resources or engagement that allow them to access money to take care of the people under them. The disabled persons among them need special care and amenities.

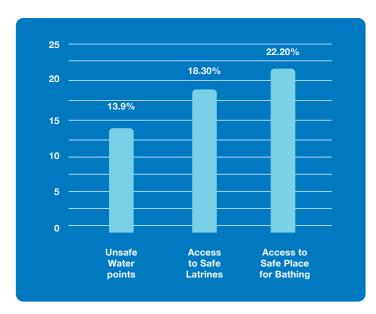
3.3.2 Water, Hygiene and Sanitation

From the list of needs mentioned by all groups of respondents, need for water appears most frequently. Access to water source takes more than 60 minutes a trip for 60% of the respondents. 22.2% of the respondents take between 30-60 minutes a trip to collect water. But the distances to fewer water sources available keep on increasing.

The duration for each trip to fetch water is rapidly increasing proportionally with the increase in distance to water source.

Vulnerability levels also increase for both girls and women who take leading roles of fetching water. The journey to water points is not safe for 13.9% of the respondents, especially girls and women who are prone to insecurity risks along the way. Respondents go to water points in groups to cope with unsafe water point situation. They go in groups of females only (6.7%) and of male and female 4.8%, (Figure 2).

Figure 2: Access to water and sanitation



On sanitation, the assessment established inadequate coverage of latrines within the communities. Access to safe latrine was reported by 18.3% of the respondents. Poor latrine coverage is the cause of poor access to sanitation. 81.7% of the respondents have no access to safe latrine and are practicing open defaecation. Access to safe place for bathing was also reported low by 22.2% of the respondents. 92.7% of the respondents have no bathing place. Out of those who reported having access to bathing place, 6.5% of them do not have separate bathing place for males and females.

3.3.3 Women Menstrual Hygiene Needs

Meeting menstrual hygiene needs of women is a critical sexual reproductive health right. Meeting the needs among women was assessed by asking the respondents what they need about menstrual hygiene needs. The question was for women only. Some of the mentioned needs include disposable pads, reusable pads, soap and women underwear. The use of disposable pads was reported by 19.7% of the respondents, reusable cloths (13.3%), soap (26.8%) and underwear (21.3%) and washing and disposable facilities (18.4%). The survey established that 40% of women of reproductive age do not have

their menstrual hygiene needs met. It is also notable that knowledge of the women of hygiene needs is low among the communities under study. The same finding was reflected in the focus group discussions with young girls aged 13-17 years old across all the study sites.

3.3.4 Vulnerability at Community and Household Level

The emergence of drought has resulted to immeasurable vulnerability of girls, boys, men and women in varying portions. Depending on their gender and roles, needs and extent of vulnerability vary too. For instance, young boys and girls are subjected to forced child labour. They drop out of school due to lack of fees. Young girls and women lack money to buy sanitary materials. They are also exposed to retrogressive practices such as forced early marriages and female genital mutilation (FGM). Orphans lack parental care and love. The elderly apart from poor health and hunger, also suffer due to the fact that they are considered liabilities since they have no financial resources. There is a case where a minute silence was observed during FGD interview at Kargi when a report was given of an elderly man who passed on because of hunger. The widows lack of basic provisions and often times face physical abuse since they have no men behind them to offer protection. Persons living with disability suffer poor health, hunger and social stigma.

3.3.5 Disease Prevalence in Girls/ Women and Men/Boys and Other Vulnerabilities

Prevalence of different health conditions were investigated between girls and women and for boys and men. Sexually transmitted infections (STI) are higher (26%) among girls and women than among boys and men (9.7%). Urinary Tract Infections (UTIs) was reported at 9.3% among girls and women compared to 11.2% for boys and men. Malnutrition among girls is highest at 25.4% compared to 16.4% for boys. Other health related conditions investigated include prevalence of water borne diseases at 13.8% for girls and women and 11.2% among boys and

men. This is linked closely with skin disease and diarrhoea which were reported at 9.7% and 39.2% for girls and women respectively compared to 14.2% and 37.3% for boys and men. According to the survey, girls and women are more vulnerable to STIs than boys and men.

3.4 COPING STRATEGIES OR MECHANISMS

"There has been long season of drought. Livestock have died in large numbers due to lack of pasture and water. No clean water for drinking, no food to eat since we have been depending on livestock..."

Comment made during an FGD with male adults in Korr.

The foregoing experience has provoked mass migration as people move from one place to another in search of pasture, water, security, and food.

To cope with effects of drought and food shortage, many families adopted coping strategies including food rationing. 79% of the respondents mentioned eating less preferred or less expensive foods at least once in a week with 31.5% having done this twice. 95.4% have borrowed food or relied on help from friends or relatives with 31.5% of the households having borrowed more than 3 times in a week. 92.4% have limited portion sizes at mealtime while 93.2% of adults have limited food intake at least one time a week in order for small children to eat. Equally, 93% mentioned reducing the number of meals per day with 37% having done it at least once, 23.3% twice and 13.9% thrice and 18.8% more than 3 times. Asked how they cope when needing other help, 49.6% reported having shelter for few nights at a friend when in need, financial and in-kind assistance are also some of the supports they have got. An FGD with boys age 10-13 from Korr reported that since drought, they minimize rate of food taken, skip some meals to save for next day to adapt to situation of food shortage. Additional coping strategies by boys include doing casual labour like digging of toilet, looking for side hustle jobs such as being a security guard to earn a living and relying on family members with salaries for support. Some boys work as herders for pay. Elderly persons are seeking relief food from NGOs. The men supplement by borrowing money from friends to enable them support their families.

FGDs with young girls aged 13-17 from Kargi documented that girls stay with neighbours to get food and drinking water. Some of the girls borrow sanitary pads from friends; some try making mandazis to sell so that from the proceeds they can afford other items. They also make beads for sale on the market day. Occasionally, they borrow detergents. At worst parents or older people (Kargi, Korr, and North Horr) sell animals to buy clothes, food and building safe shelter. In addition, the people rely on salaried family members. Others are seeking the intervention of other organizations to bring water and cash transfers from such organizations like National Drought Management Authority (NDMA).

FGDs revealed that some community or household members have acquired different skills and capacities to bolster their coping strategies. Some boys are into peer counselling, looking after animals, taking care of siblings; volunteering at local schools, riding motorcycles for commercial purposes and repairing motorbikes, small businesses like football watching DSTV dens, barbers' shop and retail shops. Girls and women all have gone into knitting, beadmaking, fetching water and firewood, acting and dancing/singing, sisal making, making mats, plaiting. Other women play part in building houses in exchange for money (Kargi). Men construct shelter for the animals, fencing, digging toilets and wells, riding and repairing bikes. Elderly men preside over community cultural practices and community meetings; they are caring for children while mothers are away (Kargi) and watering animals. Klls in Kargi and Korr also indicated smart couples in NAWIRI also provide guidance and counselling for families. However, not all strategies are

sustainable in all circumstances, and life therefore remains a constant struggle during the drought crisis.

3.4.1 Humanitarian Assistance

Focus group discussions established that study communities depend on humanitarian assistance as a coping strategy against the crisis. Of the interviewed households, it was established that not everyone in the community is able to access assistance. 58.9% of the respondents have accessed some humanitarian assistance before. 20% of the households received assistance in the last 30 days prior to the assessment. By location, Laisamis sub-county is leading in access to humanitarian assistance by 67.4% respondents confirming the claim, while North Horr is far behind by 32.6%. It was further found that assistance is collected mostly by women 63.9%, men 26.1% and children (girls 5.9% and boys 4.2%). Those who have never accessed assistance were asked why, and 14.7% of them mentioned that priority is always given to men. 17.4% reported that no female staff is providing such services. When asked whether they have been always consulted about their needs by aid offering organisations, 31.1% responded no to the question. Further, when the respondents were asked to mention how they would prefer to receive humanitarian assistance, 55.4% of the respondents gave more preference to cash transfers and 30.1%. to service delivery. Preference for vouchers and in-kind were reported at 8.5% and 6% respectively.

Klls held in Kargi, Korr and North Horr reveal that top issues for consideration under humanitarian assistance are: food security, clean and safe water, healthcare services, gender-based education, livestock and pasture, education and training for children and adults, security and protection from hostile communities.

Ordinarily, to address some of the concerns above, community members engage in doing casual labour for income, seeking the assistance of NGOs in educating girls on gender-based violence, education of community members on environmental conservation in effort to arrest effects of desertification; selling livestock to get cash for other needs; report crisis situations to

authorities like the county government or chiefs or even other concerned agencies.

At community level, some of the interventions made to cope with the humanitarian crisis include: peace meeting with neighbouring communities; environmental conservation; destocking to reduce overgrazing; digging of dams and wells in the locality to address water shortage; sensitization through radios and other baraza like meetings.

Some of the humanitarian agencies involved through interventions include: KDEF - provision of food and school fees for needy students.; They also bring water using bowsers, drill boreholes; RED CROSS provide cash transfer and destocking services; PACIDA provide cash transfer; IREMO/ KDEF - provide food items; NAWIRI/CARITAS take care of health and wellbeing of children with malnutrition.

For effective implementation and administration of the humanitarian interventions, KIIs recommended that each NGOs to do a different line of needs to avoid duplication and overplaying only one of humanitarian assistance; plan with community to have a dialogue with NGO's before administering their activities within the community; educate community on how to invest with their livestock by selling some and save money. This will reduce large number of livestock hence reduce overgrazing; Red Cross should have community volunteers who community members can easily access in case of emergencies.

3.5 SECURITY AND PROTECTION FOR INDIVIDUALS

3.5.1 Living Arrangements

Of the 460 households, 37.6% respondents live in female headed households 93.0% in adult (18-60) headed households, 62.4% in male headed households and 2% in child (<18) headed households, the elderly (>60) headed households comprised of 5.0%.

3.5.2 Settlement Challenges

88.9% of the households are living in rural area

and 90.7% of the respondents live in make shift shelter. 98.8% of the respondents reported that they reside in own settlements. 3.5% are living in open air/on street. The conditions of the homes were also assessed and the study found that 1.1% are living in completely destroyed home; 24.8% in lightly damaged home and 18.3% are living in partially damaged homes. The settlement challenges are closely associated with mass movement for water and pasture resulting from perennial drought. Displacements were reported to have occurred in some areas, especially in Sulate and Harare villages in Korr where households had been displaced in temporary settlement. The study assessed the conflict intensity within the settlements prior to the study. Though the situation was calm after some interclan conflicts few months prior to the study, sporadic and frequent fighting were reported to have occurred more than once per week. 87% of the respondents reported no fighting.

3.5.3 Perception of Security

Security challenges with displaced persons or people living in the settlement site were investigated. The survey found that lack of information pertaining to assistance on matters security is most frequently mentioned at 28.2% of the respondents. Other concerns include personal

security17.9% and unemployment 18.8%.

3.5.4 Security concerns for Women, Girls

Security concerns affecting women or girls was also investigated. Women and girls are concerned about safety at community, sexual abuse/violence, violence in home, attacks when travelling outside home and lack of privacy and insecure houses. From the study, security concerns reported for women include no safe space at community 6.2%; sexual abuse/violence 14.5%; violence in home 16.8%; attacks when travelling outside home 11.2%; inability to access service12.3%; no enough privacy11.8%; and lastly house or dwelling insecure or has no locks 20.2%. Similarly, girls like women have similar security concerns reported as follows: no safe space at community 6.0%; sexual abuse/violence 15.2%; violence in home 11.2%; attacks when travelling outside home 11.0%; unable to access service 10.7%; no enough privacy 14.7%; house/dwelling insecure/ has no locks 17.3%. Being asked to marry by their families 11.1%; attack when moving within community 2.7%.

In summary, 18.3% of the respondents reported increase in security concerns since emergency. Elderly men like women are also affected by



security risks.

"We don't feel safe alone when we don't have anybody on our side especially at grazing land, we might be attacked and since we are aging, we don't have that energy to fight against our enemies."

Posed an elderly man in key informant interview.

Strong men also expressed fear of attack from enemies and neighbours from across the border of Ethiopia.

"We feel unsafe during the night due to the insecurity of temporary site(fora) and also migrating from home to fora the temporary satellite".

A man lamented in an FGD with men.

comparatively, girls have a bigger security risk from within as they are prone to being asked to marry early by the family. The common security concerns for women/girls since emergency is worrying. There are increased incidences of rape, sexual harassment or indecent touch, domestic violence, child, early and forced marriage and unions (CEFMU) and incidences of female genital mutilation. Of all the respondents interviewed, 10.9% of the respondents know of a woman or a girl who underwent form of protection violation in the last 6 months prior to this study.

A summary of FGDs in Kargi, Kargi and North Horr, list violence at home as part of the security concerns in the Marsabit county. As a matter of fact, there is quite no safe place for the community as sexual abuse and gender-based violence is a rampant security risk especially for women and girls. This occurs when they are out there fetching firewood, collecting water and attending schools over distances which involve walking through bushes and thickets. Boys' security is compromised when they in lonely grazing fields, whether day or night. Men also experience attack by hostile community while they herd livestock. Evening times are most unsafe for women and even men as insecurity come due to fear of sexual abuse, physical violence in such places as Illeret, Bullukh, Ell-vibo, Gor Wolle etc. There is also attack from neighbouring communities (Ethiopia) and bandits (The Rendile).

3.5.5 Reporting Security Concerns

The survey also investigated presence of protection from violation reporting structures within the community. Asked whom do women and girls most often go to for help when they fall victims of some forms of violence. 43.3% of the respondents reported going to community leaders, 26.7% to family members, 16.7% to police, 3.3% to healthcare provider, 6.7% to an NGO and 3.3% to a friend. However, it was never asked about the level of support they have got from those persons. It is evidenced that the

Protection Violation Incidences in last 6 months in the neighbourhood

12.4% RAPE

16.9% SEXUAL HARASSMENT

16.9% FGM

14.6% DOMESTIC VIOLENCE

39.3% CEFMU

2.9% OTHERS

community reporting structures exist at all levels, but their ability to effectively manage the levels of risks need reassessment in view of the escalating incidences of protection violations.

Although FGDs and KIIs indicate the security concerns or threats can be reported to village elders, chiefs, parents, friends, police stations or other such authorities and human rights organizations, conversations also reveal that there are no specific protection interventions available in the communities. More specifically, women and girls need health and gender-based violence interventions to stave off such occurrences as forced early marriages and female genital mutilation, among other threats.

3.5.6 Services Available for those who have been Violated

For the known protection from violation

incidences, only 10.4% of the respondents confirmed knowledge of readily available services for women and girls who have experienced protection violations in the community. Household survey, FGDs and KIIs show that the known services available in the community include trauma counselling, post exposure prophylaxis (PEP), medical care, referrals, case management, legal services, psychosocial support and monitoring and follow ups. Case management and monitoring and follow up were reported by most respondents as most available services at community. While in some cases boys, girls, men and women were unwilling to seek services, some due to stigma, fear, and perhaps predominant cultural mindset around sexuality just keep them off.

3.5.7 Strategies used in Protection Against Violations



The study investigated coping strategies used against protection risks by individuals, family and community. Different strategies were mentioned as being used by individuals, family and community members to reduce different risks they face. These include seeking support from family, seeking support from religious leaders, access centres for women, approaching community leaders, talk to friends and getting support from civil society or NGO. These varied in scope. Most respondents (38%) and (33%) reported for self and family respectively (figure 3). Religious and community leaders are equally important levels of support to report to. The NGOs also contribute a lot in supporting families and communities to tackle the problem. The strengthening of these community structures and proper coordination would go a long way to restoring sanity and security of vulnerable groups from these communities. Family structure is critical as first point of response against protection from violence.

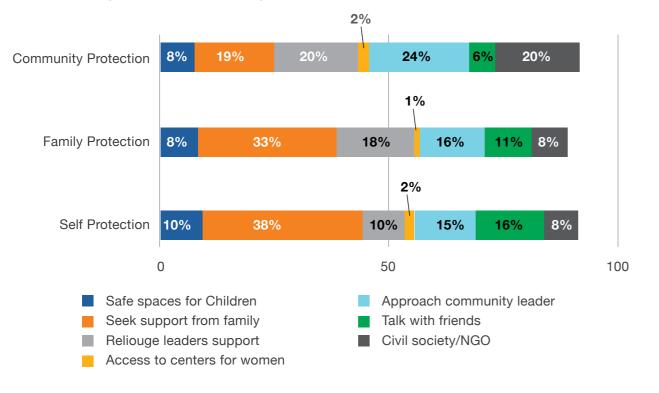
Ordinarily women walk in groups when going to fetch water and other necessities, older men

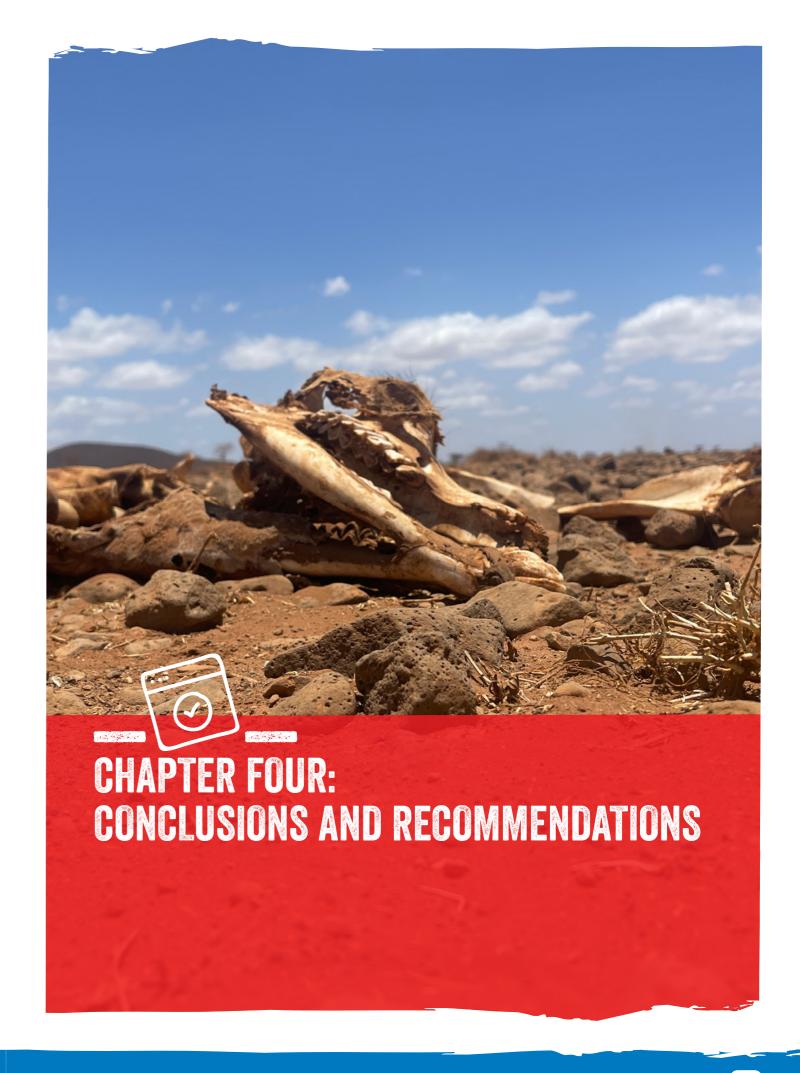
stay at home with younger children and boys and girls live in struggle through the crisis in need of basic necessities.

3.5.8 Factors Limiting Freedom of Movement

From the study, 31.8% of the respondents reported security risk as one of the factors limiting freedom of movement within the study communities. This is also contributed to by cultural barriers mentioned by 20% of the respondents, lack of cash and cost of transport was also reported by 25.8% of the respondents as one other factor restricting movement. Security risks such as the threat of attacks from animals, bandits or neighbouring communities also featured greatly as a factor that restricts movement to other locations away from settlement locations.







CONCLUSIONS AND RECOMMENDATIONS

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4.0 CONCLUSION

The drought, food and nutrition insecurity and water scarcity continue to worsen in Marsabit due to four consecutive failed rain seasons. The drought situation has diminished pasture and browse availability resulting in livestock deaths, lower milk production and increasing malnutrition among communities. Women, children, people with disabilities and the elderly people in our assessment have been left behind in villages as men travel out to access water and forage.

Incidences of Sexual Gender-Based Violence (SGBV) were reported to be on the rise across all the sites, a situation that is attributable to the ongoing drought and hunger crisis. An increase in protection concerns against children, girls and women were reported by survey respondents. Incidences of rape, domestic violence, female genital mutilation, early and forced marriages and sexual harassment were reported to be on the rise.

It is evidenced that the community reporting structures exist at all levels, but needs their capacities strengthened in view of the escalating incidences of protection violations and accompanying risks.

Before hunger crisis, findings indicated that most children were still attending school. Since the drought, slightly lower number of respondents reported that their children attended school. The drop of 10.4% in school attendance may be linked to challenges posed by drought. More boys than girls attended school before compared to since drought. Boys are dropping from school to engage in domestic work to cope with livelihood challenges of drought.

Men, boys, women and girls in the host communities all have similar critical needs including food, water, education or training, healthcare and psychosocial support. Sanitation facilities, shelter and protection needs were also of primary concern to them. The capacity of men to provide for their families in most communities

has been gravely compromised by the drought conditions. This has been occasioned by the rampant death of livestock that was the primary source of income. The death of one man due to hunger was reported during the period of assessment.

Gender roles and burden of care have shifted with more women carrying the bigger burden of assuming productive roles of taking care of families and meeting their basic needs. All the women reported to have taken up the role of taking care of children, looking for work to earn living, looking after livestock, trekking long distances for water and taking extra time to go for humanitarian aids to support families.

Many women and girls identified lack of or inadequate access to menstrual hygiene needs across the four regions. These included disposable pads that were the most cited, soap, reusable hygiene cloths or pads, underwear and washing or disposal facilities. In addition, incidences where men would engage in marrying off their girls in a bid to make money or get livestock to sell for money to buy livelihood stuff for their families.

The following were gaps noted for further assessment. Security concerns cut across but it was not clear if disability as a vulnerability could exacerbate their situation. Further the assessment on the effect of drought on this category is also key.

Another group of interest noted during the assessment was women who have been segregated not at will but because of their social status in the community. They fell pregnant before marriage and treated with very little to no regard in terms family asset inheritance, distribution of community resources and participation in social gatherings. This category is popularly referred to as 'chaban'.

4.1 RECOMMENDATIONS

Findings indicated glaring humanitarian needs with significant shift in gender roles where women take up productive roles to sustain their families. Many of them are becoming the sole breadwinners in many households. Interventions should be designed to focus in household lifesaving interventions in the short term with women to enhance their ability to feed their families and meet other critical basic survival needs. Humanitarian assistance should be integrated with addressing protection concerns of women and girls.

FOOD SECURITY

- There is need for multi-sectoral response in consultation with affected communities addressing water shortages; access to food; life-saving nutrition; protection and menstrual hygiene needs of girls. We propose provision of multi-purpose cash transfer where appropriate as it presents better/ positive multi-sectoral outcomes.
- Advocate for scaling-up of gender responsive, unconditional social protection and income support measures for the most affected and vulnerable families, including child and femaleheaded households, families with young children and other vulnerable groups.
- Advocate for additional resources to the county government and demand for accountable implementation food and nutrition assistance and livelihoods protections programmes.
- More investment is urgently needed to build communities' capacities for resilience to climate-related shocks through expanding asset creation and safety nets; providing climate resilient seed varieties, other farming inputs and production support such as control of pests and diseases, post-harvest techniques, and value-addition through lowcost food processing and preservation to reduce vulnerability among child and womenheaded households.
- Invest in assessments and monitoring of potential conflict locations and prioritize

inclusive and women-led peace building initiatives such as sustained community dialogue meetings, and cross border engagement to resolve conflict over resources and other triggers.

WASH

- Invest more in the urgent provision of water trucking services while supporting the repair, rehabilitation, extension and maintenance of water structures and systems in all communities, including in schools where the school-feeding programme has been disrupted due to lack of water.
- Actors including Plan International Kenya is encouraged to collaborate with the local government in intensifying construction of water harvesting facilities such as community dams, and drilling and maintenance of boreholes, and promote the development of community-based livelihood assets around the water establishments and nutrition gardens.
- Advocate for improved access to sanitation services. More specific attention to toilets and bathing facilities will help to avert cases of sexual violence against women and girls, and reduce public health related conditions including diarrhoea.

PROTECTION

- Provisions for increased protection services must be prioritized for strengthened prevention and response to sexual and gender-based violence, exploitation and abuse.
- Build capacity of caregivers, parents, adolescent girls, young women, women, PWD, community leaders and paralegals to be proactive and aware of protection mechanisms including reporting processes.
- Humanitarian actors including Plan International Kenya should invest in the needed capacities to address child safety concerns, dignity and wellbeing during implementation of programmes to avoid causing harm and ensure that accountability mechanisms, including child-

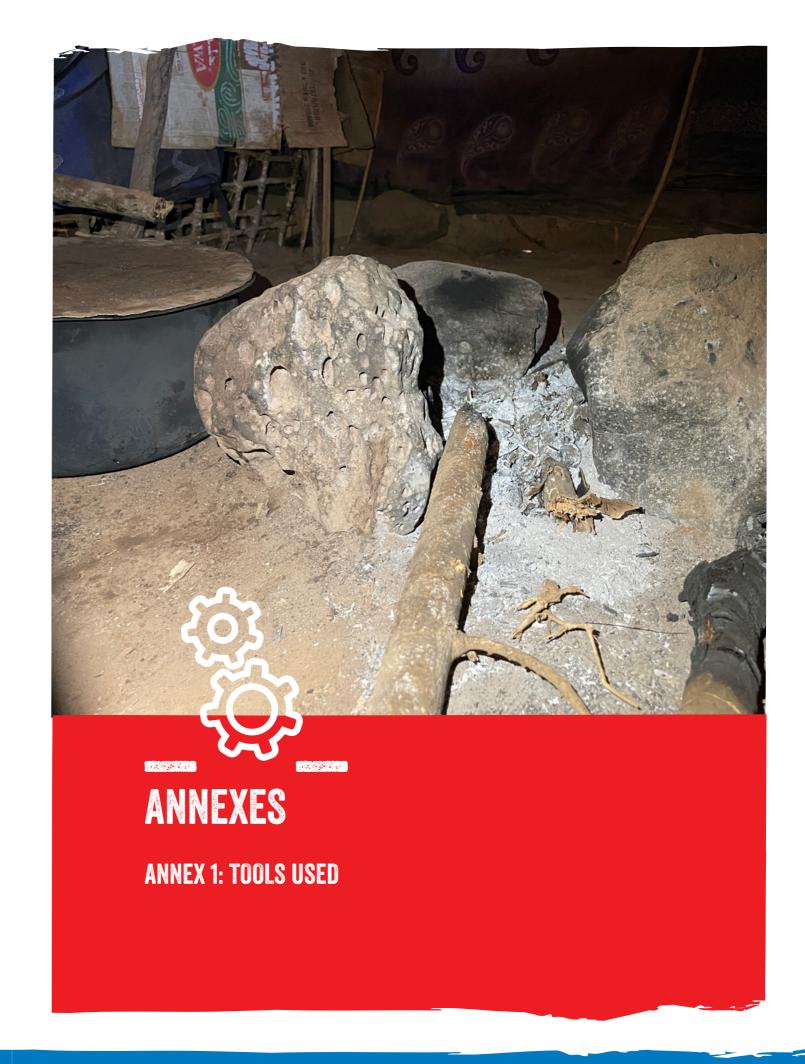
friendly feedback mechanisms are established to provide gender and age-responsiveness, safe and confidential ways for children and young people to receive information, provide feedback and meaningfully participate in influencing humanitarian programming.

EDUCATION

- Provide school meals programme.
- Advocate for expansion of the school meals programme ensuring that all schools have adequate infrastructure and good hygiene conditions to prepare meals every school day.
- Advocate for investment in school and homebased food production solutions such as school nutrition gardens and community food banks.

SEXUAL REPRODUCTIVE HEALTH AND RIGHTS

- Comprehensive menstrual hygiene awareness creation and provision of Non-food items including hygiene kits -reusable, disposable pads, women panties and soap to adolescent girls and young women
- Strengthen health service provision systems to offer quality medical care and sexual reproductive health services including counselling, psychosocial support services, referral systems, and monitoring and follows ups.





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For over 80 years, we have supported girls and boys and their communities around the world to gain the skills, knowledge and confidence they need to claim their rights, free themselves from poverty and live positive fulfilling lives.

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