

KENYA - URBAN

HIGH LEVELS OF ACUTE FOOD INSECURITY PERSIST IN THE INFORMAL SETTLEMENTS, DUE TO DIMINISHED LABOUR OPPORTUNITY AND COVID-19 RESTRICTIONS MEASURES.

IPC ACUTE FOOD INSECURITY ANALYSIS URBAN AUGUST – DECEMBER 2020 Issued in November 2020

CURRENT AUGUST - SEPTEMBER 2020		
1.1M 43% of the population analysed People facing high acute food insecurity (IPC Phase 3 or above) IN NEED OF URGENT ACTION	Phase 5	0 People in Catastrophe
	Phase 4	267,000 People in Emergency
	Phase 3	803,000 People in Crisis
	Phase 2	907,000 People Stressed
	Phase 1	518,000 People in food security

PROJECTED OCTOBER - DECEMBER 2020		
1M 41% of the population analysed People facing high acute food insecurity (IPC Phase 3 or above) IN NEED OF URGENT ACTION	Phase 5	0 People in Catastrophe
	Phase 4	234,000 People in Emergency
	Phase 3	797,000 People in Crisis
	Phase 2	931,000 People Stressed
	Phase 1	534,000 People in food security

Overview

It is estimated that approximately 1,071,000 people, representing 43% of the analysed population, were facing high levels of acute food insecurity (IPC Phase 3 or above) between August and September 2020. Approximately 267,000 people were in Emergency (IPC Phase 4), with the Mukuru, Dandora and Kawangware informal settlements in Nairobi County having the highest number of people in this phase: 127,000 people in total. Those facing a Crisis situation (IPC Phase 3) are approximately 803,000 people, with the highest numbers in the Nairobi informal settlements, compared with Mombasa and Kisumu. Although there are people classified in Emergency (IPC Phase 4), all the informal settlements analysed in the three cities are classified in Crisis (IPC Phase 3).

In the projection period of October to December 2020, 1,031,000 people will likely face high levels of acute food insecurity (IPC Phase 3 or above). Of these, 234,000 people across all the analysed informal settlements in Nairobi, Mombasa and Kisumu will continue facing an Emergency situation (IPC Phase 4). The reduction during the projected period is based on the assumption that COVID-19 restrictions have been eased, specifically an extension of the start of curfew hours from 21:00 to 23:00 and the reopening of restaurants and bars. The ease of restrictions is expected to increase working hours and job opportunities as the economy slowly reopens. However, if COVID-19 cases will continue to increase beyond the 5% threshold and the restrictions are reintroduced, the projected numbers will likely increase due to lost income-earning opportunities.

Key Drivers



Price increases

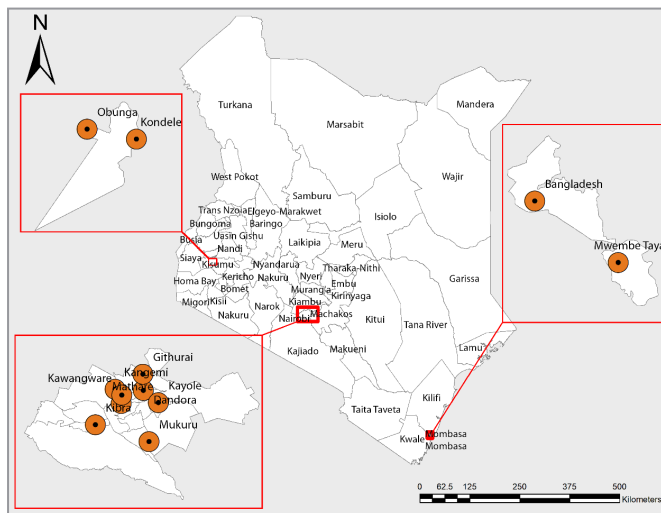
Prices, especially for fresh foods, have increased. This, along with reduced or loss of income, has diminished the purchasing power of households, limiting access to sufficient and nutritious food.



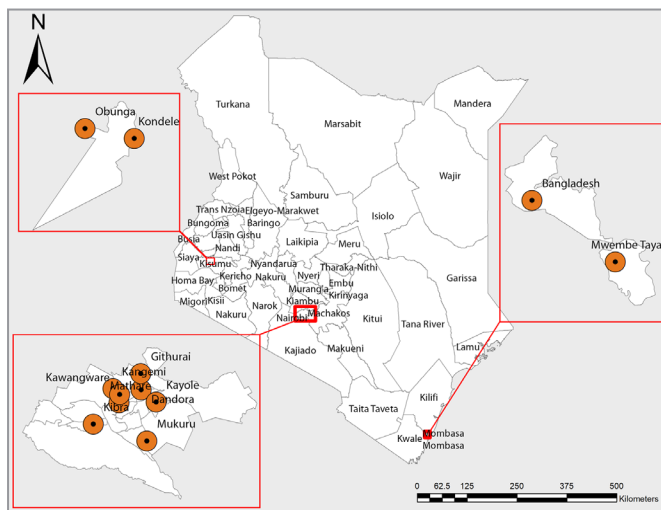
Loss of employment

A reduction of income has been experienced mostly by people who depend on public/private skilled labor and other sectors for income, which amounts to 64% of respondents.

Current Acute Food Insecurity Aug - Sept 2020



Projected Acute Food Insecurity Oct - Dec 2020

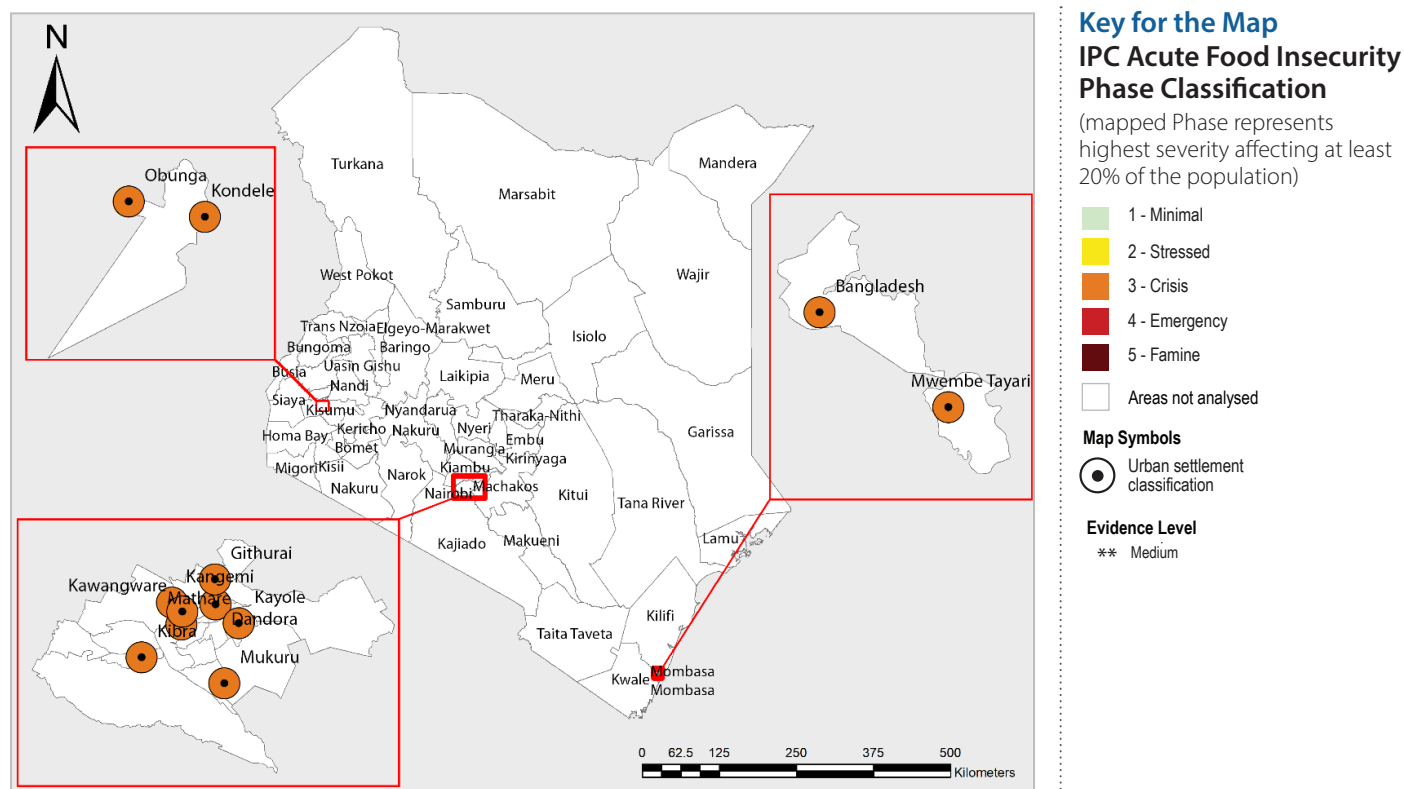


Key for the Map

IPC Acute Food Insecurity Phase Classification
(mapped Phase represents highest severity affecting at least 20% of the population)

1 - Minimal	Areas not analysed
2 - Stressed	Map Symbols
3 - Crisis	Urban settlement classification
4 - Emergency	Evidence Level
5 - Famine	** Medium

CURRENT URBAN SITUATION MAP AND POPULATION TABLE (AUGUST - SEPTEMBER 2020)



District	Total population analysed	Phase 1		Phase 2		Phase 3		Phase 4		Phase 5		Area Phase	Phase 3+	
		#people	%	#people	%	#people	%	#people	%	#people	%		#people	%
BANGLADESH	163,415	16,342	10	57,195	35	73,537	45	16,342	10	0	0	3	89,879	55
DANDORA	295,670	44,351	15	103,485	35	103,485	35	44,351	15	0	0	3	147,836	50
GITHURAI	216,392	64,918	30	75,737	35	54,098	25	21,639	10	0	0	3	75,737	35
KANGEMI	150,369	30,074	20	52,629	35	52,629	35	15,037	10	0	0	3	67,666	45
KAWANGWARE	291,565	58,313	20	102,048	35	102,048	35	29,157	10	0	0	3	131,205	45
KAYOLE	183,873	55,162	30	64,356	35	55,162	30	9,194	5	0	0	3	64,356	35
KIBRA	120,057	24,011	20	36,017	30	42,020	35	18,009	15	0	0	3	60,029	50
KONDELE	82,742	24,823	30	37,234	45	16,548	20	4,137	5	0	0	3	20,685	25
MATHARE	206,564	41,313	20	72,297	35	61,969	30	30,985	15	0	0	3	92,954	45
MUKURU	539,856	107,971	20	215,942	40	161,957	30	53,986	10	0	0	3	215,943	40
MWEMBE TAYARI	154,171	23,126	15	53,960	35	61,668	40	15,417	10	0	0	3	77,085	50
OBUNGA	91,403	27,421	30	36,561	40	18,281	20	9,140	10	0	0	3	27,421	30
Total	2,496,077	517,823	21	907,461	36	803,401	32	267,392	11	0	0		1,070,793	43

Note: A population in Phase 3+ does not necessarily reflect the full population in need of urgent action. This is because some households may be in Phase 2 or even 1 but only because of receipt of assistance, and thus, they may be in need of continued action.



CURRENT URBAN SITUATION OVERVIEW (AUGUST - SEPTEMBER 2020)

According to the 2019 Kenya Population and Housing Census, there are about 19.5 million poor people in Kenya; with 14 million, 1.3 million and 4.2 million living in rural areas, peri-urban and core-urban and informal settlements respectively.

Kenya's capital, Nairobi, has more than 40 areas defined as slums and approximately 60% of Nairobi's population of 4.4 million people live in low-income settlements. The growth of many urban centres can be traced to the pre-independence period, when they were used as centres of administrative and political control by the colonial authorities (UNCHS 1985). The proportion of Kenyans living in urban centres increased from 5.1% in 1948 to 15.1% in 1979, to 18.0% in 1989 and 34.8% in 2000. There are currently 194 urban centres, with 45% of the urban population residing in Nairobi.

Kenya's vast slums and informal settlements are places where people live, work, eat, sleep and raise their children. But the residents of informal settlements must cope with inadequate housing, little access to water, sanitation and other basic services, and the ever-present threat of forced eviction.

For the first time in an IPC Acute Food Insecurity analysis of Kenya, 12 urban settlements in Nairobi (eight settlements), Mombasa (two settlements) and Kisumu (two settlements) were surveyed using Computer Assisted Telephone Interviews (CATI) to assess the food security situation and vulnerabilities faced by urban populations living in informal settlements. Among the selected settlements, it is estimated about 1.1 million people (43% of the population analysed) were facing high levels of acute food insecurity (IPC Phase 3 or above) for the period of August to September 2020. The majority of the population in this situation, 803,000 people, were classified in Crisis (IPC Phase 3), while 267,000 people were classified in Emergency (IPC Phase 4).

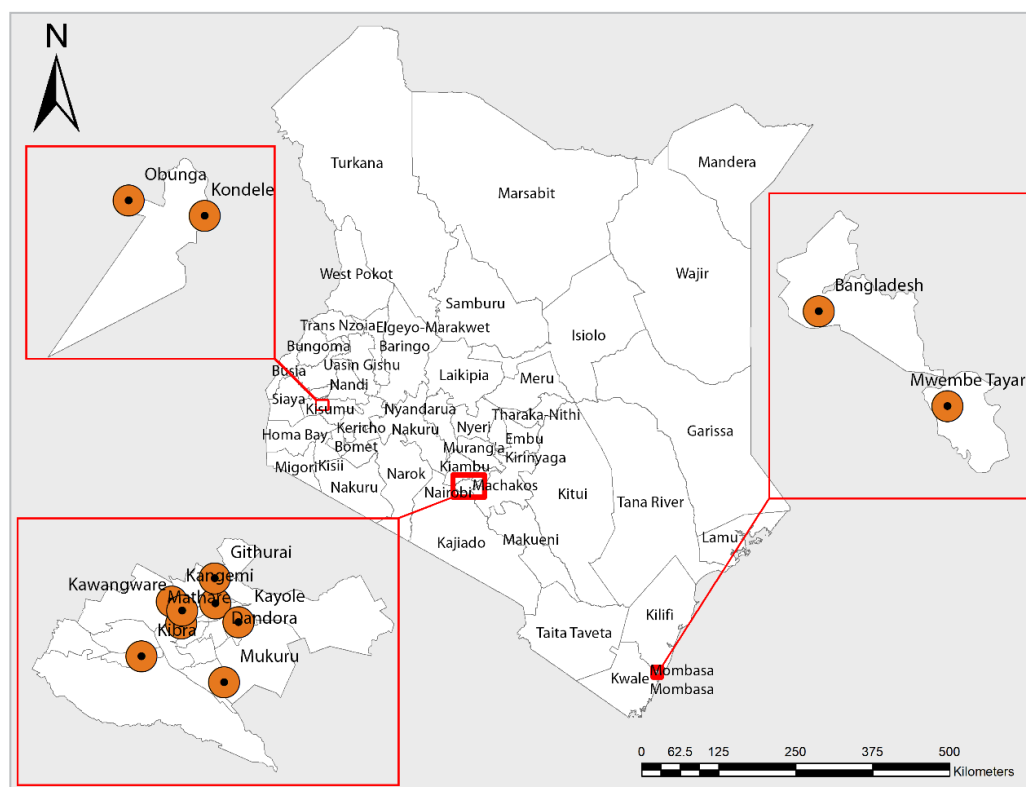
Generally, all the assessed urban informal settlements were classified in Crisis (IPC Phase 3), both in the current and projection periods. The findings indicate the settlements with the highest food insecure populations recorded were Mukuru, Dandora and Kawangware.

Moreover, the survey findings showed over 90% of households were consuming two-three meals a day and around 5% of households were having one meal a day in all three cities. Additionally, in all cities, more than 80% of the respondents reported the number of meals consumed had changed compared to before March 2020, due to loss of income and high food prices. In Nairobi, the majority of respondents had lost their income from the public/private sector, casual labour in hotels, semi-skilled labour and other sources. In Mombasa and Kisumu, the majority had lost their income from labour sources other than the ones mentioned previously.

The government announced various measures to curb the spread of COVID-19, including limiting movement in areas with reported cases; closing public spaces with high human traffic, such as schools and cancelling public events; dusk-to-dawn curfews; and ensuring basic hygiene and social distancing. However, these precautionary measures continue to have negative economic impacts on businesses and workers. The vast majority of the urban dwellers witnessed significant cuts to job across various sectors, income of businesses and available working hours for staff.

¹ GOK 1996:35; GOK 1989:74; GOK 2001

PROJECTED URBAN SITUATION MAP AND POPULATION TABLE (OCTOBER - DECEMBER 2020)



Key for the Map IPC Acute Food Insecurity Phase Classification

(mapped Phase represents highest severity affecting at least 20% of the population)

- 1 - Minimal
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Famine
- Areas not analysed

Map Symbols

- Urban settlement classification

Evidence Level

- ** Medium

District	Total population analysed	Phase 1		Phase 2		Phase 3		Phase 4		Phase 5		Area Phase	Phase 3+	
		#people	%	#people	%	#people	%	#people	%	#people	%		#people	%
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DANDORA	295,670	73,918	25	103,485	35	88,701	30	29,567	10	0	0	3	118,268	40
GITHURAI	216,392	54,098	25	86,557	40	43,278	20	32,459	15	0	0	3	75,737	35
KANGEMI	150,369	22,555	15	52,629	35	60,148	40	15,037	10	0	0	3	75,185	50
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OBUNGA	91,403	27,421	30	41,131	45	18,281	20	4,570	5	0	0	3	22,851	25
Total	2,496,077	533,741	21	931,071	37	796,909	32	234,356	9	0	0		1,031,265	41

Note: A population in Phase 3+ does not necessarily reflect the full population in need of urgent action. This is because some households may be in Phase 2 or even 1 but only because of receipt of assistance, and thus, they may be in need of continued action.

PROJECTED URBAN SITUATION OVERVIEW (OCTOBER - DECEMBER 2020)

According to a study by the Ministry of Health (MoH) and partners, data indicates that COVID-19 infections likely peaked in May in Mombasa and in July in Nairobi, pointing to a flattening of the COVID-19 curve and a projection of much lower deaths than anticipated. Following already easing restrictions and protocols with regards to activities such as religious and social gatherings, sporting activities, and reopening of schools, it is likely that there will be a further significant easing of COVID-19 restrictions by December 2020. However, restrictions such as the nationwide curfew, mandatory testing at border points for truck drivers, restricted movement of persons and passengers in and out of Ethiopia, Tanzania, Uganda and Somalia, and the enforcement of social distancing measures are expected to remain in place beyond December to further reduce the number of confirmed cases. Increased social and economic activities will likely improve household income and food access, but these improvements will be gradual. The majority of these measures will likely continue to have a moderate negative effect on income earning opportunities, revenues and staple food supply chains.

According to the latest World Bank Kenya Economic Update (KEU), the initial economic growth forecast for 2020 has been revised downward from 2.3% to 1.5% in 2020 in the baseline scenario, with a potential contraction to 1.0%, factoring in extended COVID-19-related economic disruptions. Despite an extension on tax reliefs on income and value added tax (VAT) until December 2020 and July 2021 respectively, most sectors will likely not be able to make a full recovery between now and mid-2021, and will likely be operating at below-average levels.

Driven by above-average local and regional maize harvests, Kenya's maize supply is expected to be adequate to fill supply gaps. However, COVID-19-related control measures, such as closures and mandatory screening at the borders, will continue to slow down the staple food supply chain. Maize prices in the urban reference market of Nairobi, a proxy for the major urban areas, are expected to remain within five-year averages, but rise to above-average levels in May 2021. Bean prices, given the below average production affected by the above-average rains, will likely remain above average throughout the projection period, despite a drop, as harvests and cross-border imports become available in the markets.

Current humanitarian assistance, in the form of cash transfers equivalent to 50% of daily kilocalorie needs, to 70,500 households in Nairobi's informal settlements by the World Food Programme (WFP), is expected to continue through November 2020. However, it is expected that the results of the urban assessment that quantify food insecure populations, carried out in the informal settlements of the major cities of Nairobi, Mombasa and Kisumu, will aid in the mobilization of humanitarian assistance and mitigate the severity of food insecurity among the poor in other urban areas.

During the projection period of October to December 2020, improved household food access is expected as staple food prices drop (due to harvests from the high and medium producing areas), and cross-border imports remain available through February 2021. With the expected flattening of the COVID-19 curve, the economy is set to improve with an increase in economic activities and, consequently, income earning opportunities. Despite a forecasted improvement, the economy is unlikely to bounce back to normal levels and a significant proportion of households will experience below-average income earning opportunities and incomes. Low income will likely remain the main driver of food insecurity, as households are forced to apply Stress, Crisis and Emergency consumption and livelihood coping strategies that could result in slight to moderate household hunger and depletion of assets. Income earning opportunities are expected to increase from the end of 2021 onwards. However, they are likely to remain below average and will continue limiting the ability of households to access their basic food requirements to various degrees. Households targeted for humanitarian assistance are likely to receive assistance at least through November 2020, while, despite some improvements in terms of available household income, long periods of coping will erode households' capacity to meet their basic needs, and at least 32% of households (797,000 people) will likely be in Crisis (IPC Phase 3), while 9% (234,000 people) will likely be in Emergency (IPC Phase 4), adding up to a total of 1.03 million people likely facing high levels of acute food insecurity (IPC Phase 3 or above).

HUMANITARIAN FOOD ASSISTANCE IN URBAN SETTLEMENTS

The government initiated a cash transfer programme in the urban informal settlements to cushion vulnerable households against the negative economic impacts of COVID-19 restrictions and measures that resulted in a loss of jobs and livelihoods. The programme was initiated in April 2020 and targeted approximately 20,000 households in Nairobi with Ksh. 4,000 per month.

Since July through September, WFP has cumulatively reached 55,777 households (378,947 beneficiaries) with Ksh. 4,000 per person per month, targeting all the informal settlements in the 11 sub-counties in Nairobi. The total targeted households in the urban response programme is 70,877 households. Additionally, WFP has completed the registration and verification of 24,000 vulnerable households in the six sub-counties in Mombasa to be targeted in the cash transfer programme to receive Ksh. 4,000 per person per month beginning 28th October 2020.

GiveDirectly, an International NGO, has been targeting approximately 50,000 people in selected informal settlements in Nairobi with multi-purpose cash transfers of Ksh. 9,000. The COVID-19 response started in April 2020 and is still ongoing.

RECOMMENDATIONS FOR ACTION

Response Priorities

- Provide cash/food assistance and sustained safety net programmes to food insecure urban populations, with linkages to integrated programming in building resilience of vulnerable households to future shocks.
- Invest in alternative livelihood sources that will promote food and nutrition security and dietary diversity in the urban informal settlements.
- Implement Integrated Management of Acute Malnutrition (IMAM) to reduce the associated risks of malnutrition and COVID-19, particularly treatment of moderate acute malnutrition among children aged 6-59 months, pregnant and lactating women and the elderly.
- Promote water and sanitation programmes to improve access to safe drinking water, including improvements in health and hygiene practices.
- Strengthen screening for acute malnutrition and prepositioning of nutrition commodities in the context of COVID-19 IPC guidelines.
- Make behaviour change communication interventions to improve health-seeking behaviours.
- Explore the potential for urban agriculture and its possible contributions to food and nutrition security in densely populated informal settlements.
- Redouble efforts to understand the complexity of urban food insecurity, to address shocks and hazards in a systematic manner, ensuring that interventions geared towards addressing food and nutrition security are relevant to the urban context.
- Conduct regular market and price monitoring in densely populated urban markets and carry out periodic monitoring of supply and demand indicators.
- Formulate appropriate interventions to address constraints that prevent traders from meeting effective demand and develop mechanisms for improving supply through emerging technologies.

Risk Factors to Monitor

- **Price increases:** Although commodity prices are currently stable, trends in prices should be monitored in the event of sudden hikes that will limit household food access. The COVID-19 lockdown and movement restrictions instituted by the government have eroded the limited opportunities for informal income for many of the slum dwellers. The lockdown of Nairobi County affected the movement of key commodities into the city, further affecting food commodity prices.
- **Loss of employment:** Loss of employment has been a major factor in driving food insecurity and with the relaxation of COVID-19 restrictions, it is expected that there will be an increase in employment opportunities that will likely improve household income and reduce food insecurity. Despite the expected easing of COVID-19 restrictions in October 2020, recovery of business activities in the formal and informal sectors will be slow, sustaining job losses and income reductions.
- **Disease:** Reduced incomes are likely to continue compromising household access to clean water, increasing the risk of waterborne diseases.

PROCESS AND METHODOLOGY

Inception meetings of the IPC Technical Working Group and the IPC Regional Support Unit were held in June 2020 to decide on IPC analysis dates, analysis areas and other modalities. Household assessment data was collected remotely by Geopoll through mVAM between 4th-13th August 2020 in slums, informal settlements and lower middle-income settlements in Nairobi, Mombasa and Kisumu. A virtual IPC analysis workshop was held from 24th August – 4th September 2020. Classification is then based on the convergence of evidence of current or projected most likely conditions. The analysis was done in accordance with the IPC Technical Manual Version 3.0 and recently-developed guidance provided by the IPC Global Support Unit (GSU) on ways of conducting IPC trainings and analyses in the context of the COVID-19 pandemic. By leveraging existing technologies and tools, such as the web-based IPC Information Support System (ISS), the IPC GSU provided an alternative approach to conducting IPC trainings and analyses through virtual modalities. The urban area analysis was conducted with the participation of representatives from MALCD, NDMA, UNICEF, FEWS NET, FAO, WFP, with technical support from IPC-GSU. The analysis was conducted by analysts with expertise in the areas of market analysis, statistics, agriculture, livelihoods, risk management, nutrition, as well as GIS. Evidence on key outcome indicators was drawn from an mVAM conducted by WFP through Geopoll, while various reports were used for evidence on contributing factors.

Sources

1. UN- World Food Programme, August 2020; Urban mVAM Household Food Security Assessment in Nairobi, Mombasa and Kisumu
2. UN-WFP Market Prices: https://dataviz.vam.wfp.org/economic_explorer/prices
3. UN-WFP; Impact of COVID-19 on Livelihoods, Food Security & Nutrition: Urban Focus: <https://docs.wfp.org/api/documents/WFP-0000118161/download/>
4. KNBS Survey on Socio-Economic Impact of COVID-19 on Households Report, May 15, 2020; Census Data of 2019; DHIS
5. Seasonal Food Security Outlooks
6. FEWSNET Projection Assumptions
7. UNDP; [Socio-Economic-Impact-COVID-19-Kenya-Policy-Brief-UNDP-Kenya-April-2020.pdf](#)

Limitations of the analysis

- No availability of urban household's nutrition information.
- Delayed urban assessments by GEOPOLL.
- Not enough information on contributing factors like food stocks, market food availability, access to water, etc., that could help analysts make strong and specific conclusions. Analysts had to use expert knowledge and contextualize information.

What is the IPC and IPC Acute Food Insecurity?

The IPC is a set of tools and procedures to classify the severity and characteristics of acute food and nutrition crises as well as chronic food insecurity based on international standards. The IPC consists of four mutually reinforcing functions, each with a set of specific protocols (tools and procedures). The core IPC parameters include consensus building, convergence of evidence, accountability, transparency and comparability. The IPC analysis aims at informing emergency response as well as medium and long-term food security policy and programming.

For the IPC, Acute Food Insecurity is defined as any manifestation of food insecurity found in a specified area at a specific point in time of a severity that threatens lives or livelihoods, or both, regardless of the causes, context or duration. It is highly susceptible to change and can occur and manifest in a population within a short amount of time, as a result of sudden changes or shocks that negatively impact on the determinants of food insecurity.

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Classification of food insecurity and malnutrition was conducted using the IPC protocols, which are developed and implemented worldwide by the IPC Global Partnership - Action Against Hunger, CARE, CILSS, EC-JRC, FAO, FEWSNET, Global Food Security Cluster, Global Nutrition Cluster, IGAD, Oxfam, PROGRESAN-SICA, SADC, Save the Children, UNICEF and WFP.

IPC Analysis Partners:

