BASELINE ASSESSMENT FINDINGS FOR THE SOMALIA CASH **CONSORTIUM DROUGHT RESPONSE**





7.4

Overview

The Somali Cash Consortium's (SCC) multi-purpose cash assistance % of households by age and gender of the head of (MPCA) programme provides monthly unconditional cash transfers (UCTs) household: to vulnerable drought-affected populations in disaster/conflict-affected Somali regions. The April to June Gu¹ rains were recorded below average, and the 5 consecutive seasons of drought is driving vulnerable population groups across Somalia closer to at risk of famine whilst food prices continue to rise sharply in northern, central, and parts of southern Somalia.²

Acute food insecurity has drastically worsened since the beginning of 2022. According to the Integrated Food Security Phase Classification (IPC), around 4.7 million people were already experiencing "crisis" (IPC Phase 3) or worse levels of food insecurity by May 2022.3

A total of 7.7 million Somalis are estimated to require humanitarian assistance in 2022.4 According to the baseline assessment carried out by Most interviews (62.9%) were conducted with female REACH, most of these households (57.5%), live in the urban areas, 25.2% were agropastoralists while 17.3% pastoralists and were selected based on reportedly headed by men while 16.4% of HHs were their vulnerability.5

The SCC, consisting of six implementing partner non-governmental organisations (NGOs)- Concern Worldwide (the lead agency), ACTED, Cooperazione Internazionale (COOPI), Danish Refugee Council (DRC), Norwegian Refugee Council (NRC), and Save the Children (SCI)- is carrying out an emergency cash intervention to selected beneficiary households in Bay, Middle Shabelle, Lower Juba, Mudug, Banadir, Bakool, Lower Shabelle, Togdheer and Gedo regions of Somalia. This intervention is funded by the European Union Civil Protection and Humanitarian Aid (ECHO) and consists of three rounds of multi-purpose cash Assistance (MPCAs) planned between June and August 2022, distributed to selected beneficiary households across eighteen⁶ districts in nine target regions. Waajid, Belet Xaawo, Afgooye, Jamaame and Doolow districts will receive six rounds of cash transfers, as part of a pilot implemented in hard to reach areas.

To monitor the ongoing impact of the UCT on the beneficiary population, IMPACT Initiatives provides impartial third-party monitoring and evaluation. IMPACT conducted a baseline assessment between the 27th of April and the 31st of May, prior to the first round of transfers, which will be followed by an endline assessment, after the last round of the cash transfers. This factsheet presents key findings from the baseline assessment.

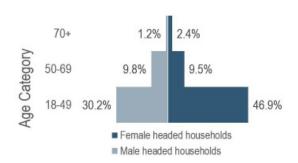
Methodology

The baseline tool was designed by IMPACT Initiatives in partnership with the SCC members. The tool covers income and expenditure patterns, food consumption, dietary diversity, and coping strategies. A simple random sampling approach was used and findings are generalisable to the beneficiary population with a 95% confidence level and a 7% margin of error at the district level. A buffer of 15% was introduced to off-set expected difficulties in reaching the sample size in the follow-up endline assessment. Of the 24,370 beneficiary households (HHs), a sample of 2996⁷ HHs was interviewed remotely via telephone. All results presented have been weighted by the proportion of SCC beneficiary households per targetted district.

Challenges & Limitations:

- Data on household expenditure was based on a 30-day recall period; a considerably long period of time over which to expect households to remember expenditures accurately.
- Due to the length, complexity, and phone-based nature of the interview, respondents were prone to survey fatigue, which potentially affected the accuracy of their responses.
- Findings referring to a subset of the total population may have a wider margin of error and a lower level of precision. Therefore, may not be generalizable with a known confidence level and should be considered indicative only.

Demographics



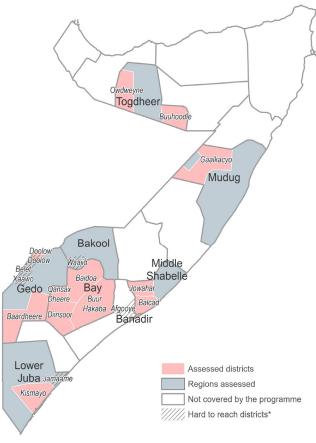
respondents. A higher proportion of HHs (83.6%) were reportedly headed by women. A considerable proportion of HH members (46.9%) were females aged between 18-49

Average household size:

Average age of the head of household: 43.6



Locations Covered



*Partners carried out baseline data collection in the hard to reach districts















Drought Effects



*p Drought Impact

% of households reporting their community having been impacted by the drought in the 6 months prior to data collection:

98% Yes 2% No



Conflict

Of households reporting having been impacted by the drought (n=2930), % of households reporting conflicts within and between communities due to the drought:

84% Yes No 16%





Crop Losses

Of households reporting having been impacted : by the drought (n=2930), % reporting facing any crop losses due to the drought:

> 85% Yes No 15%

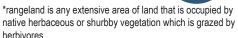


Rangeland Losses*

Of households reporting having been impacted by the drought (n=2930), % of households reporting facing any rangeland losses due to the drought:

> 90% Yes

10% No



Key Impact Indicators

The key indicators include: Food Consumption Score (FCS), Household Dietary Diversity Score (HDDS), reduced Coping Strategy Index (rCSI) and Livelihood Coping Strategies Index (LCSI).



% of households by FCS category:



Average number of meals 2.1 eaten per household per day:



% of households by HDDS category:





The reduced Coping Strategy Index (rCSI) is an indicator used to understand the frequency and severity of changes in food consumption-based coping mechanisms in the seven days prior to data collection when HHs are faced with a shortage of food. The minimum possible rCSI value is 0, while the maximum is 56.

The average rCSI for HHs was found to be 15.6, which indicates that HHs are resorting to severe measures to cope with the shortage of food. The three most commonly adopted coping strategies were found to be:

Relied on less preferred, less expensive food	2.6
Borrowed food or relied on help from friends or relatives	2.1
Reduced the number of meals eaten per day	2.1



% of households by Livelihood Coping Strategy:

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Emergency	33.2%	
Crisis	13.0%	
Stress	41.1%	
None	12.7%	

Income & Expenditure

Expenditure Share

Most commonly reported expenditure categories and the average amount spent on each in the 30 days prior to data collection:8

Food	(50.0 USD)	53.4%
Debt repayment	(11.9 USD)	11.3%
Clothing & shoes	(8.4 USD)	7.4%
WASH ⁹	(7.2 USD)	7.2%
Medical expenses	(6.9 USD)	6.3%

% of households who reportedly spent above the minimum expenditure basket:9

Yes	14.4%	
No	85.6%	

*Economic Capacity to Meet Esssential Needs

Average reported total monthly household expenditure:

99.6 USD

Average reported total monthly household income:

103.4 USD

Average reported income per household member, per month:10

15.4 USD

(i) Spending Decisions

% of households by gender of the reported primary decision maker on expenditure:



Savings & Debt

% of households reporting having any amount of savings at the time of data collection:

> Yes 8.7% 91.3% No



The average amount of savings found for households with any savings was 1.4 USD per household.

% of households reporting being in debt at the time of data collection:

Yes	17.4%	
No	82.6%	

The average amount of debt found for households with any debt was 8.8 USD per household.

Income Source

Most commonly reported sources of household income in the 6 months prior to data collection8:

55.8% Casual labour-construction

25.9% Sale of livestock

23.6% Business

22.0% Casual labour-farm labour



Reported main reason(s) why the household adopted livelihood-based coping strategies in the 30 days prior to data collection (i.e. to access which essential needs):8

90.6% Food

57.2% Health

47.3% Shelter

40.2% Education

39.9% Water, sanitation, & hygiene

*88.5% of the households reported different reasons for adopting these strategies to access essential needs.

Food Sources

% of households by most commonly reported primary sources of food:

52.1% Market purchase with cash

14.8% Own production

12.0% Loan

9.2% Market purchase with credit

Protection and Accountability Indicators

% of households reporting themself or someone in the community having been consulted by the NGO about their needs:

> 21.7% Yes 77.0% No PNA¹⁶ 1.3%

% of households reporting feeling safe going through the programme's selection & registration processes:

> 99.3% Yes No 0.3% PNA 0.4%

% of households reporting having paid, or knowing someone who paid, to get on the beneficiary list:

> Yes 0.1% 98.2% No PNA 1.7%

% of households reporting being aware of any option to contact the agency if they had any questions, complaints, or problems recieving the assistance:

25.0% Yes 75.0% Nο

Of households that reported having raised concerns (n=633), % reporting being satisfied with the response:

70.0% Yes 26.2% No

Partially 3.8%

% of households reporting believing that some households were unfairly selected:

> Yes 0.7% 98.2% Nο PNA 1.1%

% of households reporting expecting that the cash assistance will be appropriate for their household's needs:

> 87.4% Yes 11.6% No PNA 1.0%

% of households reporting feeling that they have been treated with respect by NGO staff up to the time of data collection:

> 99.4% Nο 0.6% PNA 0.0%

% of households reporting being aware of someone in the community being pressured or coerced to exchange non-monetary favours to get on the beneficiary list:

> Yes 0.1% No 97.9% PNA 2.0%

% of households reporting having raised any concerns on the assistance received to the NGO using any of the complaint mechanisms available:

> 21.1% Yes No 78.9%

% of households reporting feeling well-represented by their Village/Camp Relief Committee:

> Yes 96.6% No 2.8% PNA 0.6%

% of households reporting having experienced any negative consequences as a result of their beneficiary status:

Yes

No

0.0% 98.7% PNA 1.3%

Communication*

Among those households reporting being aware of any selection criteria (n=986), the most commonly reported criteria they were aware of:7

83.2% Lack of income

54.0% Lack of assets

32.2% Disability of household member

27.8% Illness of household member

*32.9% of the households reported being aware of at least one of the selection criteria for receiving the cash assistance.

Perceived Wellbeing

% of households reporting having had sufficient quantity of food to eat in the 30 days prior to data collection:

10.8% Not at all 69.3% Rarely 13.1% Mostly 6.8% Always

% of households reporting having had sufficient variety of food to eat in the 30 days prior to data collection:

Not at all 14.8% Rarely 70.0% Mostly 11.3% Always 3.9%

% of households reporting having had enough money to cover basic needs in the 30 days prior to data collection:

Not at all 17.1% Rarely 69.6% Mostly 7.9% Always 5.4%

% of households reporting being able to meet their basic needs at the time of data collection:

> Not at all 18.2% Rarely 58.0% Mostly 11.3% Always 12.5%

% of households reporting the expected effect a crisis or shock would have on their wellbeing at the time of data collection:

Would be completely unable 28.3% to meet basic needs

Would meet some basic 47.6% needs Would be mostly fine 6.7% Would be completely 16.5% fine

Do not know/ no answer

Summary, feedback, and potential issues to follow up on:

Meeting Basic Needs

Findings suggests that the proportion of HHs reporting having been able to meet their basic needs "mostly" or "always" in the month prior to data collection was 33.7%. FCS results suggest that diet diversity is at emergency levels (with 31% of HHs presenting a poor FCS). The average rCSI was found to be 15.6, a value indicating that HHs engaged in varying degrees of consumption based coping strategies. Most households (more than 91%) have no financial savings and many among them are relying mainly on casual labour and sale of livestock as main sources of income. Reflective of this, around 80% of the HHs reported having had sufficient quantity of food to eat in the 30 days prior to data collection only 'rarely' or 'not at all'.

The LCS results show that 33.2% of HHs are engaging in emergency levels of livelihood coping strategies, suggesting that some HHs could potentially soon reach livelihoods exhaustion if no assistance is received. The most commonly reported reasons why HHs adopted LCS in the 30 days prior to data collection were: to access food (90.6%), health care (57.2%), shelter (47.3%), education (40.2%), and WASH items (39.9%). The fact that about 57% of HHs reported to engage in livelihoods coping strategies to meet health needs highlights a situation of increasing vulnerability as unmet health needs could drive HHs to fatal results.

Drought Impact

Findings suggest most beneficiary households experienced negative effects of the drought on their livelihoods; a majority (88.2%) of all households said that the dry spell had lasted for more than six months, and 72.8% expected the next harvest of their most common crop to be below average due to poor Gu rains.

Moreover, most households (84.8%) reported believing that their livestock was in poor condition, the majority of whom (89.9%) attributed these poor livestock conditions to the dry spell. In most pastoral livelihoods, the dry spell has led to water shortage, limited availability of milk and lack of saleable animals as more animals die and the condition of remaining livestock deteriorates.

Village Representation

96.6% of households reported feeling well-represented by their Village/Camp Relief Committee (V/CRCs). Among those who felt they were represented poorly (n=662), the primary reasons reported were that the leaders in the council a.) were new or inexperienced (64.1%), b.) were perceived to be inactive (20.4%) c.) leaders were corrupt (6.9%) d.) were perceived to represent only their own family or clan (3.8%) and e.) were perceived to act primarily in their interest (2.9%).

Complaints and Response Mechanism

25.0% of households reported being aware of any options to contact the NGO if they had any questions, complaints, or problems receiving the assistance. The majority of these households reported being aware of the NGO hotline (60.2%) and 46.5% reported that you could talk to the NGO staff directly, while only 16.9% mentioned contacting the NGO helpdesk.

End Notes

- 1. Gu is the main rainy season starting in mid-March and running to June.
- 2. Food Security and Nutrition Analysis Unit (June, 2022). Somalia
- 3. IPC Acute Food Insecurity Update (March-June, 2022). Somalia
- 4. Humanitarian Needs Overview (HNO, 2022). Somalia
- 5. Beneficiary households were selected by Village Relief Committees (VRC) based on the following vulnerability criteria: lack of income or assets, vulnerable head of households: female, disability, illness, older persons, vulnerable household member: disability, illness, older person, large household size or households with many young children, minority or marginalized groups and clans, use of negative coping mechanism, new or recent IDP, malnutrition, poor shelter condition and other criteria relevant to local context, defined by the VRC members. Following the initial VRC selection, households were verified and registered as beneficiaries by the respective partner organisations.
- 6.IMPACT carried out the baseline data collection in thirteen districts, with five ditstricts being classified as hard to reach districts. The hard to reach districts comprised of Waajid, Jammame, Doolow and Belet Xaawo, and Afgayo that are found in Bakool, Lower Juba, Gedo and Lower Shabelle regions respectively.
- 7. Of the 2996 respondents, 505 HHs were part of the pilot locations in the hard to reach districts where a separate monitoring was conducted.
- 8. Respondents could select multiple options. Findings may therefore exceed 100%.
- 9. WASH implies water and sanitation and hygiene products.
- 10. Average Income per household per month calculated by dividing the total monthly household income by the household size.
- 11. Economic Capacity to Meet Essential Needs (ECMEN) is a binary indicator showing whether a household's total expenditures can cover the Minimum Expenditure Basket. It is calculated by establishing household economic capacity (which involves aggregating expenditures) and comparing it against the MEB to establish whether a household is above this threshold.
- 13. The Household Dietary Diversity Score (HDDS) is a measure of the number of unique food groups consumed by household members in the 7 days prior to data collection as recommended by the Somalia Cash Working Group Monitoring & Evaluation Workstream Harmonised Indicators List.
- 14. The Reduced Coping Strategies Index (rCSI) is a measure of reliace on food consumption based negative coping strategies to cope with lack of food in the 7 days prior to data collection.
- 15. The Livelihoods Coping Strategy Index (LCSI) is a measure of reliance on livelihood-based negative coping mechanisms to cope with lack of food or money to buy food in the month prior to data collection. The severity weights are classified into Neutral coping; which involves engaging in casual labour for extra income savings, stress strategies; includes purchasing food on credit, spending savings, borrowing food and selling household assets, crisis strategies; here households sell productive assets or means of transport and consume seed stocks that are to be used for the next season, emergency strategies; HHs are forced to sell land, sale female animals and are pushed to beg.
- 16. PNA is the abbreviation for "Prefer not to answer".

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Annex 1 - Sample Breakdown

Regions	Districts	Caseload	Sample Surveyed
Banadir	Banadir	1494	190
Bay	Qansax Dheere	1324	213
Bay	Baidoa	6287	230
Bay	Buur Hakaba	1245	188
Bay	Diinsoor	1170	199
Gedo	Baardheere	2021	212
Gedo	Doolow	293	143
Lower Juba	Kismayo	1045	166
Middle Shabelle	Balcad	1587	181
Middle Shabelle	Jowhar	1241	188
Mudug	Galkacyo	1167	180
Togdheer	Buuhoodle	1540	194
	Hard to Reach D		
Bakool	Waajid	1202	189
Lower Juba	Jamaame	119	42
Gedo	Belet Xaawo	267	156
Lower Shabelle	Afgooye	404	118

Annex 2 - Key Indicator Summary

Key Indicator	Baseline Value
% of households reporting that cash helped them meet their basic needs	NA
Average meals consumed per household in the last 24 hours	2.1
% of households with an acceptable FCS	39.1%
Economic Capacity to Meet Essential Needs	14.4%
% of households with a high or medium HDDS	75.3%
Average Reduced Coping Strategies Index (rCSI)	15.6
% of total household expenditure spent on food	53.4%

About IMPACT Initiatives

IMPACT Initiatives is a leading Geneva-based think-and-do tank which aims to improve the impact of humanitarian, stabilisation and development action through data, partnerships and capacity building programmes. The work of IMPACT is implemented by its three initiatives: REACH, AGORA and PANDA.

REACH, a joint initiative of IMPACT, ACTED and UNOSAT, provides data and analysis on contexts of crisis in order to inform humanitarian action. Within AGORA, IMPACT partners with ACTED to support the stabilisation of crisis-affected areas by promoting synergies between international aid and local response actors. Through PANDA, IMPACT supports aid actors to improve the effectiveness of their programmes through monitoring, evaluation and capacity building activities.

IMPACT teams are present in over 25 countries across the Middle East, Africa, Asia, Europe, and Latin America. The teams work in contexts ranging from conflict to disasters and in areas seeing the effects of displacement and migration. Contact geneva@ impact-initiatives.org for further information.













