A. Introduction

Kenya is the fourth highest recipient of CERF funding globally since the inception of the Fund in 2006. Humanitarian agencies have received a total of US$ 140,470,417 from 2006 to 2010 with the bulk of funds received through the Rapid Response Window representing 73 per cent of total funding. Contributions peaked highest in 2009.

B. CERF accomplishments

**Contributes to saving lives** – A CERF Rapid Response grant for protection of victims of the 2007 to 2008 post-election violence victims enabled critical humanitarian response in areas such as shelter construction carried out by the International Organization for Migration (IOM). Some 700 shelters were constructed for displaced populations. Additionally, CERF funding enabled the organization to leverage funding from three other donors (including the Government of Kenya) to continue building more than 27,000 additional shelters.

**Contributes to bridging critical funding gaps** – With escalating needs triggered by repeated drought and influxes of refugees into Kenya, humanitarian needs normally outstrip the available funding. CERF played a critical role in bridging the funding gap for sectors such as food assistance and multi-sector assistance to refugees, particularly at the peak of the Somali crisis that triggered huge influx of refugees into Dadaab camp. In 2009, CERF funds enabled the urgent need to relocate the refugees from Dadaab to Kakuma.

**Contributes to recovery and sustainable solutions** – Disaster Risk Reduction (DRR) is important given that the humanitarian situation in the country is characterized by a combination of chronic needs and acute shocks, which are mutually reinforcing. The set of circumstances calls for an integrated response that addresses immediate needs and structural causes. Given the recurring episodes of prolonged drought, lack of rain and the vulnerability of the population, continued support is required to ensure that nutritional recovery, for instance, is supported. CERF has been essential in providing technical and logistical support to the Ministries of Health in scaling up nutrition interventions, including the management of acute malnutrition. For example, CERF funding from September 2009 to December 2010 was used to increase the coverage of critical nutrition services and address high or deteriorating levels of acute malnutrition in affected areas. Sustainable systems were established to mitigate impacts of future crises. CERF funding was also instrumental in transitioning from emergency to recovery programmes. The continuation of these essential nutrition services and strengthening of existing systems ensure better preparedness and response for future emergencies. The 2011 Emergency Humanitarian Response Plan (EHRP) is a three-year appeal strategy to address immediate, medium and longer-term humanitarian needs.

CERF funds support response in the early stages of an emergency and early recovery response while the EHRP builds on this through funding of longer-term projects. A coordinated funding approach has enabled a better coverage of needs and beneficiary caseloads.

**Supports coordination** – Participation of sector leads in the prioritization process and decision-making at the Kenya Humanitarian Partnership (KHPT) level has boosted coordination among humanitarian partners.

C. Opportunities for enhancing CERF processes in-country

- **Role of donors** – CERF is considered a large donor. Dialogue among the existing traditional donors in-country is necessary and is seen as a way to enhance efforts to pool funding, ensure transparency of the CERF prioritization and decision-making process and contributes to a process of verification of other funding opportunities in order to minimize duplication of funding. Engagement with donors during the prioritization process through consultations prior to the allocation of envelopes to agencies may improve the process.
- **Enhancing Monitoring and Evaluation impact** – Systematic reporting on results at the beneficiary level remains weak. A results framework will improve that.
- **Adjusting Life-saving Criteria** – The 'life-saving' criteria need to be weighed against the humanitarian context. Elements of preparedness for mitigating an emergency such as for example disease surveillance to halt the spread of cholera and vaccinations for livestock (livestock being the mainstay of pastoralist populations hardest hit by recurring drought and floods) may need to be factored into the life-saving category/criteria. This will enable CERF to respond effectively to the typical nature of humanitarian needs triggered by chronic emergencies such as droughts as is the case in Kenya.
- **Timeframe for implementation of projects** – Agencies have called for exploring the possibility of adopting a longer window period to respond to slow onset/protracted crises as a more appropriate and flexible mechanism to support humanitarian programmes rather than the three-month rapid window that currently exists.