

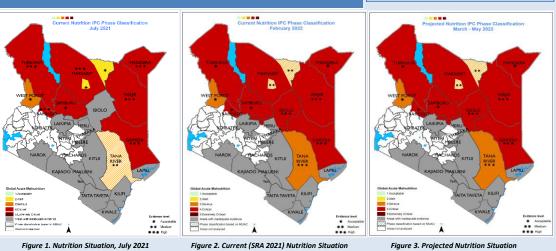
# KENYA NUTRITION SITUATION OVERVIEW, FEBRUARY 2022

### Key situation highlights:

- Nutrition situation has deteriorated though within the same phase compared to August 2021 analysis mainly attributed to the worsening food insecurity.
- The number of children requiring treatment for acute malnutrition has risen by 15.6 percent from 652,960 reported in August 2021.
- The situation is expected to further deteriorate during the projection period of March to May 2022.
- Further scale up of response actions to address the high malnutrition and save lives are required.

#### **Key drivers**

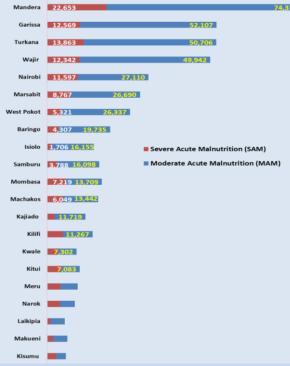
- Worsening Food insecurity with decreasing milk availability across households
   High morbidity
- High morbidity
  Poor water, sanitation and hygiene
- Stock-out of essential supplies for management of acute malnutrition
- Recurrent and multiple shocks



#### Situation overview

According to integrated phase classification for acute malnutrition (IPC AMN) conducted in February 2022, nutrition situation has deteriorated though within the same phase in most counties compared to August 2021 analysis (Figure 1 and 2). Garissa, Wajir, Mandera, Samburu, Turkana, North Horr & Laisamis sub-counties in Marsabit and Tiaty Sub County in Baringo were critical (IPC AMN Phase 4) while Tana River, West Pokot Counties and, Moyale & Saku in Marsabit were in serious phase (IPC AMN Phase 3).

Estimated Caseloads of Children 6-59 Months Requiring Treatment for Acute Malnutrition



Nutrition situation is expected to further deteriorate during the projection period (March to May 2022) except for West Pokot and Tana River counties where the situation is likely to remain similar (Figure 3). The deteriorating situation is mainly attributed to worsening food insecurity situation especially reduced milk production resulting from the cumulative effects of three failed rainfall seasons. Other key drivers include poor WASH, high morbidity and stock-out of essential supplies for management of acute malnutrition. Pre-existing factors such as poverty, low literacy levels, limited livelihood sources coupled with recurrent shocks exacerbate the problem.

Area	Total children (GAM)	SAM	MAM	
	6 to 59 m	Children 6 to 59 m	Children 6 to 59 m	
ASAL	558,507	129,701	428,805	
Urban	66,803	22,144	44,659	
Non-ASAL	129,596	31,668	97,928	
Total caseload				
	754,906	183,513	571,392	

#### Key response actions

- Update contingency response plans with heightened focus on nutrition emergency coordination.
- Further scale up of mass screening for early identification of cases and inform hotspot mapping.
- Scale up outreach services in hotspot and far-flung areas
- Close follow up and implementation of IMAM surge to inform and align response capacity.
- Implement blanket supplementary feeding in the most affected areas to cushion children and women from acute malnutrition.
- Heighten resource mobilization efforts to improve nutrition supply pipeline
- Further scale of nutrition situation monitoring and surveillance
- Advocate for scale up of multisectoral approaches to mitigate the effects of drought on food and nutrition security.

#### **Factors to monitor**

- Nutrition situation across the country given the worsening trends
- Effects of COVID-19 and 2022 general elections on essential services

GAM – Global Acute Malnutrition. MAM – Moderate Acute Malnutrition. SAM – Severe Acute Malnutrition. PLW – Pregnant and Lactating Women. WASH – Water Sanitation and Hygiene.

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Number requiring treatment of acute malnutrition

i i	Total, acutely malnourished children	754,906
\$\$	PLW	103,286



## Estimated Caseloads and Targets of Children 6-59 months and Pregnant & Lactating Women Requiring Treatment for Acute Malnutrition

				alnutrition				
	Global				Moderate Acute Malnutrition		Pregnant and Lactating Women (PLW)	
	malnut	rition						
Area	Total Caseloads	Target	Total Caseloads	Target	Total Caseloads	Target	Total Caseloads	Target
Baringo	24,042	13,098	4,307	3,230	19,735	9,867	1,597	1597
Embu	2,017	1,042	134	101	1,882	941	305	305
Garissa	64,676	35,480	12,569	9,426	52,107	26,054	8,683	8683
Isiolo	17,861	9,357	1,706	1,279	16,155	8,077	965	965
Kajiado	14,648	8,056	2,930	2,197	11,719	5,859	1,824	1824
Kilifi	17,370	10,211	6,103	4,577	11,267	5,633	814	814
Kitui	12,395	7,525	5,312	3,984	7,083	3,541	727	727
Kwale	11,257	6,618	3,955	2,966	7,302	3,651	485	485
Laikipia	6,727	3,669	1,223	917	5,504	2,752	581	581
Lamu	2,185	1,301	833	624	1,353	676	115	115
Machakos	19,491	11,258	6,049	4,537	13,442	6,721	910	910
Makueni	7,701	4,417	2,265	1,699	5,436	2,718	632	632
Mandera	97,031	54,179	22,653	16,990	74,378	37,189	16,933	16933
Marsabit	35,457	19,920	8,767	6,575	26,690	13,345	11,954	11954
Meru	11,718	7,114	5,022	3,766	6,696	3,348	658	658
Narok	10,534	6,474	4,828	3,621	5,706	2,853	1,890	1890
Nyeri	1,234	641	95	71	1,139	570	127	127
Samburu	19,885	10,890	3,788	2,841	16,098	8,049	5,238	5238
Taita Taveta	5,089	3,067	2,090	1,568	2,999	1,499	191	191
Tana River	17,761	9,750	3,478	2,608	14,283	7,142	3,261	3261
Tharaka Nithi	918	477	71	53	848	424	150	150
Turkana	64,569	35,750	13,863	10,397	50,706	25,353	26,220	26220
Wajir	62,283	34,227	12,342	9,256	49,942	24,971	14,388	14388
West Pokot	31,657	17,159	5,321	3,990	26,337	13,168	895	895
Total ASAL	558,507	311,679	129,701	97,276	428,805	214,403	99,542	99,542
Kisumu	7,168	4,416	3,328	2,496	3,840	1,920	1,008	1,008
Mombasa	20,928	12,269	7,219	5,414	13,709	6,854	492	492
Nairobi	38,707	22,253	11,597	8,698	27,110	13,555	2,244	2,244
Total Urban	66,803	38,938	22,144	16,608	44,659	22,330	3,744	3,744
Non-ASAL	129,596	72,714	31,668	23,750	97,928	48,962		
Grand Total	754,906	423,330	183,513	137,634	571,392	285,694	103,286	103,286
	134,500		100,010			200,004	100,200	100,200

ASAL: Arid and Semi Arid Areas. Non ASAL – all counties or areas that are not classified as urban or ASAL.

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