

SOMALIA

POST DISTRIBUTION MONITORING

FIRST AND ENDLINE ASSESSMENT COMPARATIVE REPORT FOR THE SOMALI CASH CONSORTIUM MAIN CASELOAD ASSESSMENT

JANUARY 2024



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ABBREVIATIONS AND ACRONYMS

COOPI	Cooperazione Internazionale
CRM	Complaints and Response Mechanism
CWG	Cash Working Group
DRC	Danish Refugee Council
ECHO	European Civil Protection and Humanitarian Aid Operations
FCDO	Foreign, Commonwealth and Development Office
FCS	Food Consumption Score
HHS	Household Hunger Scale
HH	Household
ECMEN	Economic Capacity to Meet Essential Needs
IDP	Internally Displaced Person
LCSI	Livelihood Coping Strategies Index
M&E	Monitoring and Evaluation
MEB	Minimum Expenditure Basket
MoE	Margin of Error
NFI	Non-Food Item
NGO	Non-Governmental Organisation
NRC	Norwegian Refugee Council
rCSI	Reduced Coping Strategies Index
SCC	Somali Cash Consortium
SCI	Save the Children International
MPCA	Multipurpose Cash Assistance
USD	United States Dollar
VRC	Village Relief Committee

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Cover image depicting community mobilization and households' registration | NRC.

ABOUT IMPACT

IMPACT Initiatives (IMPACT) is a Geneva based think-and-do-tank, created in 2010. IMPACT is a member of the ACTED Group.

IMPACT's teams implement assessment, monitoring & evaluation and organisational capacity-building programmes in direct partnership with aid actors or through its inter-agency initiatives, REACH and Agora. Headquartered in Geneva, IMPACT has an established field presence in over 15 countries. IMPACT's team is composed of over 300 staff, including 60 full-time international experts, as well as a roster of consultants, who are currently implementing over 50 programmes across Africa, Middle East and North Africa, Central and South-East Asia, and Eastern Europe

EXECUTIVE SUMMARY

The Somali Cash Consortium (SCC) was formed in late 2017 to provide vulnerable populations in disaster and conflict-affected districts in Somalia with monthly, multi-purpose cash assistance (MPCA). The SCC is led by Concern Worldwide and further consists of six implementing partner organisations: ACTED, Concern Worldwide, Cooperazione Internazionale (COOPI), Danish Refugee Council (DRC), Norwegian Refugee Council (NRC), and Save the Children (SCI).

Somalia struggles with extensive and severe poverty, as economic progress is consistently impeded by persistent challenges such as conflict, notably the recent conflict in Laas Caanood, recurrent climate shocks, and heightened vulnerability. The region experienced a dire humanitarian crisis, narrowly averting famine following a devastating drought in 2022 and the Jilaal season of 2023¹, considered the most severe in decades. In addition, in late October and early November, the region confronted its worst floods attributed to the [Deyr rainy season](#).²

Floods resulting from the Deyr rainy season in mid-October³ caused extensive crop damages, disrupted supply chains, and led to the massive displacement of communities from the riverine and lowland agropastoral areas of the Southern region of Somalia.⁴ Households in these flood-prone areas are expected to continue facing elevated needs even after the Deyr season.⁵ This has resulted in increased humanitarian needs among various population groups in Somalia and highlights the need for humanitarian assistance to support these vulnerable households.⁶

To reduce the challenges faced by these already vulnerable households, the SCC, with funding from the European Union Civil Protection and Humanitarian Aid (ECHO), delivered three rounds of cash assistance between 9th May and 4th November 2023. This aid aimed to assist these households in addressing food insecurity and meeting other essential needs. The cash transfers were distributed based on partners' activation using the Integrated Response Framework (IRF) adopted by Somalia Humanitarian Country Team (HCT) in October 2022.⁷

The objective of the assessment was to monitor the influence of the SCC MPCA 2023 programme on the expenditure patterns and food security status of the beneficiary households and to inform the multi-purpose cash-based humanitarian response in Somalia across first and endline assessments.

Table 1 below summarises the key findings of the SCC first and endline assessments (which were carried out between 23rd May and 12th June and endline Phase 1 from 11 to 14 September 2023 and Phase 2 from 16 to 20 October 2023), based on the recommended indicators standardised by the Monitoring and Evaluation (M&E) Workstream of the Somalia Cash Working Group (CWG). The results presented in Table 1 represent the weighted averages for beneficiary households of the SCC programme at the district level. Overall averages were weighted⁸ based on the number of beneficiaries per district within the total SCC main caseload, and findings are representative at the district level, with a 95% confidence level and a 7% margin of error (MoE). Disaggregation of the results by gender of the head of household, livelihood zone, and district are included in the report. Results disaggregated by gender and livelihood

¹ This is a typically dry season between December to March.

² Somalia 2024 Humanitarian Needs and Response Plan- Summary

³ [Somalia: Deyr rainy season 2023 Flash Update No. 1: Floods in South West State, 7 October 2023](#)

⁴ [Food Security and Nutrition Analysis Unit-Somalia \(December 2023\).](#)

⁵ [Somalia Situation Report. UNOCHA \(26 Dec 2023\)](#)

⁶ [Famine Early Warning Systems Network \(December 2023\). Somalia](#)

⁷ This approach was first piloted in the modification request 2 under the ECHO HIP 2022 top up grant [here](#).

⁸ Weighting is a statistical technique in which datasets are manipulated through calculations in order to bring them more in line with the population being studied. Frequency weights were taken for this assessment to minimise any effects the survey design or data collection mode may have on the sample makeup and resulting data.

zone were not weighted and are *indicative only*, as the sample was not stratified according to these factors. The overview of findings per indicator is presented in this section, while a more detailed analysis of the results and disaggregation of the findings by district are provided in the main part of the report. To maintain consistency, this comparative report will only include the districts that are listed in the first assessment factsheet.

Table 1: Somali Cash Consortium first assessment and endline key findings.^{9,10}

Key Indicator	Target Value	First Assessment Value	Endline Value	% Change (from first to endline assessments)
% of households reporting that cash assistance received helped them in meeting their basic needs	95.0%	NA	75%	N/A
Average meals consumed per household in the last 24 hours		2.3	2.2	-4%
Average Food Consumption Score (FCS)		48.1	44.6	-7%
% of households with an acceptable FCS	46.0%	63%	56%	-11%
% of households with no/little or moderate hunger		100%	99%	-1%
Average Reduced Coping Strategies Index (rCSI) ¹¹		14.9	12.2	-18%
Average Livelihood Coping Strategies Index (LCSI)	5.4	5.6	5.2	-7%
Protection Index Score ¹²	79.0%	75%	79%	+5%

The target values have been determined using data from the 2021 and 2022 cash consortium post-distribution monitoring (PDM), aligning with the proposal outlined in the ECHO Humanitarian Implementation Plan (HIP) cash programme implemented in 2023. Highlighted in orange are percentage changes indicating a reduction in the utilization of corresponding key indicators at the endline, whereas those shaded in light green signify a positive change. Despite aiming for nearly all (95%) to meet their basic needs by the endline, only 75% reported achieving this. The report explains variations between first assessment values and endline results, outlining reasons for the observed decrease.

⁹ All results presented have been weighted at the district level by the proportion of SCC beneficiary households per targeted district. Therefore, to maintain comparability across the first assessment and endline assessments, the aggregate results presented only represent the districts where both the first assessment and endline data were collected.

¹⁰ For both rCSI and LCSI, lower values are preferred as they represent less reported use of negative coping strategies to cope with a shortfall in food or to meet household basic needs.

¹¹ A decrease in the average LCSI and rCSI is an indication of improvement in these indicators.

¹² Unlike the other scores presented in Table 1, the objective for the Protection Index Score is not necessarily to see an improvement between the first assessment or endline scores, but rather for the score to remain consistently on target at 79%.

KEY FINDINGS¹³

Food security and livelihood

Impact on Coping Strategy Use

During the endline assessment, the proportions of households with high rCSI score decreased slightly from 27% in the first assessment to 22%. Concurrently, the proportion of households with low rCSI slightly increased from 9% to 11% over the same period. Moreover, the average rCSI score decreased from 14.9 to 12.2 during this timeframe, **which indicates a decrease in the use of negative coping strategies** since the higher the score, the more often coping strategies were used.

Furthermore, the average LCSi decreased from 5.6 during the first assessment to 5.2 at the endline assessment. **The proportion of HHs engaging in either emergency, crisis or stress level coping strategies decreased slightly during endline assessments from 82% at the first assessment to 80%. Specifically, there was a decrease in the proportion of households indicating the necessity to 'purchasing goods on credit,' dropping from 72% to 66% between the first and endline assessment. Similarly, the percentage of households resorting to 'borrowing money' decreased from 52% to 37% during the same period.** This suggests that the provision of MPCA enabled households to fulfill their diverse needs without resorting to severe coping mechanisms.

Additionally, there are indications that asset liquidation, such as selling productive household items (3% at the first assessment and 1% at the endline) and tapping into household savings for both rural and urban livelihoods (32% at the first assessment and 24% at the endline), remained relatively stable by the endline. This possibly suggests a sustained or stabilizing impact of the assistance provided during the cash transfer period. The positive shifts outlined by rCSI and LCSi suggest the impact of three-cycle of the MPCA in alleviating food insecurity and reducing reliance on adverse coping strategies.

Impact on Food Consumption Score (FCS) and Households Hunger Scale (HHS)

Despite the positive improvements in rCSI and LCSi, the FCS showed an increase in the percentage of beneficiary households with a poor score from 16% to 22% during the endline assessment. In addition, there was a decrease in the proportion of HHs with acceptable FCS, decreasing from 63% to 56%. The slight changes in the FCS scores could be due to the first assessment being conducted almost immediately after the households had received the first line response and hence access to food and this might have led to a less shift in average scores from first to endline. Even though the average FCS decreased from 48.1 to 44.6 during the endline, the score still pointed to an acceptable FCS.

Worryingly, there was a significant decrease in acceptable FCS in specific districts: Belet Weyne district experienced a decrease from 72% during the first assessment to 14% at the endline, Burco district decreased from 46% to 15%. Districts that exhibited a large decrease in acceptable FCS at the endline have not only showed a reduced proportion of households with acceptable FCS but also a decreased overall average FCS.

The proportion of households reporting no or little hunger increased from 61% at the first assessment to 72% at the endline, perhaps due to improved access to different food groups among beneficiary households after the third cycle of cash transfer.

¹³ While the assessment was carried out neither during the lean season nor during Ramadan, findings should be interpreted against the background of the acute drought in Somalia, which impact on households might have limited the impact of the MPCA programme.

Cash use and impact

Approximately 75% of households reported that the amount of the cash transfers was appropriate and that the transfers helped them meet basic needs at the endline assessment. However, this percentage varied across districts, with Berdale (53%), Baidoa (44%) and Buurhakaba (40%) having the lowest proportion of households deeming the amount of assistance appropriate.

Furthermore, findings indicate that approximately two-thirds (67%) of assessed households proposed ways to enhance the effectiveness of cash assistance in meeting their needs. Of those 67% of households, the most frequently suggested improvements were increasing the duration of cash transfers (79%), increasing the amounts of cash transfers (62%), and providing continuous cash assistance throughout the year (43%).

Even though three-quarters (75%) of the households expressed that cash transfers was appropriate, about 14% of the assessed HHs reported having the perception that traders overcharged them because of their beneficiary status. In addition, 20% of respondents reported that they thought prices had increased for the whole community following the cash transfers. Nearly all (97%) HHs of the 14% reported that food prices increased at the endline. According to the National Bureau of Statistics,¹⁴ the Consumer Price Index (CPI) for September, October, and November 2023 showed an upward trend, rising from 142.65 to 143.59 and 144.92 respectively over the three months. This suggests that the inflation rate increased by 1.59% during this period.

Savings and debts

Following three rounds of cash distribution, the proportion of HHs with savings increased from 14% during the first assessment to 22% during the endline. However, there was a decline in the average savings within the same period, decreasing from 32.74 USD to 27.18 USD. Additionally, the proportion of households with debts during this period increased from 15% at the first assessment to 35% at the endline. The average debts remained stable between first assessment, where it was 104.00 USD and endline assessment, where it was 100.75 USD. Households' top reported reasons for taking debts during the endline assessment were to: buy food (75%), purchase clothes (30%), access healthcare services (26%), and pay rent (21%). Households' reliance on debt to buy food suggests that there was **still an unmet need for cash assistance** (this is evidenced by the data which show that at the endline only 46% of the HHs were found to report "mostly" and "always" when asked how often their households had money to cover basic needs. **These findings imply that households continue to grapple with financial burdens that may only be alleviated through sustained assistance or access to sustainable livelihood opportunities.**

Protection and accountability

During the endline, 49% (representing an 11% increase from the first assessment) of the assessed households were aware of options to contact the NGOs if they had questions or complaints. Moreover, there was a slight increase in the proportion of households who reportedly utilized the CRM platforms. This proportion increased from 19% at the first assessment to 23% during the endline. Of the 49% of households aware of options to contact the NGO, a majority (75%) reported being **aware of the existence**

¹⁴ <https://nbs.gov.so/category/economics/>

of a dedicated NGO hotline, while another 30% reported that they knew they could directly talk to NGO staff during field visits or at their offices.

Macroeconomic situation in Somalia

According to a recent World Bank economic update report, Somalia's growth trajectory has been disrupted by recurrent climate-related shocks, including droughts, flash floods, and higher international commodity prices, alongside increased insecurity and conflict. In 2022, drought significantly impacted economic activity, leading to the collapse of the agricultural sector and exacerbating a humanitarian crisis. The projection indicates ongoing poor climatic conditions with droughts or floods, causing a continued decline in agricultural production and worsening food insecurity, potentially necessitating increased food imports. The increased frequency and severity of shocks directly affect the impoverished population and contribute to displacement, food insecurity, and conflict.¹⁵

Despite these challenges, the Somali economy showed signs of improvement in 2023, with an estimated real GDP growth rate of 2.8%, up from a sluggish 2.4% in 2022. This modest growth is attributed partly to weak global economic conditions, the impact of floods following prolonged drought, moderate growth in remittances, and a slow recovery in livestock exports. However, a growth rebound of 3.7% is anticipated for the fiscal year 2024, assuming improvements in security conditions, recovery of livestock and crop production, an upward trend in foreign direct investment, and increased inflows of remittances.¹⁶

¹⁵ [Somalia Economic Update November 2023 | Edition No. 8: Integrating Climate Change with Somalia's Development](#)

¹⁶ [STATE OF THE ECONOMY REPORT \(November 2023\)](#)

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INTRODUCTION

The Somali Cash Consortium (SCC), established in 2017, provides Multipurpose Cash Assistance (MPCA) to vulnerable households in Somalia. The main caseload assessment targeted households in the districts of Baidoa, Banadir, Bardheere, Belet Weyne, Berdale, Burco, Burtinle, Buurhakaba, Galkacyo, Laas Canood and Wajid. This intervention was funded by the European Union Civil Protection and Humanitarian Aid (ECHO) and consisted of three rounds of MPCA distributed between 9th May and 4th November 2023.

To evaluate the impact of MPCA on beneficiary households, IMPACT supported the SCC by conducting a first assessment after the first cash distribution, following the first-line response between 23rd May and 12th June 2023². The endline assessment was conducted in two phases: Phase 1 from 11 to 14 September 2023; Phase 2 from 16 to 20 October 2023, one month after the third and final cash distribution.

The objective of the assessment was to monitor the influence of the SCC MPCA 2023 programme on the expenditure patterns and food security status of the beneficiary households and to inform the multi-purpose cash-based humanitarian response in Somalia across first and endline assessments. This report will detail the findings from the comparison of the two assessments, highlighting the changes observed following the three rounds of cash transfers.

METHODOLOGY

The first and endline assessments consisted of a quantitative household survey and were conducted by IMPACT Initiatives in partnership with the SCC Consortium Management Unit (CMU). IMPACT exclusively interviewed households who had received all the three cycles of cash assistance.¹⁷

Assessed households were selected through simple random sampling so that findings would be representative at the district level. Findings disaggregated by gender of the head of household, age of the head of household, or self-reported livelihood zone should be considered indicative in nature as the sample was not stratified accordingly. Households were asked about their demographics, overall food security situation, perceptions of their own well-being, monthly expenditures, food consumption, coping strategies, and their perceptions towards the accountability and transparency of the beneficiary selection process.

The main caseload assessments followed an Integrated Response Framework (IRF), that involved a first line and second-line response. This implied that during the endline households had either received two or three rounds of cash assistance. Traditionally, assessments that are done before any intervention (such as an MPCA programme) are referred to as baseline assessments and they aim to assess the situation of the beneficiaries before receiving the intervention. In this situation, as the 7 days cash delivery did not allow for baseline data collection pre-cash transfer, due to the rapid nature of the intervention, IMPACT exceptionally conducted the assessment after the first round of cash transfer had already occurred. Following the first round of cash transfer, more in-depth beneficiary verification was conducted by the Consortium Management Unit (CMU) and the HHs that did not meet the vulnerability criteria were removed. New households who fully met the requirements were added to the programme to replace the dropped households. However, these newly added beneficiaries only received two rounds of cash transfers instead of three as they were only added to the programme following the first round of

¹⁷ Households who had received three cycles of cash transfers were surveyed to prevent disaggregation of the data into households who had either received two or three cycles. It is worth noting that during the first assessment, about three-quarters (72%) had received the first cash transfer.

cash transfer. All households maintained in the second-line response received the full three months of cash transfers.

Sampling Strategy

A probability-simple random sampling approach was used to achieve a 95% confidence level with a 7% margin of error. A buffer of 15% was added to the sample size to allow for follow-up even with the expected drop-out and non-participation of some households. The buffer remained 15% at the endline.¹⁸ and the results are representative at the district level. To ensure a random selection of respondents, IMPACT generated random samples using an R-script. Daily data cleaning was conducted with the respective field supervisors to ensure that accurate information was collected from the respondents. This was followed by descriptive data analysis which was conducted using R software.

The survey tool, underwent rigorous testing by field supervisors, including the precision and clarity of translations from English to Somali before its deployment to prevent any issues or misunderstandings during data collection. For districts where more than one partner was operating, notably Belet Weyne, Laas Canood and Galkacyo, the sample was split based on the proportion of each partner's caseload compared to the total number of beneficiary households in the district.

Whenever results are presented for all SCC beneficiary households, overall averages have been weighted by the proportion of SCC beneficiary households per targeted district. To account for this, both district averages and the weighted overall average are presented in the analysis and reporting. Due to rounding to the nearest decimal point, percentages may sometimes not add up exactly to 100.0%.

Target sample sizes compared to actual surveys completed by district for all households surveyed¹⁹ can be seen in Table 2 below.

Table 2: First assessment and endline assessment target sample sizes and total surveys completed by district.

District ²⁰	Beneficiary Caseload	Target Sample Size 95% Conf. 7% MoE	Target Sample Size with Buffer (rounded)	Surveys Completed First assessment	Surveys Completed Endline
Baidoa	1,992	179	206	213	206
Banadir	2,370	181	208	201	252
Baardheere	1,000	164	189	197	166
Belet Weyne	350	126	145	146	140
Berdale	673	152	175	95 ²¹	148
Burco	850	159	183	248	185
Burtinle	1,240	169	194	210	192
Buurhakaba	1,500	173	199	196	204
Gaalkacyo	1,695	176	202	204	222

¹⁸ The endline samples were drawn from the last payroll used by the SCC partners to ensure that households only who received UCTs were surveyed.

¹⁹ All households herein represent households who had received either three or two rounds of cash transfers.

²⁰ The (**) denotes districts excluded from the overall weighting system. Nevertheless, in the demographics section, these districts have been incorporated to analyze the comprehensive characteristics of the total population under assessment.

²¹ As described in the methodology section, results are representative at the district level. Berdale also faced access constraints and most of the beneficiaries were unreachable hence affecting the sample size. Results should be considered indicative in this district.

Laas Canood	2,750	183	210	244	207
Wajiid	2,315	181	208	215	220
All assessed districts	16,735	1,843	2,119	2,169	2,142

Data Collection Methods

IMPACT conducted quantitative household surveys remotely on the phone during the first and the endline assessments. The first assessment was conducted between 23rd May and 12th June 2023²² The endline assessment was conducted in two phases: Phase 1 from 11 to 14 September 2023; Phase 2 from 16 to 20 October 2023;²³

Analysis

Data was collected through the KOBO platform, after which all data was anonymised and shared with the IMPACT field team for checking and cleaning, which happened daily throughout data collection. Quantitative data was analysed using the R software, and to account for the unequal distribution of households, results were weighted at the district level. The analysis covered various aspects including food security and livelihood indicators, demographics, environmental components, ECHO KPIs, vulnerability questions, income, and included a section dedicated to comments and feedback from the respondents.

Challenges and Limitations

- **Phone interviews:** Due to the length and in-depth nature of this survey, some respondents were prone to survey fatigue. Poor network connectivity and lack of personal interaction were also expected. Notably, Berdale, a hard-to-reach district, was faced with poor network connection.
- **Respondent bias:** Certain indicators may be under-reported or over-reported due to subjectivity and perceptions of respondents (in particular "social desirability bias" - the tendency of people to provide what they perceive to be the "right" answers to certain questions). Households may sometimes try to give answers they feel will increase their chances of getting more assistance.
- **Recall period:** Data on household expenditure was based on a 30-day recall period; a considerable duration due to which it may be difficult for households to remember their expenditures accurately and to such a degree of detail; hence it might have negatively impacted the accuracy of reporting on those indicators.
- **Data Omission:** During the Phases 1 and 2 endline data collection, key indicators such as expenditure share, main source of household income and average monthly income were omitted from the tool. As a result, this report does not include the presentation of specific results related to indicators like CARI, ECMEN, and expenditure patterns.
- **Assessment Timeline:** Prior to the first assessment, households had already received the first cash distribution. This pre-existing first round of cash transfer may have influenced certain outcome indicators, as households had more money than their usual disposable income. **This potential bias could complicate the accurate measurement of the impact of cash assistance.** Food security and livelihood (FSL) indicators suggesting improved economic status

²²IMPACT SOM. FIRST ASSESSMENT FACTSHEET JUNE 2023.

²³ Phase 1 data collection was conducted in Banadir, Baidoa, Berdale, Galkacyo and Laas Canood while Phase 2 data collection was conducted in Baardheere, Burco, Burtinle, Buur Hakaba, Laas Canood and Wajiid. There was an overlap of district especially where more than one partner was operating. Therefore, interpreting these endline results poses a challenge as households' needs evolve from one phase to another.

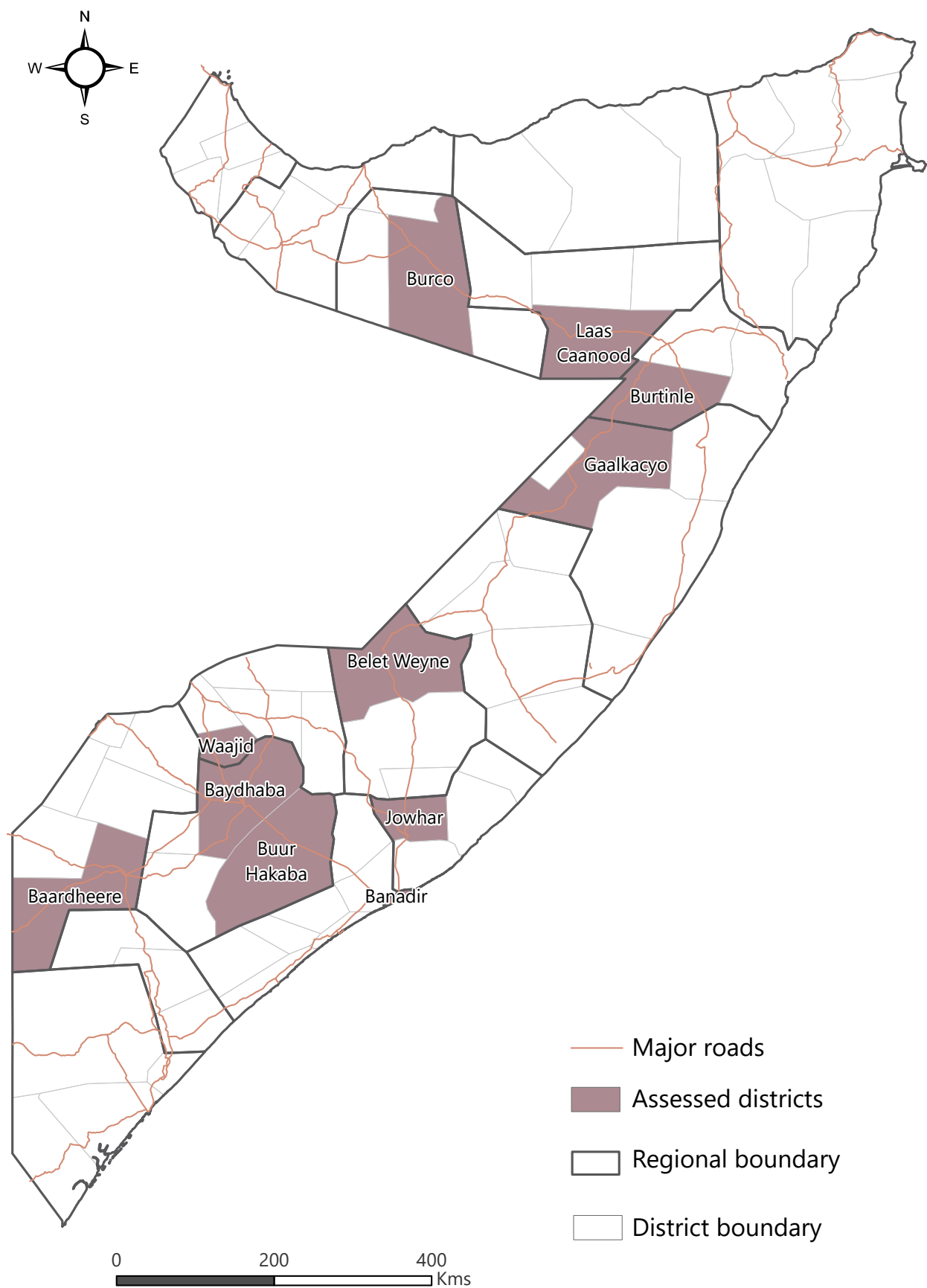
may not accurately reflect the actual situation. This could explain why most indicators during the first assessment pointed to a better food security situation, with little difference observed during the endline assessment. Drawing conclusions on the impact of cash assistance becomes a challenge due to the absence of a comprehensive baseline study.

- **Delayed MPCA during the Humanitarian Cash Assistance having an impact on data collection timelines:** This resulted in the need for more than one phase of endline data collection. At a certain point during this process, camp reverification was undertaken, resulting in a setback to the timeline.
- **Rapid activation and trigger:** Due to the rapid activation, some households received cash assistance after IMPACT had published the first assessment factsheet. Consequently, three districts were omitted from both the first assessment factsheet and subsequently from this endline comparative report. Owing to variations in data collection timing, the data points from these districts were excluded from the overall weighted average, resulting in the reporting of only 11 districts, mirroring the situation in the first assessment factsheet. The endline assessment took place 2-4 weeks after the third month after the last round of cash transfers distributed by each respective partner organisation. The assessments therefore primarily measure the short-term impact of cash on households, while less is known about potential long-term impacts.
- Due to further analysis of the first assessment data and analysis, there are slight changes in the overall averages in the values published in the first assessment factsheet.²⁴

²⁴ IMPACT conducted a further analysis of the first assessment dataset, resulting in slight variations in the values reported on the factsheet. Specifically, the weights for Banadir district were revised, impacting the overall average weights for all districts combined. However, it's important to note that this adjustment did not affect the reported data points for individual districts.

Geographical scope

Map 1: Map of assessed areas.



FINDINGS

This section presents and compares the main findings of the SCC's first and endline assessments, and organized into the following themes:

- Respondent profile and household demographic breakdown;
- Subjective perceptions of households on their own well-being;
- Food security-related indicators;
- Protection-related indicators;
- Accountability to affected populations.

RESPONDENT PROFILE AND HOUSEHOLD DEMOGRAPHIC BREAKDOWN

Respondent Profile

A total of 4311 households were surveyed during the first and endline assessment,²⁵ in this main caseload assessment. Of these surveys, 88% were conducted directly with the self-reported head of household. The remaining 12% of surveys were conducted with a different member of the household who answered the questions on behalf of the head of household.²⁶

Table 3: Proportion of survey respondents who self-identified as the head of household.

	Yes	No
First assessment	87%	13%
Endline	89%	11%

Household Demographic Profile

This provides a brief overview of the households' demographics. Averages have been weighted according to the number of surveys collected during each assessment phase. The sample was not stratified according to the gender of the head of household, household IDP status, or livelihood zone, hence any findings disaggregated by these factors should be considered indicative in nature.

Head of Household Age and Gender

In both the assessments (first and endline), about two-thirds (65%) of households were reportedly female-headed, while 35% of households were male-headed households.

During the endline, the average age of all heads of households was 39 years old, with male and female heads of household averaging 42 and 38 years old respectively.²⁷

²⁵ Averages have been weighted according to the number of surveys collected during each assessment phase.

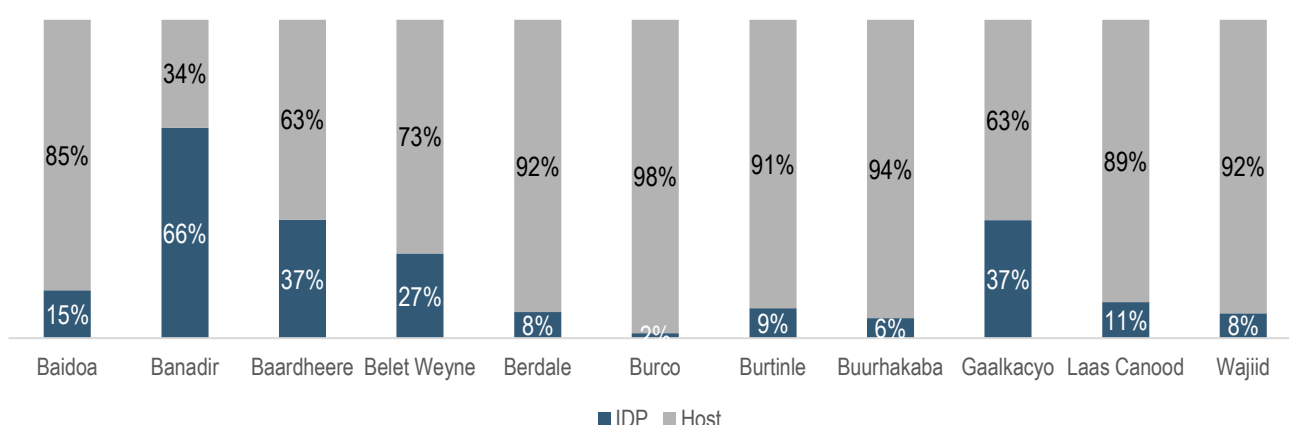
²⁶ In all surveys, regardless of whether the respondent was the self-reported head of household or not, the gender and age of the reported head of household were collected for disaggregation purposes.

²⁷ No data was collected for heads of households younger than 18, and surveys were only conducted with respondents over the age of 18.

Household Displacement Status²⁸

Overall, 80% of assessed households were found to be members of the host community, and 24% were IDPs. As shown in Figure 1 below, Banadir had the highest percentage of IDPs at 66%, followed by Baardheere and Gaalkacyo districts, both at 37%.

Figure 1: SCC beneficiary households by displacement status, by district (first and endline assessments combined).



Livelihood System Breakdown²⁹

As shown in Figure 2 below, the proportional breakdown of the livelihood system³⁰ varies considerably by district. Of the SCC beneficiary households surveyed across all assessments, 73% were categorised as urban households, 11% as agro-pastoral and 16% as pastoral, based on household self-reporting.

HOUSEHOLD SPENDING DECISIONS

Across all assessments, households' spending decisions were most commonly reported to be made jointly by both male and female members of the household. Responsibility within the household over spending decisions does not appear to have changed much following the reception of MPCA. Table 4 below shows how spending decisions differed slightly between the first assessment and the endline assessments (48% and 45% during the first assessment and the endline, respectively). **During the endline, nearly all (99%) households reported that there were no conflicts between the household members on how to spend the cash received during the endline assessment.**

Table 4: Primary spending decision-maker reported by % of households.

	First assessment	Endline
Male	23%	23%
Female	29%	32%
Joint Decisions	48%	46%

²⁸ During the research process, there arose a need to revise the definition of IDPs. In subsequent assessments, households will be categorized as either new or protracted IDPs because the existing criteria was found to be imperfect in accurately capturing the characteristics of IDPs.

²⁹ A livelihood zone is an area within which people share broadly the same pattern of livelihood, including options for obtaining food and income and market opportunities.

³⁰ [Somalia Livelihoods Zones Map FEWSNET](#)

PERCEIVED WELL-BEING INDICATORS

Households were asked the following series of subjective questions³¹ to determine their perception of their household's well-being, ability to meet basic needs, and ability to withstand shocks:

1. In the past month, has your household had sufficient quantities of food to eat?
2. In the past month, has your household had sufficient varieties of food to eat?
3. In the past month, has your household had enough money to cover your household's basic needs?

There were marked improvements across most subjective indicators at the time of the endline assessment. Following the three months of MPCAs, households' perception of their food security, economic well-being, ability to meet basic needs and overall well-being appeared increasingly positive, indicating that households felt more financially secure and had **a greater ability to meet their basic needs.**

The percentage of households reporting that they "mostly" or "always" had a sufficient quantity of food to eat in the month prior to data collection increased from 49% at the first to 66% during the endline assessment, while the percentage of households reporting that they "mostly" or "always" had a variety of food to eat increased between the first assessment and the endline assessment (39% and 50% during the first and endline assessment respectively), indicating a positive impact of the distributions on households' experiences with access to food.

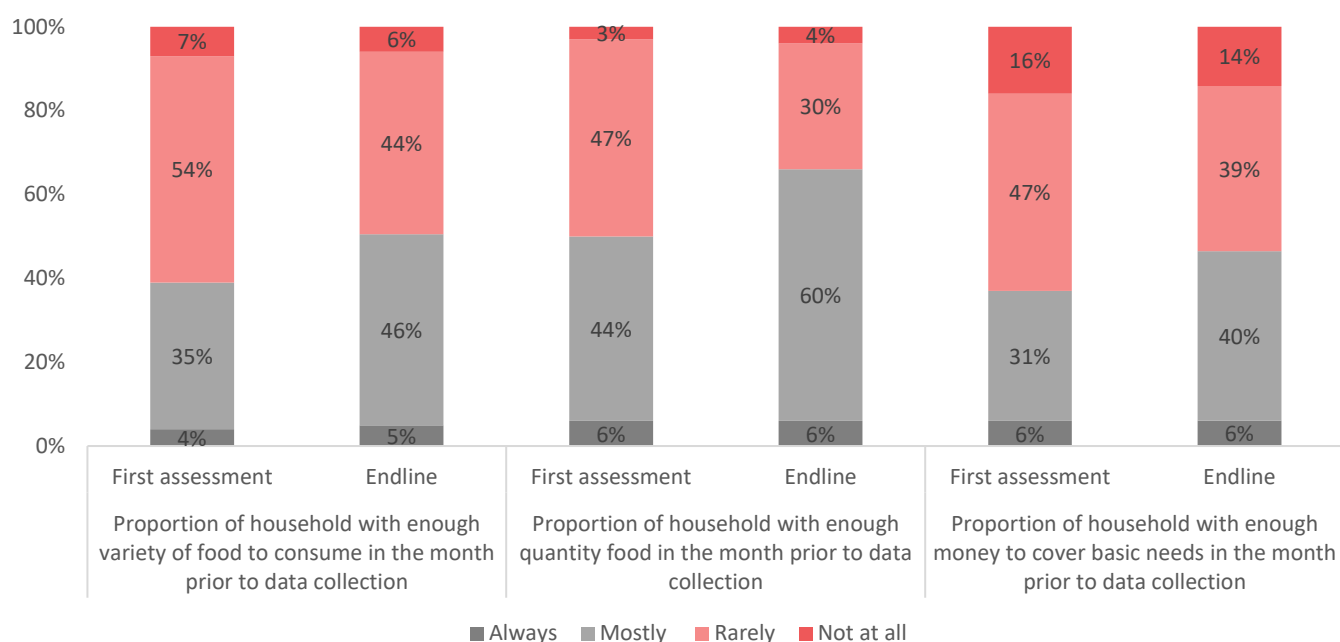
Findings suggest that the cash assistance given to the HHs had a positive impact on HHs' ability to meet basic needs. The proportion of HHs who had enough money to cover their basic needs increased during the endline. The proportion of HHs reporting "mostly" and "always" being able to cover their basic needs increased from 36% to 46% between the first assessment and endline respectively. It is important to note that around 72% of households had received the first cycle of cash assistance during the first assessment, explaining the relatively modest point increases observed between the two assessments. During this period, households had access to money, enabling them to acquire an adequate quantity of food and meet other basic needs³²

These findings appear to be consistent with households' reported perception of the appropriateness of cash assistance; three-quarters (75%) of households reported that the cash assistance was appropriate for their household's needs. About 26% reported that cash as a modality was not appropriate for them at the time of endline data collection. **In addition, households were asked if they had suggestions on how the cash assistance they received could be improved to better meet their needs**, approximately two-thirds (67%) of the households who had suggestions on how to improve the cash assistance. Increasing the duration (79%) and the amount (62%) of the cash transfers were the top cited suggestions by these households.

³¹ This series of perceived well-being indicators was developed jointly by the Cash Consortium and an external consultant working on a previous grant in the HIP 2020.

³² During the endline assessment, comparisons were drawn between households that did not receive the first cash transfer during the first assessment.

Figure 2: Percentage of households reporting always, mostly, rarely, or not at all when assessed on the perceived well-being indicators.



Reflecting the general trend of the other subjective well-being indicators, the proportion of households reporting positive perceptions of their well-being³³ appears to have increased between the first assessment and the endline.

CORE FOOD SECURITY INDICATORS³⁴

The core food security indicators need to be interpreted while considering that during the first assessment, 72% of households had received the first cycle of cash assistance, explaining the relatively modest point increases observed between the two assessments. During this period, households had access to money, enabling them to acquire an adequate quantity of food and meet other basic needs.

Meals Consumed in the 24 Hours Prior to Data Collection

The number of meals consumed within a 24-hour period offers valuable insights into the quantity and variety of food accessible to individuals or households.

At the endline, after the three cycles of the MPCA, the average number of meals consumed by households in the 24 hours prior to data collection remained stable, at an average of 2.2 compared to the average of 2.3 at the first assessment. The district disaggregation for the results is presented in Figure 4 below.

³³ Referring here to household access to a sufficient quantity of food and households' access to enough money to cover basic needs.

³⁴ The indicators included in this section align with the 'Recommended Indicators' developed by the Somalia Cash Working Group to standardise the way in which household-level food security is measured across assessments. All the results presented have been weighted at the district level by the proportion of SCC beneficiary households per targeted district.

Table 5: Proportion of households by reported # of meals consumed in the 24 hours prior to data collection.

# of Meals Eaten in the 24 hours prior to data collection	% of households First assessment	% of households Endline
0	0%	0%
1	1%	1%
2	74%	78%
3	24%	19%
>3	0%	2%

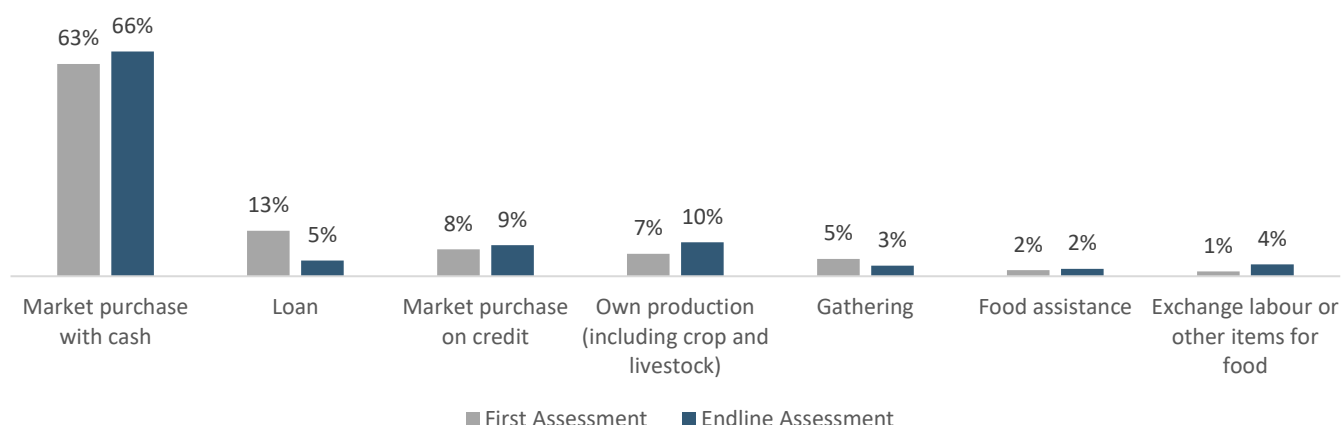
The proportion of households reporting consumption of more than two meals slightly decreased from 24% to 21% from first to endline assessments. This may be attributed to the fact that these households had some money to buy food from first and endline assessment and were able to maintain their consumption patterns.

Primary Sources of Food in the Household

To provide context on household spending decisions and food security outcomes, and to better understand the use of certain coping strategies, households were asked about their main food sources in the 7 days prior to data collection.

Market purchases made with cash³⁵ represented the main food source reported by households during all assessments, signaling a notable dependence on markets for sustenance. Furthermore, as cash assistance ended, these households are likely to encounter food shortages.

Figure 3: Main food source reportedly used by households in the 7 days prior to data collection.



³⁵ Also including purchases made through mobile money applications.

Reduced Coping Strategies Index (rCSI)³⁶

The rCSI measures the frequency at which households rely on certain negative coping strategies (related to food consumption in the household) within the 7 days prior to data collection to cope with food insecurity.³⁷

As seen in Table 6, Belet Weyne district recorded the highest levels of average rCSI during the first assessment. However, a considerable improvement in average rCSI was found in Baidoa, Banadir, Belet Weyne, Burtinle and Buur Hakaba districts at the time of endline assessment. The average rCSI decreased in all districts assessed from 14.9 at the first assessment to 12.2 during the endline assessment. Therefore, a higher proportion of HHs (compared to the first assessment) had used fewer negative coping mechanisms in the seven days prior to data collection. Districts showing an increase in the average rCSI are highlighted in red in the table below.

Table 6: Average rCSI score, based on reported coping strategies used over the 7 days prior to data collection by district.³⁸

District	First assessment	Endline
Baidoa	17.1	13.3
Banadir	15.0	10.0
Baardheere	14.7	10.8
Belet Weyne	18.8	12.5
Berdale	15.5	18.8
Burco	9.2	5.5
Burtinle	16.4	11.7
Buurhakaba	16.6	12.2
Gaalkacyo	12.7	14.8
Laas Canood	14.3	10.7
Wajiid	14.4	15.0
Weighted Total	14.9	12.2

Table 7: Proportion of households in each rCSI classification, based on reported food consumed in the 7 days prior to data collection.³⁹

	First assessment	Endline
Low	9%	11%
Medium	65%	67%
High	27%	22%

³⁶ It combines both the frequency of using coping strategies and their respective severity. Possible rCSI values range from 0 (no coping strategies applied) to 56 (all listed coping strategies are applied every day), with any score above 10 generally being considered to indicate frequent use of severe coping strategies. A higher score suggests a more severe level of food insecurity. The rCSI includes coping strategies such as relying on less preferred, less expensive food (1), borrowing food or relying on help from friends or relatives (2), reducing the number of meals eaten per day (1), reducing portion size of meals (1) and restricting consumption by adults in order for young children to eat (3).

³⁷ The rCSI includes coping strategies such as relying on less preferred, less expensive food (1), borrowing food or relying on help from friends or relatives (2), reducing the number of meals eaten per day (1), reducing portion size of meals (1) and restricting consumption by adults in order for young children to eat (3).

³⁸ Increases in average rCSI scores over time are considered negative as they imply increases in the reported use of household negative coping strategies (related to reducing food consumption), whereas decreases in average rCSI scores are considered positive.

³⁹ The rCSI was calculated to better understand the frequency and severity of changes in food consumption behaviours in the household when faced with a shortage of food. The rCSI scale was adjusted for Somalia, with a low index attributed to rCSI <=3, medium: rCSI between 4 and 18, and high rCSI higher than 18.

In the endline assessment, there was a decrease in the percentage of households with a high rCSI, dropping from 27% in the first assessment to 22%. Simultaneously, there was an increase in the proportion of households with a low rCSI, increasing from 9% to 11% over the same period. There was an overall reduction in adopting negative consumption-based coping strategies during the endline assessment attributable to the MPCA.

Food Consumption Score (FCS)⁴⁰

The FCS is a composite score based on the dietary diversity and frequency of consuming certain food groups, and the relative nutritional value of foods consumed by a household in the 7 days prior to data collection.

Table 8: Proportion of households in each FCS classification.

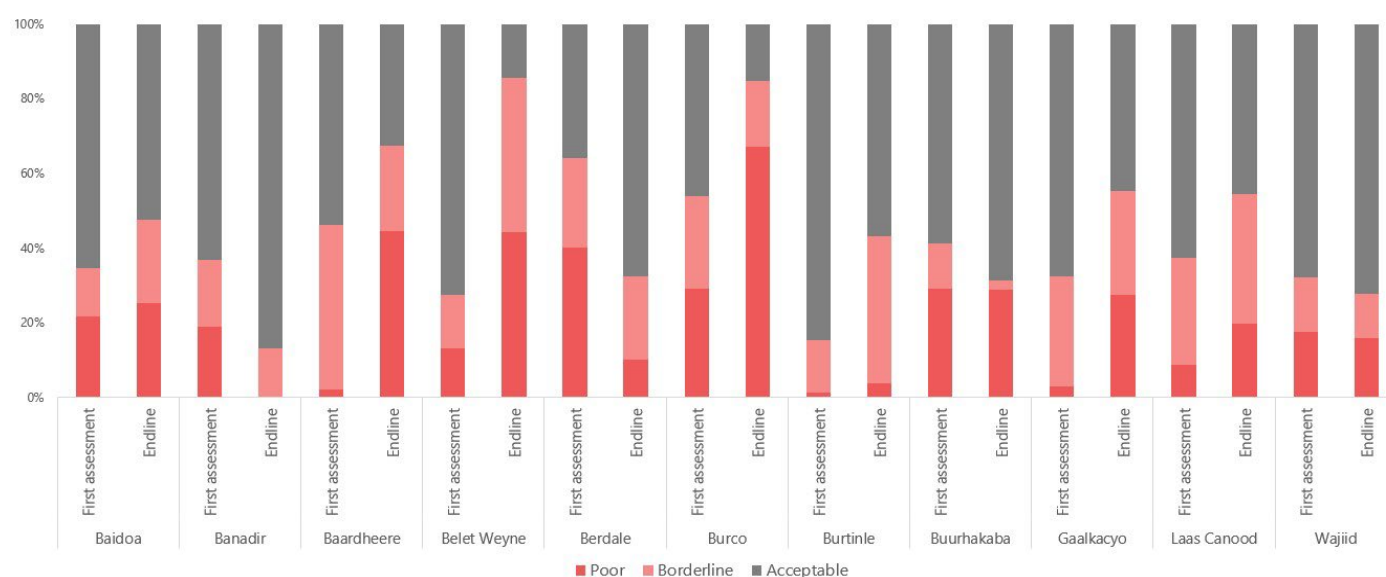
	First assessment	Endline
Poor	16%	22%
Borderline	21%	22%
Acceptable	63%	56%

The proportion of households with acceptable FCS decreased from 63% at the first assessment to 56% at the endline. In addition, the average FCS decreased from 48.1 at the first assessment to 44.6 during the endline assessment. Upon closer examination of individual districts, Banadir witnessed an increase in the proportion of households with acceptable FCS scores from 63% at the first assessment to 83% at the endline, and Berdale saw an increase from 36% to 68%. Worryingly, there was a significant decrease in acceptable FCS in specific districts: Belet Weyne district experienced a decrease from 72% during the first assessment to 14% at the endline, Burco district decreased from 46% to 15%. Districts that exhibited a large decrease in acceptable FCS at the endline have not only showed a reduced proportion of households with acceptable FCS but also a decreased overall average FCS. The decrease in acceptable FCS at the endline is likely due to households having had access to markets and were able to acquire food items at considerable prices. However, during the endline, the prices had increased as exhibited by the inflation rates in Somalia.⁴¹

⁴⁰ Find more information on the food consumption score [here](#). The cutoff criteria utilized for Somalia were as follows: HHs with a score between 0 and 28 were categorized as "poor," those with a score above 28 but less than 42 were considered "borderline," and HHs with a score exceeding 42 were classified as "acceptable." These categorizations were determined based on the high consumption of sugar and oil among the beneficiary HHs. High average FCS values are preferred since low average values indicate a worse food situation as shown by the FCS cut-off points.

⁴¹ [Trading economics. Somalia inflation rates.](#)

Figure 4: Proportion of households in each FCS classification.



Household Hunger Scale (HHS)⁴²

The HHS measures the prevalence of hunger over time to assess food security. It is used to measure extreme manifestations of insufficiency of food in the 30 days prior to data collection.

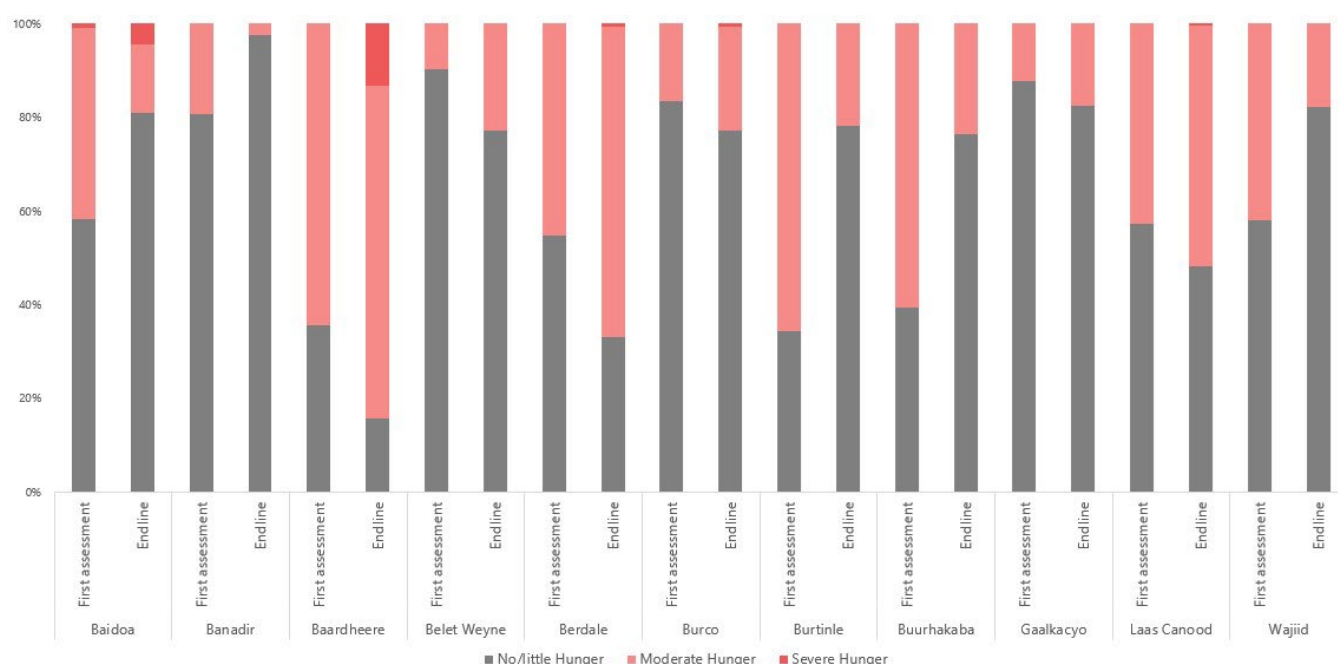
Table 9: Proportion of households per HHS category.

	First assessment	Endline
No/Little Hunger	61%	72%
Moderate Hunger	39%	27%
Severe Hunger	0%	1%

Positive improvements were seen in the proportion of households with no or little hunger between the first assessment and the endline. **The proportion of households reporting no or little hunger increased from 61% at the first assessment to 72% at the endline**, perhaps due to an improved access to different food groups among beneficiary households after the third cycle of cash transfer. However, during the endline, 1% of the assessed households were found to have severe hunger. These households were mainly from Baardheere (13%), Baidoa (4%), Berdale (1%) and Burco (1%). Ongoing insecurity was reported to have been the main barrier to accessing humanitarian assistance, which could have been complemented with cash assistance from SCC to fully meet basic needs at the time of the flood disaster.⁴³

⁴² Household Hunger Scale (HHS) is a new, simple indicator to measure household hunger in food insecure areas. HHS produces valid and comparable results across cultures and settings so that the status of different population groups can be described in a meaningful and comparable way to assess where resources and programmatic interventions are needed and to design, implement, monitor, and evaluate policy and programmatic interventions. Read more [here](#).

⁴³ [REACH Rapid Needs Assessment Factsheet Baardheere district November 2023](#).

Figure 5: Proportion of households per HHS category in the 7 days prior to data collection, by district.

When looking at the proportion of households per HHS category by district (see Figure 7 above), it becomes apparent that the food security indicators pointed out an improvement in the hunger situation within the households. Consistent with changes in the FCS, LCSi and rCSI scores, the HHS in the districts of Baidoa, Banadir, Burtinle, Buur Hakaba and Wajiid improved from the first assessment to the endline, with the proportion of households with no or little hunger consistently increasing at the endline in these districts. The magnitude of positive change in no or little hunger was particularly higher in Burtinle (where it increased from 34% at the first assessment to 78% at the endline) and Buur Hakaba district (from 39% at the first assessment to 76% at the endline).

Livelihood Coping Strategies Index (LCSI) ⁴⁴

The LCSI measures the livelihoods-related coping strategies that households employ when they are otherwise unable to access a sufficient amount of food or meet other basic needs. For this assessment, and in line with the Somali context, livelihood systems are categorised as either urban, agro-pastoral (including riverine populations), or pastoral, and livelihood coping strategies are accordingly context-sensitive, as shown in Annex 1.⁴⁵

As shown in table 1o below, a slight decrease (82% during the first to 80% at the endline) was found in HHs engaging in either emergency, crisis or stress level coping strategies. Reflective of this, the average LCSI decreased from 5.6 at the first assessment to 5.2 during the endline assessment. Unmet needs for food (88%), healthcare (64%), education (54%) and shelter (39%) were the top cited reasons for engaging in these coping strategies during the endline.

⁴⁴ LCSI scores are used to classify households into the categories of 'stress', 'crisis', and 'emergency'. Those households who do not report having employed any of the coping strategies considered within the LCSI are classified as 'none'. All livelihoods-based coping strategies employed by households in the previous 30-day period were reported on. For analytical purposes, however, each household's LCSI severity was classified based on the most severe coping strategy employed in the 30 days prior to data collection. Whether a household had already exhausted a particular coping strategy and could no longer continue to employ it was also considered.

⁴⁵ Households in each of the livelihood zones were asked a specific set of 10 of the 14 LCSI questions, appropriate to their context

Table 10: Proportion of households per LCS severity category, based on strategies reportedly used over the 30 days prior to data collection at the first assessment and endline.

	First assessment	Endline
None	18%	20%
Stress	42%	35%
Crisis	18%	21%
Emergency	22%	23%

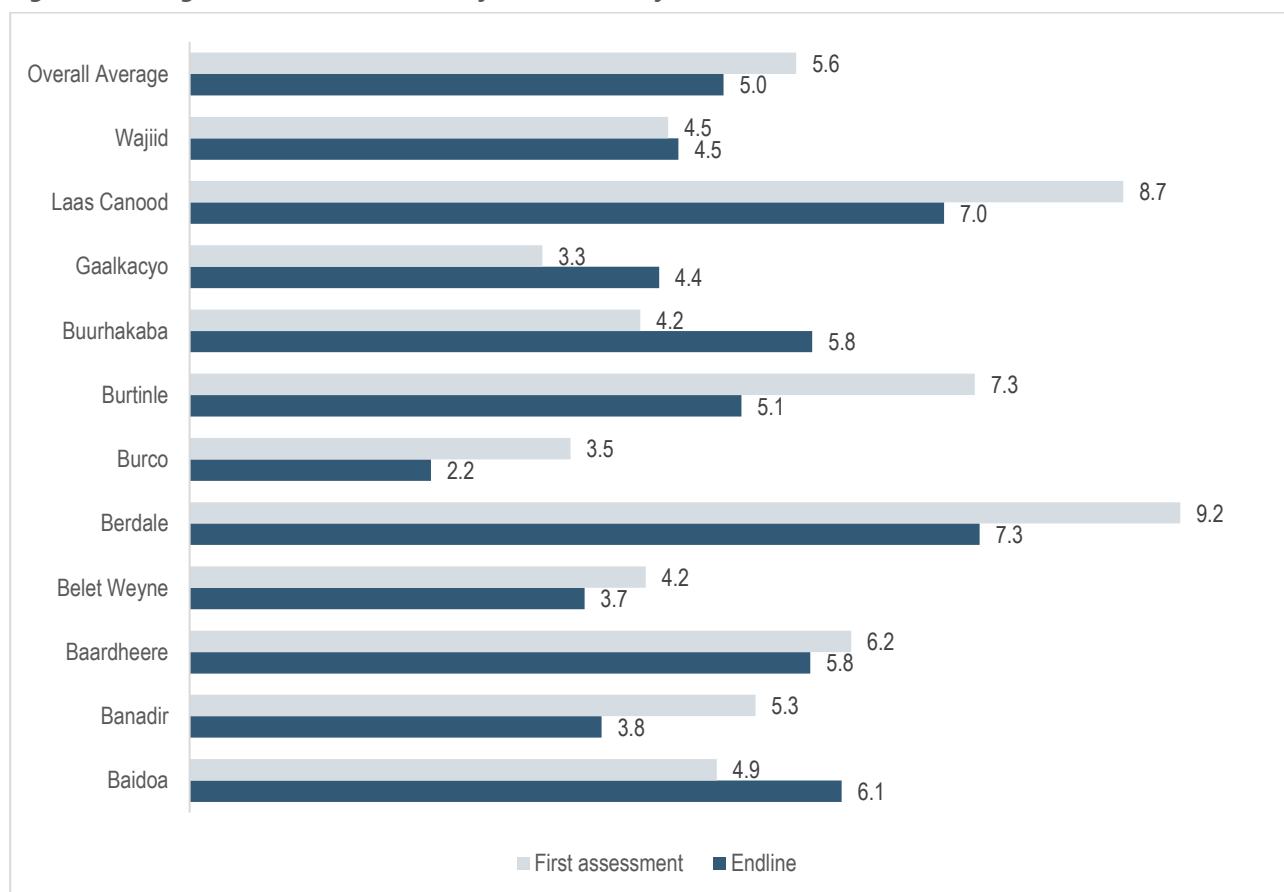
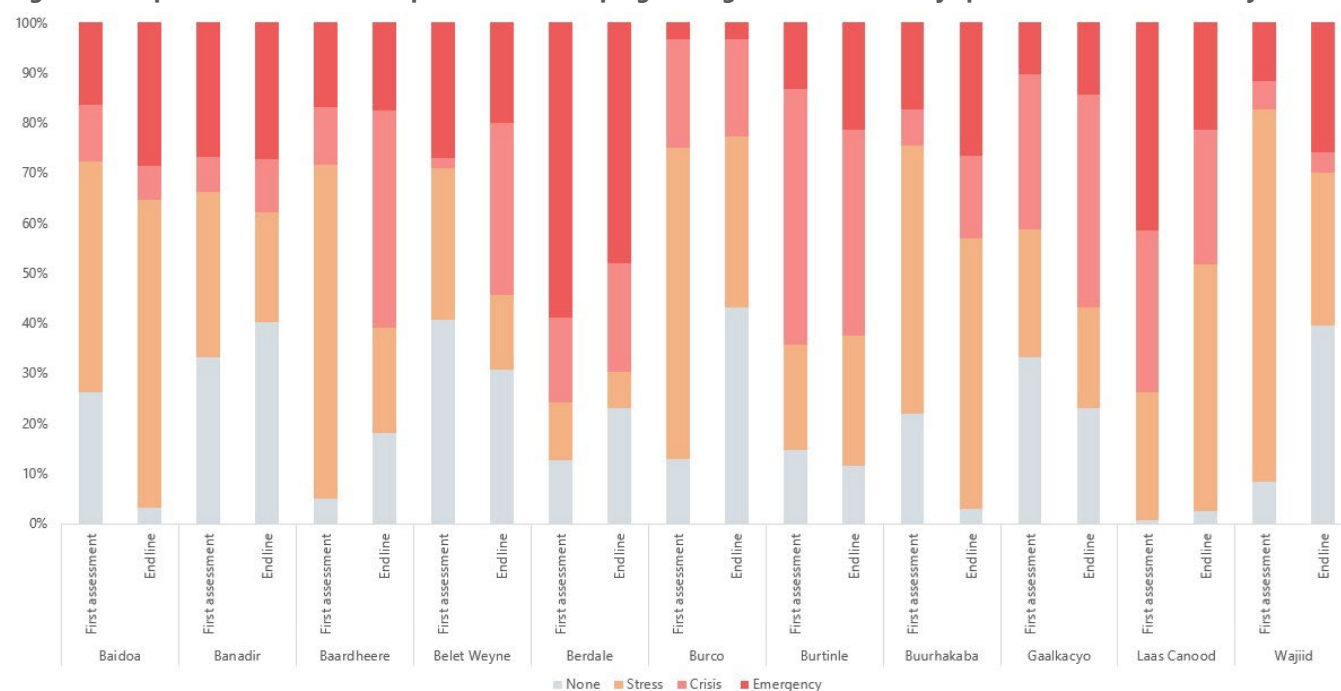
Table 10 shows the prevalence of each LCS severity category. The proportion of households who reported having employed none of the livelihood-related coping strategies in the 30 days prior to data collection slightly increased from 18% of households at the first assessment to 20% at the endline. In addition, the proportion of households in the “stress” category decreased from 42% at the first assessment to 35% at the endline. The cash transfers might have increased the disposable incomes of these households and thus made them able to spend on different commodities without exhausting their expenditure budget.

Despite the positive changes noted in the analysis, the endline assessment highlighted an increase in the use of emergency coping strategies in Berdale (48%) and Baidoa (29%) districts.

At the time of the first assessment, the three most commonly reported livelihood coping strategies across all districts were: purchasing food on credit or borrowed food (72%), borrowing money to buy food (52%), reducing health and education expenditures (27%), decreasing expenditures on fodder (24%) and withdrawing children from school (20%).

At the endline assessment, the three most commonly reported livelihood coping strategies across all districts were: purchasing food on credit or borrowing food (66%), borrowing money to buy food (38%), reducing health and educational services (27%), and consumed seed stocks (20%).

It should also be noted that the use of livelihood-based coping strategies reported by households varied greatly by district (see Figure 9 below).

Figure 6: Average LCSI score of beneficiary households, by district.⁴⁶**Figure 7: Proportion of households per livelihood coping strategies over the 30 days prior to data collection by district.**

⁴⁶ In the context of LCSI, lower values are favored as they signify a reduced reliance on negative coping strategies to address food shortages or fulfill essential household needs. A decline in the average LCSI serves as an indicator of improvement in these metrics.

SAVINGS AND DEBTS

During the endline, only 22% of the interviewed households reportedly had some savings averaging to 27.18 USD – a slight decrease from the first assessment where 14% of the households were found to have savings averaging to 32.74 USD. However, the proportion of households with debts during this period increased from 15% at the first assessment to 25% at the endline. The average debts remained stable between first assessment, where it was 104.00 USD and endline assessment, where it was 100.75 USD.

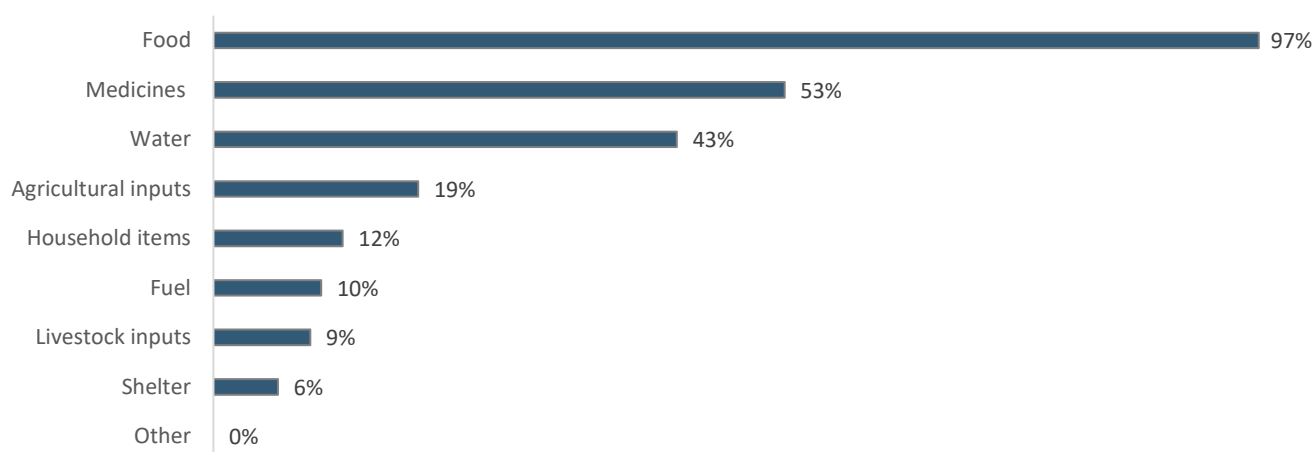
Households' top reported reasons for taking debts during the first assessment were: to buy food (71%), to acquire clothes (43%), access healthcare services (29%) which was consistent during the endline assessment where debts were acquired: to buy food (75%), to acquire clothes (30%), access healthcare services (26%), and to pay rent (21%).

Another indication of households' resort to taking debts to make ends meet and access essential needs can be seen from the fact that debt repayment represented a large portion of household expenditure as shown in the expenditure share category.

PRICE INFLATION

To capture any potential unintended negative effects of cash assistance on the SCC beneficiary households and their communities, households were asked several questions on the market price inflation during the endline assessment.^{47,48} **About 14% of the assessed HHs reported having the perception that traders overcharged them because of their beneficiary status. In addition, 20% of respondents reported that they thought prices had increased for the whole community following the cash transfers. Nearly all (97%) HHs of the 14% reported that food prices increased at the endline.**

Figure 8: Items for which vendors reportedly increased prices since the transfers started, by % of households at the endline who reported perceiving vendors had increased their prices for the whole community (n=450).⁴⁹



⁴⁷ Do you believe vendors specifically overcharged your household because they were aware of how much money you received through the cash payments? Do you believe vendors have increased the prices they charge to everyone in the community (both beneficiaries and non-beneficiaries) since the cash transfers began?

⁴⁸ Based only on personal perception, results were not triangulated with more objective market price monitoring. Despite their limitations, these questions nevertheless provide important insight into the perceptions of households of the effects of the MPCA programme on their community.

⁴⁹ As this question was only asked to those households who reported vendors increasing their prices, findings are indicative only and were not weighted by districts. Households were able to provide multiple answers, hence percentages do not add up to 100.0%.

PROTECTION INDEX SCORE

The Protection Index Score⁵⁰ serves as a proxy indicator for the percentage of beneficiaries (disaggregated by sex, age, and livelihood zone) reporting that humanitarian assistance is delivered in a “safe, accessible, accountable, and participatory manner”.⁵¹ The percentage of households responding positively to the relevant questions included in this score was 75% at the first assessment and **79% at the endline** assessment. During the endline, when the respondents were asked if they felt safe going through the programme’s selection process, registration, and surveys, **nearly all (99%) assessed households reported that they felt safe when going through the programme’s selection process.** Similarly, all assessed households reported not having paid, or knowing someone who paid, to get on the beneficiary list. All assessed households reported not being aware of someone in the community being pressured or coerced to exchange non-monetary favours to get on the beneficiary list. In addition, all assessed households reported having been treated with respect by NGO staff up to the time of data collection.

Table 11: Aggregated Protection Index Score by district.

	First assessment Score	Endline Score
Baidoa	75%	57%
Banadir	64%	82%
Baardheere	86%	64%
Belet Weyne	61%	86%
Berdale	79%	71%
Burco	61%	71%
Burtinle	61%	86%
Buurhakaba	79%	61%
Gaalkacyo	86%	82%
Laas Canood	79%	86%
Wajiid	68%	64%
Weighted Average	75%	79%

At the endline, households were allowed to make comments or suggestions on how to improve the SCC programming. **Approximately 40% of households chose to further explain the needs of their household and their community, and how aid programming could be improved to meet these needs.** A summary of their comments is provided in the table below:

⁵⁰ The Protection Index Score is calculated according to the DG ECHO Protection Mainstreaming Guidance document provided by the Somali Cash Consortium.

⁵¹ This score measures the % of beneficiary households giving a positive answer [at least one positive answer? Or answering positively to all questions?] to the following seven questions:

- Do you know of anyone in your community having been consulted by the NGO on what your needs are and how the NGO can best help?
- Was the cash assistance you received appropriate to your needs or those of members of your community?
- Do you feel safe when going through this programme’s selection process, surveys, and accessing your cash?
- Did you feel you were treated with respect by NGO staff during the intervention so far?
- During the selection process, do you think there were households that were unfairly selected for cash distributions over other households more in need?
- Have you or anyone you know in your community ever raised any concerns on the assistance you received to the NGO using one of the above mechanisms?
- If yes, are you satisfied with the response you have received?

‘Yes’ is considered a positive response to all questions, except for question 5, for which a positive response would be a ‘no’ answer.

Table 12: Suggestions made by beneficiary households on how to improve the cash assistance intervention by % of households who reported having suggestions.⁵²

	Endline (n=847)
Flood relief	12%
Medical infrastructure	45%
Increase field visits	28%
Shelter support	48%
In-kind food aid	50%
In-kind NFI aid	20%
Education infrastructure	45%
Livelihood support	34%
WASH support	22%
Additional assistance	21%
Soap distribution	7%
Long term support	23%
Disability support	5%
Drought relief	6%

While cash assistance may be an effective means for households to meet their basic needs in the short term, households and the communities in which they reside face numerous systemic challenges in their daily life, including the lack of necessary infrastructure like shelter and educational facilities. These findings indicate that some households would prefer supplementing their cash assistance with additional in-kind food aid, which could allow them to re-prioritise cash towards addressing their more medium-term needs.

ACCOUNTABILITY TO AFFECTED POPULATIONS

Awareness of Selection Criteria

Households were asked if they were aware of any of the beneficiary selection criteria used by NGOs, and if they were aware, they were additionally asked to list all criteria they were aware of. If households were unable to list any of the selection criteria in this follow-up question, their initial answer was changed to 'no'.

Overall, **at the time of the first assessment, 35% of households were able to list at least one selection criterion, while 65% were unable to list any.** Beneficiary households who were able to list at least one selection criterion were mostly aware of these selection criteria:⁵³ lack of income (79%), lack of assets (61%), disability of a household member (38%), recent displacement of the household (27%), illness of a household member (21%) and risk of malnutrition (20%).

⁵² As this question was only asked to the 55% of households who chose to make a comment or suggestion at the endline, findings are indicative only and were not weighted by district. As households were able to provide multiple comments, percentages do not add up to 100.0%.

⁵³ Given the length of time between the beneficiary selection process and the endline assessment (approximately three months), and the high likelihood of recall issues over time, this question was only included in the first assessment.

Perception of Representation by Village Relief Council (VRC)⁵⁴

Regarding community representation, households were asked to score their perception of how well the Village Relief Committee (VRC) advocated for them or represented their needs. During the first assessment, almost all (96%) households answered that they felt that the VRC represented their interests and advocated on their behalf either 'well' or 'very well', while 3% of households reported feeling that they were represented 'poorly' or 'very poorly'.

Complaint Response Mechanism (CRM) awareness

A slight increase was reported in the proportion of households who reportedly utilised the CRM platforms. This increased from 39% at the first assessment to 49% during the endline. Of the households who were aware of at least one option to contact the CRM (49%), during the endline, 75% reported being aware of the existence of a dedicated NGO hotline, while another 30% reported that they knew they could directly talk to NGO staff during field visits or at their offices.

Approximately a quarter (23%) of assessed households reported having raised concerns about the assistance received from the NGO using any of the complaint response mechanisms available at the endline. Of the 23% who raised concerns, a majority of households reported being satisfied with the response they received (82% fully satisfied and 16% partially satisfied). The primary reasons cited by households partially satisfied with the CRM response were the prolonged wait for a response (49%) and the perceived inappropriateness of the received response (23%).

Table 13: Most commonly reported reasons for not using CRM by % of households who reported not using CRM.

	First assessment (n=1,766)	Endline (n=1,696)
Fear of negative consequences	1%	1%
Lack of CRM knowledge	22%	14%
Not having any concerns	77%	85%

⁵⁴ 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 members: disability, illness, older person, large household size or households with many young children, minority or marginalized groups and clans, use of negative coping mechanisms, new or recent IDP, malnutrition, poor shelter condition and other criteria relevant to the local context, defined by the VRC members. Following the initial VRC selection, households were verified and registered as beneficiaries by the respective partner organisations.

CONCLUSION

The study highlights a mixed picture regarding the impact of the Multi-Purpose Cash Assistance program on food security, coping strategies, cash utilization, savings, and debts among beneficiary households. While there are notable improvements in coping strategy scores, indicating a decrease in the reliance on negative coping mechanisms, challenges persist in terms of food consumption scores and financial stability. During the endline, the findings indicate households were able to manage their immediate needs and cope with crises, as evidenced by the reduction in households resorting to credit purchases and borrowing money.

However, concerns remain regarding the sustainability of these improvements, particularly considering the continued reliance on debts, especially for essential needs like food. The ability to make independent expenditure decisions empowered households to access a diverse range of foods, resulting in higher caloric intake and an overall enhancement of the food situation within these households. Moreover, the indicators related to protection and accountability highlighted largely positive interactions between beneficiaries and SCC partners.

The protection and accountability indicators show that interactions between beneficiaries and Cash Consortium partners were largely positive, and overall, beneficiaries tended to express satisfaction with the programme. Due to the sensitisation and awareness created by the partner NGOs, approximately 49% of the households were aware of a complaints and response mechanism platform. This improves the accountability of the organisation, can help establish a relationship of trust between staff and communities, and improve the impact of our response.

Annex 1: An outline of the specific coping behaviours is below for different household livelihood types:

	Weight (Stress=2, Crisis=3, Emergency=4)	Urban / IDP	Agro- Pastoralist	Pastoralist
1. Sold household assets/goods (radio, furniture, refrigerator, television, jewellery, clothes etc.)	2	✓	✓	✓
2. Purchased food on credit or borrowed food	2	✓	✓	✓
3. Spent savings/ Sold more (non-productive) animals than usual	2	✓	✓	✓
4. Borrowed money	2	✓	✓	✓
5. Sold productive assets or means of transport (sewing machine, tools, wheelbarrow, bicycle, car, etc.)	3	✓	✓	
6. Sold off animals (productive and non-productive) but retained minimum stock	3			✓
7. Consumed seed stocks that were to be held/saved for the next season	3		✓	
8. Reduced Health (including Drugs) and Education Expenditures	3	✓		
9. Decreased expenditures on fodder, animal feed, veterinary care, etc.	3			✓
10. Withdrew children from School	3	✓	✓	✓
11. Sold house or land	4	✓	✓	✓
12. Begged	4	✓	✓	
13. Sold last female animals	4			✓
14. Entire household has migrated to this area in the last 6 months or plan to migrate to the new area within the next 6 months to get help	4	✓	✓	✓