

SOMALIA

Post Distribution Monitoring Baseline and Endline Evaluation

Comparative assessment report for the Somali Cash
Consortium Modification Request 1

March 2023



SOMALI CASH
CONSORTIUM



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ABBREVIATIONS AND ACRONYMS

COOPI	Cooperazione Internazionale
CRM	Complaint 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
HDDS	Household Dietary Diversity Score
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
UCT	Unconditional Cash Transfer
USD	United States Dollar
VRC	Village Relief Committee

Somali Cash Consortium Partners



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Cover photo: Beneficiaries holding the SIM cards used for mobile money transfer by Hormuud Telecom Photo |

ABOUT IMPACT

IMPACT Initiatives 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.

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 unconditional cash transfers (UCT).¹ Currently in its sixth year of activities, the SCC distributed three cycles of UCT, to vulnerable beneficiary households targeted under Modification Request 1 (MR1)², between July and November 2022 in Badhaadhe, Banadir, Bandarbayla, Belet Xaawo, Burtinle, Buur Hakaba, Caynabo, Ceel Buur, Ceel Waaq, Ceerigaabo, Galdogob, Garoowe, Jalalaqsi, Jariiban, Jowhar, Laas Canood, Luuq, Owdweyne and Qardho districts and hard-to-reach districts of Afgooye, Belet Xaawo, Jamaame, and Kurtunwaarey^{3,4}.

The objective of the assessment was to monitor the impact of the SCC MPCA 2022 intervention on the expenditure patterns and food security status of the beneficiary HHs and to inform the multi-purpose cash-based humanitarian response in Somalia across first and endline assessments. The cash transfer amounts were set in line with the harmonised transfer values endorsed by the Cash Working Group (CWG) in March 2022 based on the [Minimum Expenditure Basket \(MEB\)](#) of each targeted district. The Somali Cash Consortium is led by Concern Worldwide and 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).

The October-December 2022 [deyr](#) rains performed below average across most parts of Somalia, resulting in a fifth consecutive season of poor crop production and livestock losses in the areas most affected by drought.⁵ Moreover, conditions for crop and livestock production are expected to remain extremely poor until at least the start of the next Gu rainy season expected not earlier than April 2023, leading to further loss of livelihoods.⁶

The severe impact of drought on all economic sectors has been reported in the regions of Hiran, Bakool, Gedo, Bay, Galgaduud, Sool, Nugaal and Mudug. According to the Integrated Phase Classification (IPC) framework, approximately 6.7 million people across Somalia are estimated to face high levels of acute food insecurity (IPC Phase 3 or above) between October and November 2022.⁷ Therefore, the humanitarian needs of people living in Somalia increased throughout 2022. This is due to the drought resulting from the below-average Gu rainfall and light-moderate Deyr rains that were reported in parts of Somalia and exceptionally high food prices, exacerbated by concurrent conflict/insecurity and disease outbreaks (primarily acute watery diarrhea and measles).⁸

Table 1 below summarises the key findings of the SCC MR1 baseline and endline assessments, based on the recommended indicators standardised by the Monitoring and Evaluation (M&E) Workstream of the Somalia Cash Working Group (CWG). For clarity, the results presented in Table 1 represent the weighted averages for beneficiary households of the SCC MR1 programme. Overall averages were

¹ 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.

² MR1 is a top-up funding to the SCC 2022 main caseload that targeted new vulnerable beneficiary HHs across Somalia.

³ These were pilot districts classified as hard-to-reach areas where separate data collection was conducted by the SCC partners.

⁴ Districts in the main caseload overlapped into the MR2 notably; Buur Hakaba, Jamaame, Jowhar, Belet Xaawo, Owdweyne and Afgooye

⁵ [Famine Early Warning Systems Network \(December 2022\), Somalia](#)

⁶ *ibid*

⁷ [Integrated Food Security Phase Classification \(July-December 2022\), Somalia](#)

⁸ *ibid*

weighted⁹ based on the population proportion represented by each targeted 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 is included in the report. Results disaggregated by gender and livelihood zone were not weighted and are *indicative only*, as the sample was not stratified according to these factors. Further details on how each score is calculated are also provided. A more detailed analysis of each of the indicators presented in this section; disaggregation by district is provided in the report itself.

Table 1: Somali Cash Consortium baseline and endline key findings.^{10,11}

Key Indicator	Target Value	Baseline Value	Endline Value	% Change (from baseline to endline)
% of households reporting that cash helped them meet their basic needs	95.0%	NA	98.0%	N/A
Average meals consumed per household in the last 24 hours		2.1	2.4	+14%
Average Food Consumption Score (FCS)		38.5	49.0	+27%
% of households with an acceptable FCS	46.0%	36%	58%	+66%
% of households with a high or medium HDDS		51%	85%	+61%
Average Reduced Coping Strategies Index (rCSI) ¹²		15.2	15.0	-1%
Average Livelihood Coping Strategies Index (LCSI)	5.4	7.8	5.4	-31%
% of HHs whose spending was reportedly equal to or above MEB	30%	22%	46%	+109%
% of total household expenditure spent on food		56%	48%	-14%
Average expenditure on food in the 30 days prior to data collection per household (in USD)		54.7	67.8	+24%
Protection Index Score ¹³	79.0%	79%	82%	+4%

⁹ 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 minimize any effects the survey design or data collection mode may have on the sample makeup and resulting data.

¹⁰ 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 baseline and endline assessments, the aggregated results presented only represent the districts where both the baseline and endline data were collected.

¹¹ 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.

¹² A decrease in the average LCSI and rCSI is an indication of improvement in these indicators.

¹³ Unlike the other scores presented in Table 1, the objective for the Protection Index Score is not necessarily to see an improvement between the baseline or endline scores, but rather for the score to remain consistently on target at 79%.

KEY FINDINGS ¹⁴

Cash use and impact

A high proportion of households reported that cash helped them meet basic needs at the endline assessment (98%). In addition, at the endline, findings indicate that two-thirds (66%) of the assessed households had suggestions on how to improve the cash assistance to meet their household's needs. Increasing duration of cash transfers (84%), increasing amounts of cash transfers (56%), and providing continuous cash transfers throughout the year (50%) were the top-reported suggestions. While cash assistance may be an effective means for households to meet their basic needs in the short-term, some households reported that they would ideally substantiate their cash assistance with additional in-kind food aid, which could allow them to re-prioritise cash towards addressing their more medium-term needs.

Food security and livelihood

Improvements were seen across most of the core indicators used to measure household levels of food security between the baseline and the endline assessments. However, for some indicators there is a relatively small magnitude of change, indicating that the cash transfers primarily helped households maintain their food security levels over the course of the programme.

The assessed households were classified using the [consolidated approach to reporting indicators \(CARI\)](#) to the four food security groups. As shown in Annex 2, after the three rounds of the cash transfers, households food security level improved. This is a clear indication that the cash transfers made a positive impact to the beneficiary households.

The average number of meals consumed by each person per day increased slightly, from 2.1 to 2.4 at the endline. This is consistent with the findings of the Food Consumption Score (FCS): at the time of the baseline, 35% of beneficiary households were found to have an acceptable FCS. By the endline, 58% of households were found to have an acceptable FCS. In addition, it is worth noting that the proportion of households whose spendings were equal to or above the MEB increased from 22% at the baseline to 46% in the endline assessment.

Between the baseline and endline, the proportion of SCC beneficiary households with an acceptable FCS increased, while the proportion of households with a poor or borderline FCS decreased. Between the baseline and endline, the proportion of households with a high Household Dietary Diversity Score considerably increased from 18% at the baseline to 59% during the endline, an indication that households were consuming a more diverse diet at the end of the programme compared to before the cash assistance. The improvement in FCS and HDDS at the endline assessment is likely due to the beneficiary households having received cash to supplement their income and help them in purchasing a variety of food. To obtain a more complete picture of household-level food security, these indicators should be considered alongside the reduced Coping Strategies Index (rCSI) and the Livelihoods Coping Strategies Index (LCSI).¹⁵ The overall rCSI scores decreased from 15.2 at the baseline to 15.0 at the endline. **The overall decrease in the average rCSI**

¹⁴ 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 UCT programme.

¹⁵ More information on LCSI can be obtained [here](#) and rCSI [here](#).

score over time, between the baseline and the endline, **indicates a slight decrease in the use of negative coping strategies**. During the endline assessment, households had access to money and were able to purchase food which in turn allowed them to decrease the frequency of the use of negative coping strategies.

Most of the households (83%) were found to engage in emergency, crisis or stress level coping strategies.¹⁶ These households are likely to have eroded their overall resilience, hence increasing the likelihood of exhausting their limited resources to afford basic needs. Food access (86%), healthcare (55%) and education (52%) were the top cited reasons for engaging in these coping strategies during the endline.

Household expenditure breakdown

The average proportion of household expenditure representing food purchases decreased from 56% at the baseline to 48% at the endline. A higher proportion of expenditure dedicated to food may indicate less funds available for other basic needs items, and for saving up stocks to build resilience against future shocks. Although the proportion of household expenditure on food decreased, the actual amount of money spent by households on food increased between the baseline (USD 54.70) and endline (USD 67.8), indicating that households were able to purchase more, or better-quality food. In addition, at the endline, clothing formed part of the top-four reported expenditure categories.¹⁷

Savings and debts

Although a minority of HHs (3%) reportedly had any savings at endline compared to 4% at baseline, the average savings amount slightly increased after the three rounds of cash distributions, from 26.6 USD at the baseline to 43.0 USD at the endline, out of the households that reported having savings. The proportion of HHs with debts during this period decreased slightly from 87% at the baseline to 82% at the endline assessments respectively. In addition, HHs' average debt amounts also decreased from 138.7 USD at the baseline to 97.7 USD during the endline. The top reasons for taking debt were to acquire clothes (46%), access healthcare services (43%) and pay rent (24%).

Protection and accountability

Nearly all households (97%) reportedly perceived the selection process for the MPCA programme to be fair.¹⁸ In addition, **all households (100%)** reported that they **were treated with respect** by non-governmental organisations (NGOs) staff, and that they felt safe during the process of selection, registration, and data collection at the baseline. However, only 23% of interviewed households reported knowing someone in the community who had been consulted by an NGO at the time of endline data collection.¹⁹

¹⁶ The LCSII Stress category includes; selling household assets/goods, purchasing food on credit or borrowing food, spending savings and selling more animals while the crisis category comprises selling productive assets or means of transport, selling productive and nonproductive animals, consuming the seed stocks held for the next harvest, withdrawing children from school and reducing health and education expenditures and emergency category comprise of selling house or land, begging, selling last female animal and livelihood activities terminated (entire household has migrated in the last 6 months or plans to migrate to the new area within the next 6 months).

¹⁷ This was attributed to the celebrations of Islamic New Year (1st Muharram 1444, July 30, 2022) and Day of Ashura (10th Muharram, August 8, 2022) which fell in the data collection period. Therefore, households might have acquired clothes to celebrate such occasions.

¹⁸ Since this finding is only applicable to the selected people who were interviewed, there could be some bias.

¹⁹ The protection-related issues raised by the remaining households were sent to the cash implementing partners for follow-ups.

During the endline, 29% (a 14% point increase from the baseline) of the respondents reported being aware of any options to contact the NGOs. **Of these respondents, a majority (71%) of households reported being aware of the existence of a dedicated NGO hotline**, while another 29% reported that they knew they could directly talk to NGO staff during field visits or at their offices.

CONCLUSION

At the time of the endline, **increases were seen in overall food consumption and diversity of food consumed, while reliance on negative food-based coping strategies to meet household food-based needs appeared to have decreased in most locations**. Given the timeline of the endline assessment, which took place approximately four weeks post-UCT reception, any findings presented in this report must be considered short-term in nature. Potential long-term impact was not assessed through the scope of this assessment.

Despite positive improvements over time for most food security-related indicators when comparing the baseline and endline values, some indicators such as the LCS (stress category of LCS) were statistically not different between the baseline and endline. There are a number of external factors, not fully captured within the scope of this assessment, which may have contributed to this.

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. In addition, nearly all beneficiary households of the SCC UCT programme reported feeling safe and respected throughout all programme phases. During the endline assessment, some households made suggestions to improve the programme, including increased field visits by NGOs giving cash, need for in-kind food alongside the cash transfer to their community, and need for educational infrastructure.

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INTRODUCTION

To evaluate the impact of Unconditional Cash Transfer (UCT) on beneficiary households, IMPACT supported the Somali Cash Consortium (SCC) by conducting a baseline assessment between 24th July and 1st September 2022 prior to the first transfer and the endline assessment between 23rd October and 29th November 2022 following the last round of cash transfers. The overall aim of this study was to assess the impact of MPCA on drought-affected households in the targeted districts and inform similar interventions in the future by the Somali Cash Consortium. This report will compare the results of the baseline and endline assessments by analysing changes over time. Findings are based on a representative sample of 7,765 households in Somalia.

METHODOLOGY

All assessments conducted by IMPACT within the scope of the 2022 SCC MR1 activities consisted of a quantitative household survey, with both objective and subjective household well-being indicators. Beneficiary households of the SCC UCT programme were selected through stratified simple random sampling to 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 survey questions were co-designed by IMPACT and the SCC.

Sampling strategy

A stratified simple random sampling approach was followed to draw the sample, based on a 95% confidence level and a 7% margin of error (MoE), with findings representative of Cash Consortium beneficiaries in each of the districts targeted by SCC activities. A buffer of 15% was added to the sample size at the time of the baseline to allow for such follow-up even with the expected drop-out and non-participation of some households. The buffer remained 15% at the endline.²⁰

For districts where more than one partner was operating, notably Belet Xaawo, the sample was split based on the proportion of each partner's caseload compared to the total number of beneficiary households in the district.

SCC had pilot interventions in Afgooye, Belet Xaawo, Jamaame and Kurtunwaarey where the SCC partners that were present in these districts helped in data collection. These districts were classified as hard-to-reach areas.

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.

²⁰ The endline samples were drawn from the third and last payroll used by the SCC partners to ensure that households only who received UCTs were surveyed.

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 can be seen in Table 2 below.

Table 2: Baseline and endline assessment target sample sizes and total surveys completed by District.

Region	District	Beneficiary Caseload	Target Sample Size 95% Conf. 7% MoE	Target Sample Size with Buffer (rounded)	Surveys Completed Baseline	Surveys Completed Endline
Lower Shabelle	Afgooye	200	99	114	109	109
Lower Juba	Badhaadhe	890	161	185	158	213
Banadir	Banadir	850	159	183	207	145
Bari	Bandarbayla	576	146	168	155	167
Gedo	Belet Xaawo	792	157	181	202	226
Nugaal	Burtinle	969	163	187	354	333
Bay	Buur Hakaba	260	112	129	136	167
Sool	Caynabo	78	56	64	62	47
Galgaduud	Ceel Buur	535	144	166	231	201
Gedo	Ceel Waaq	805	158	182	221	186
Sanaag	Ceerigaabo	1,250	170	196	203	235
Mudug	Galdogob	620	149	171	190	192
Nugaal	Garowe	740	155	178	189	201
Hiraan	Jalalaqsi	478	139	160	196	222
Lower Juba	Jamaame	556	145	167	160	163
Mudug	Jariiban	196	98	113	71	89
Middle Shabelle	Jowhar	550	145	167	160	170
Lower Shabelle	Kurtunwaarey	292	118	136	144	128
Sool	Laas Caanood	203	100	115	109	108
Gedo	Luuq	1,002	164	189	195	223
Togdheer	Owdweyne	555	145	167	167	176
Bari	Qardho	818	158	182	199	246
All assessed regions	All assessed districts	13,215			3,818	3,947

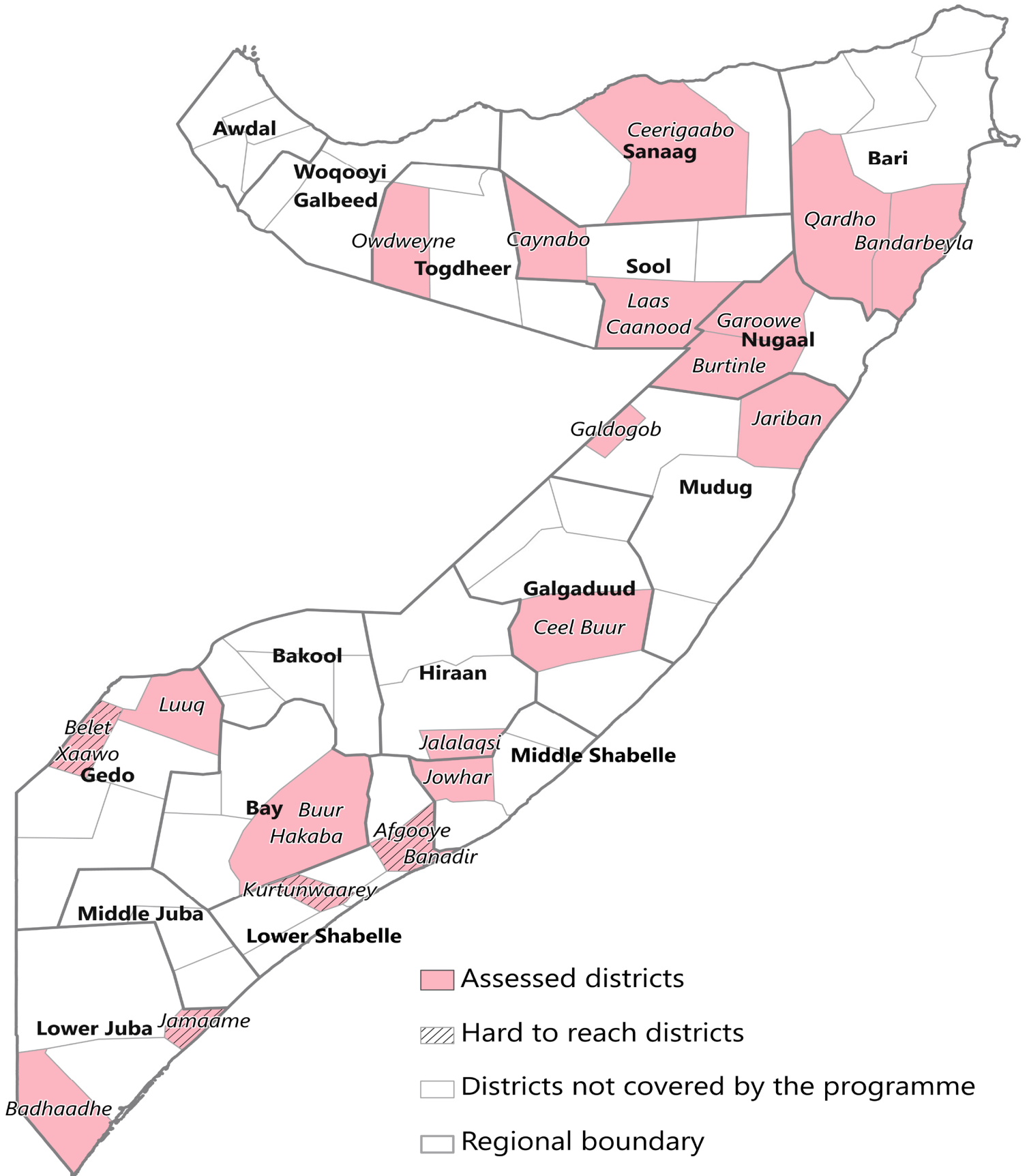
Data collection methods

IMPACT conducted quantitative data collection remotely to the beneficiary households during the baseline and the endline assessments, respectively. Household behaviours were assessed during this period. The baseline assessment was conducted between 24th July and 1st September 2022²¹ before the

²¹[IMPACT SOM Somalia-Cash-Consortium Baseline-MR1 Factsheet September-2022.pdf](#)

Geographical scope

Map 1: Map of assessed areas.



first round of cash transfer to the beneficiary households, while the endline assessment was conducted between 23rd October and 29th November 2022 after the third and last round of cash transfer²².

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, focusing on selected sectoral, cross-sectoral, and thematic indicators, disaggregating data where interesting by factors such as district and gender of the head of household respondent. To account for the unequal distribution of households, results were weighted at district level.

Challenges and Limitations

- **Phone interviews:** Due to the length and in-depth nature of this survey, some respondents were prone to survey fatigue or left the survey halfway through to take care of errands. Additionally, older respondents or those with hearing difficulties likely faced additional difficulties in participating in the survey, which might have led to an under-representation of their perceptions. Poor connectivity and lack of personal interaction were also expected. To account for these challenges, the questionnaire size was limited to avoid losing respondents' attention.
- **Cultural taboos,** such as topics associated with consumption of khat and gift/charity as a source of income, might have resulted in under-reporting on certain indicators, notably the monthly household expenditure breakdown.
- **Limitations of household surveys:** While household-level quantitative surveys seek to provide quantifiable information that can be generalised to the populations of interest, the methodology is not suited to provide in-depth explanations of complex issues. Thus, questions on "how" or "why" (e.g., reasons for adopting coping strategies, differences between population groups, etc.) are often beyond the scope of the assessment format adopted. The unit of measurement for this assessment was the household, which does not allow assessment of intra-household dynamics (including in relation to intra-household gender norms, roles, and dynamics, disability, age, etc.).
- **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.
- **Perceptions:** Questions on household perceptions may not directly reflect the realities of the household well-being - only respondents' perceptions of them.
- **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

²²[IMPACT SOM ENDLINE-MODIFICATION-REQUEST-FACTSHEET SOMALIA-CASH-CONSORTIUM NOVEMBER 2022.pdf](#)

expenditures accurately and to such a degree of detail; hence it might have negatively impacted the accuracy of reporting on those indicators.

- **Seasonal effects:** Baseline data collection was conducted during the Hagaa season while endline data collection occurred during the Deyr season. Needs therefore may differ during these two rainy seasons.

FINDINGS

This section of the report presents and compares the main findings of the SCC baseline assessment, and endline PDM assessments. It is structured around the following parts:

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

Respondent Profile and Household Demographic Breakdown

Respondent Profile

Over the span of all assessments,²³ 7,765 respondents were surveyed. Of these surveys, 92% were conducted directly with the self-reported head of household. The remaining 8% of surveys were conducted with a different member of the household who answered the questions on behalf of the head of household.²⁴ This could be due to various reasons, for instance, the head of household being unavailable during data collection or having hearing problems and being unable to participate in a phone-based interview. The rate of heads of households directly participating in the survey was consistent across the two assessments, as can be seen in Table 3 below.

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

	Yes	No
Baseline	92%	8%
Endline	91%	9%

Household Demographic Breakdown

This section will provide a brief overview of the demographic breakdown of the households included in this assessment. Averages have been weighted according to the number of surveys collected during each assessment phase. The sample was not stratified according to 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

During the endline, more than half (52%) of the interviews were conducted with female respondents and the average age of all heads of households was 40.9 years, with male heads of household being on average 42.1 years old and female heads of household averaging at a slightly younger age – 39.5 years old.²⁵

²³ Hereafter, when "all assessments" are mentioned, this refers to the baseline and endline assessments conducted in 2022 under the scope of the MR1 project cycle. Averages have been weighted according to the number of surveys collected during each assessment phase.

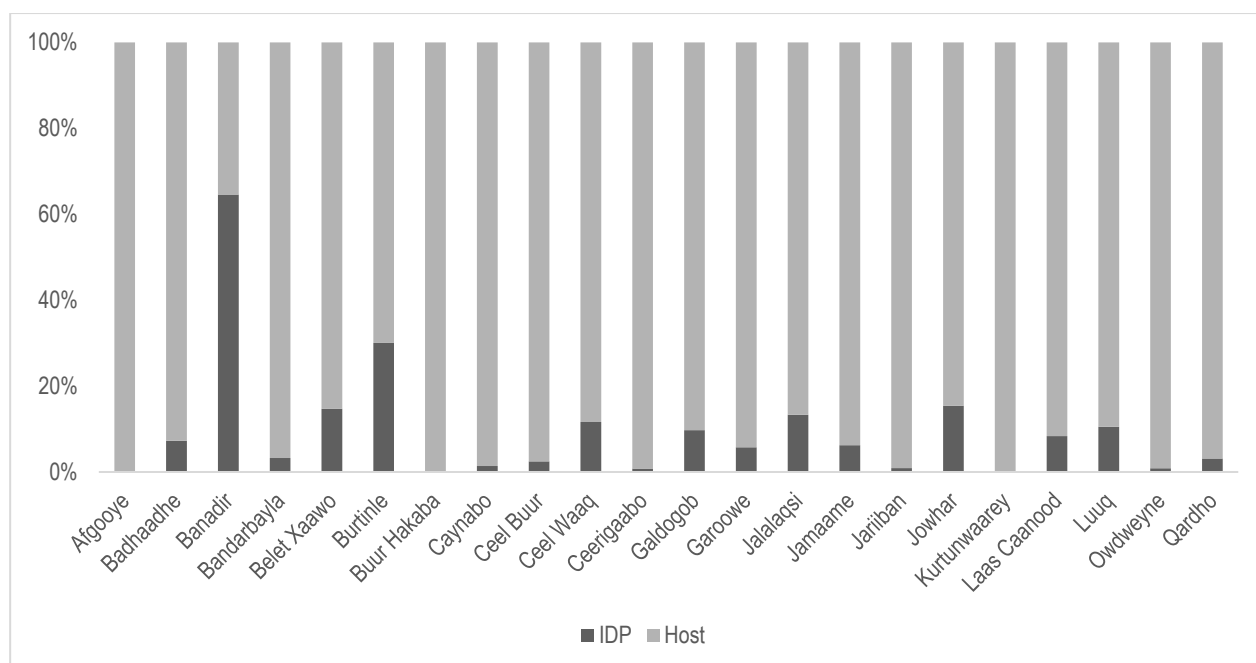
²⁴ In all surveys, regardless of whether the respondent was the self-reported head of household or not, the gender and age of the reported head of household were collected for disaggregation purposes.

²⁵ 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 Status

To determine displacement status, households were asked about their current location and whether they originally came from this location. Those who answered that they were not originally from this location were asked a follow-up question to determine when they had arrived²⁶. Based on this approach, among the interviewed SCC beneficiary households, a majority (90%) of the households were found to be members of the host community, and only 10% were IDPs. As shown in Figure 1 below, the breakdown of IDP households and households who are part of the host community varies greatly by district; in Afgooye, Bandarbayla, Buur Hakaba, Caynabo, Ceel Buur, Ceerigaabo, Jariiban, Kurtunwaarey, Owdwyne and Qardho districts, more than 95% of the beneficiary households were categorised as members of the host community. Most IDPs were found to be in Banadir (65%), Burtinle (30%) and Jowhar (15%).

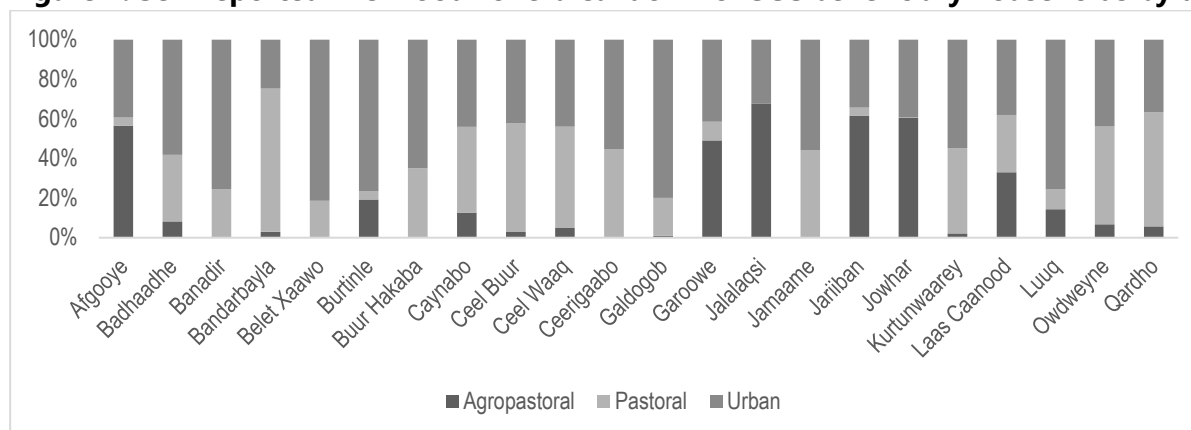
Figure 1: % of IDPs and the host communities of the SCC beneficiary households by district.



Livelihood Zone Breakdown

As shown in Figure 2 below, the proportional breakdown of the livelihood zone varies considerably by district. Of the SCC beneficiary households surveyed across all assessments, 49% were categorised as urban households, 16% as agro-pastoral and 35% as pastoral, based on household self-reporting.

²⁶ Based on the arrival time, IDPs who had arrived in a period of less than two years were classified as new arrivals by the Consortium management unit.

Figure 2: Self-reported livelihood zone breakdown of SCC beneficiary households by district.

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. The proportion of HHs reporting joint-decision-making had considerably increased between the baseline (**43%**), and endline (**61%**). While decision-making by only male members of the HH decreased from **32%** to **18%**.

In addition, nearly all (99%) HHs reported that there were no conflicts in and between the HH members on how to spend cash received at the endline.

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

	Baseline	Endline
Male	32%	18%
Female	32%	21%
Joint Decisions	43%	61%

Perceived well-being Indicators

Households were asked the following series of subjective questions²⁷ 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 a sufficient quantity of food to eat?
2. In the past month, has your household had a sufficient variety of food to eat?
3. In the past month, has your household had enough money to cover your household's basic needs?
4. How would you rate your household's overall well-being in terms of being able to meet basic needs?
5. How would a crisis or shock, such as flooding, drought, locusts, hailstorms affect your household's well-being?

²⁷ This series of perceived well-being indicators was developed jointly by the Cash Consortium and an external consultant working on a previous grant.

Given the sensitive nature of these questions, households had the choice to select 'no answer' if they were unwilling or unable to answer the question.

As can be seen in Figures 3-7 below, households generally rated their current well-being and their ability to withstand future shocks quite poorly during the baseline. There were marked improvements across most subjective indicators at the time of the endline assessment. Following the three monthly unconditional cash transfers, households' perception of their food security, economic well-being and ability to meet basic needs, overall well-being, and resilience to future shocks appeared increasingly positive, indicating that households felt more financially secure and had **a greater ability to meet their basic needs.**

As seen in Figures 3 & 4, the percentage of households reporting that they "never" or "rarely" had a sufficient quantity of food to eat in the month prior to data collection decreased, while the percentage of households reporting that they "mostly" or "always" had enough food to eat increased between the baseline and the endline assessment, indicating a positive impact of the distributions on households' experiences with access to food. The proportion of HHs reporting "mostly" having had sufficient quantities of food to eat in the 30 days prior to data collection increased from 14% to 49% between the baseline and endline respectively. **Similar outcomes were found based on the household's perception of the variety of food consumed.** This positive shift in households' perception of their own well-being aligns with the positive increases in other indicators measuring food security outcomes, particularly the FCS and HDDS, which more quantitatively assess changes over time in the quantity and variety of food consumed.

Figure 3: Percentage of households reporting always, mostly, rarely, or never having had enough quantity food in the month prior to data collection.

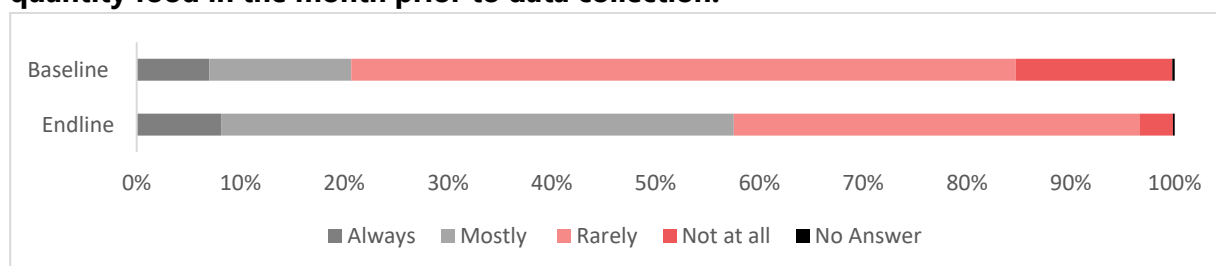
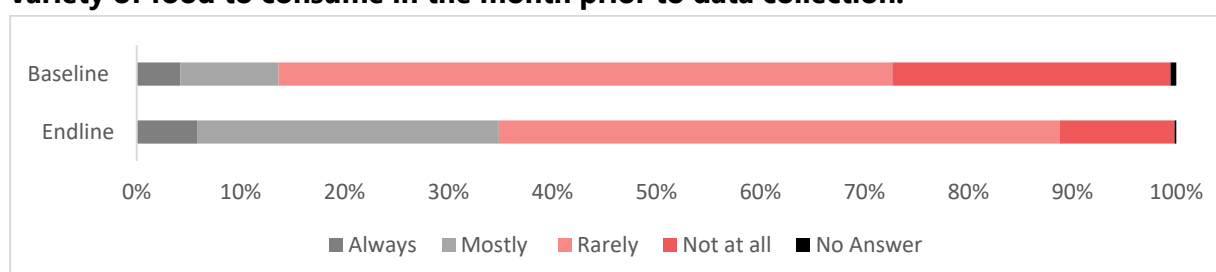


Figure 4: Percentage of households reporting always, mostly, rarely, or never having had enough variety of food to consume in the month prior to data collection.



As demonstrated in Figure 5 below, at the time of the baseline only 13% of all households reported always or mostly having been able to access money to cover their basic needs in the month prior to data collection. This proportion steadily increased at the endline (33%), while the proportion of households reporting not having been able to do so at all decreased from 40% to 19%. This is likely

due to revised transfer values to cater for the increased market prices of basic commodities that were experienced during the programme period.²⁸

Figure 5: Percentage of households reporting always, mostly, rarely, or never having had enough money to cover basic needs in the month prior to data collection.

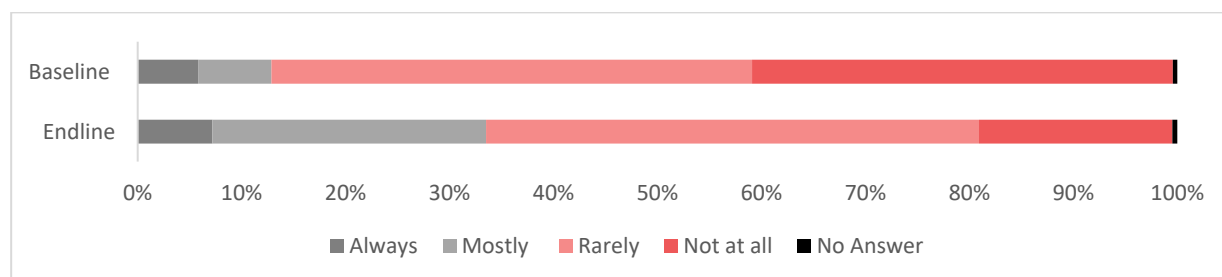
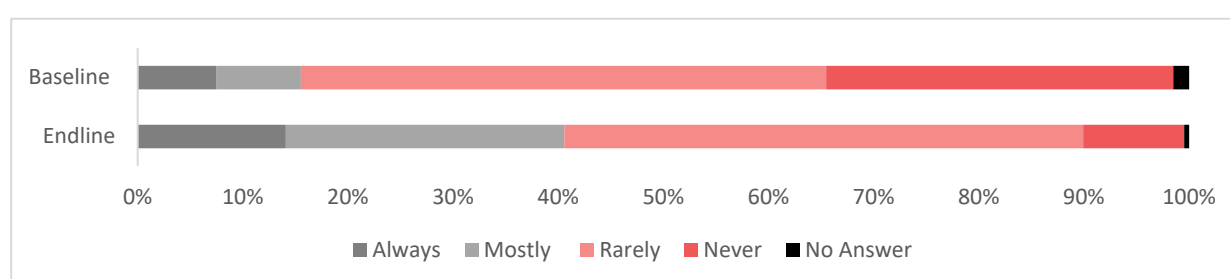


Figure 6: Percentage of households reporting always, mostly, rarely, or never being able to meet their basic needs in the month prior to data collection.



The household perception of their overall well-being, reported as their ability to meet basic needs, improved from the baseline to the endline. While, during the baseline, only 15% of households reported having “mostly” or “always” been able to meet their basic needs in the 30 days prior to data collection, this proportion had risen to **41% of households** during the endline, an indication that UCTs had a positive impact on vulnerable households amidst the worsening drought conditions.

These findings appear to be consistent with households’ reported perception of the appropriateness of cash assistance; with 86% of households reporting at the endline that the cash assistance was appropriate to their household’s needs. Only 14% felt cash as a modality was not appropriate to them at the time of endline data collection. **These households felt cash should be complemented with other types of aid, other than the cash assistance, to help them, meet most of their basic needs.** Out of the 66% of households that had suggestions to improve the project, 84% felt that the programme duration should be increased and 56% of households felt that the amounts disbursed should be increased

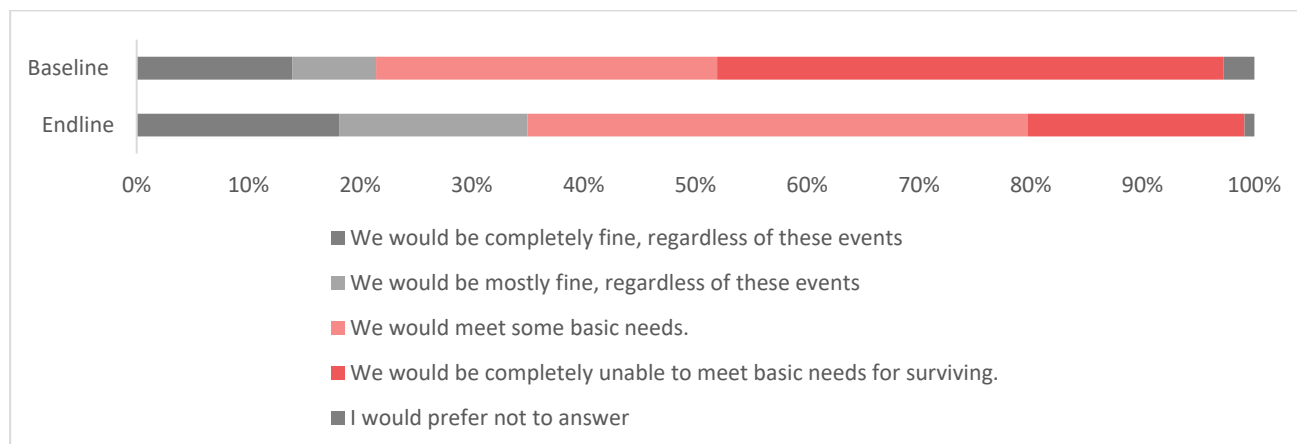
As demonstrated in Figure 7 below, the households’ perception of their ability to withstand a crisis or shock was considerably higher during the endline compared to the baseline. The proportion of households believing that they would meet some basic needs for surviving a crisis such as a drought, flooding, locust invasions or hailstorms slightly increased from 31% at the baseline to 45% at the endline. Reflecting the general trend of the other subjective well-being indicators, the proportion of households reporting positive perceptions of their well-being³⁰ appears to have increased between the

²⁸ [Joint Markets and Supply Chain Update WFP \(5th -12th November 2022\)](#)

³⁰ Referring here to household access to a sufficient quantity of food, access to enough money to cover basic needs, ability to withstand shocks, and household perception of their overall well-being.

baseline and the endline, while the proportion of households reporting negative perceptions of their well-being decreased.

Figure 7: Percentage of households rating their household’s ability to withstand a crisis or shock, such as flooding, drought, locusts, hailstorms in the month prior to data collection.



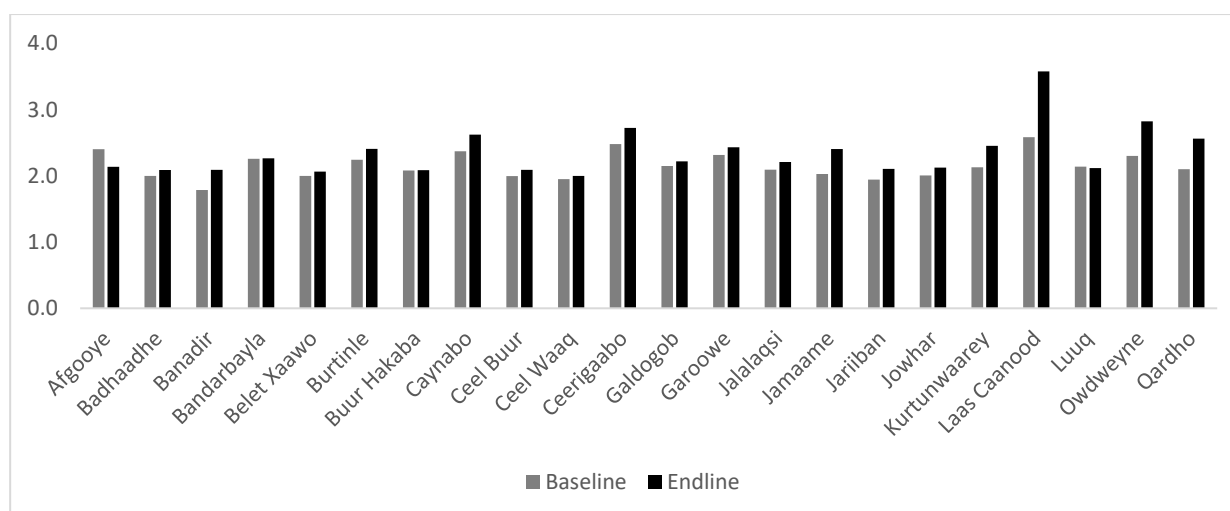
Core Food Security Indicators ³¹

Meals Consumed in the 24 Hours Prior to Data Collection

At the endline, after the three months of UCT, the average number of meals consumed by households in the 24 hours prior to data collection was 2.4, marking a slight increase from the average of 2.1 meals consumed at the baseline. The district disaggregation for the results is presented in figure 8 below.

The average number of meals consumed increased in all districts and the largest increases were seen in Banadir, Jamaame, Kurtunwaarey, Laas Caanood and Qardho districts.

Figure 8: Proportion of households by reported # of meals consumed in the 24 hours prior to data collection.



³¹ 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.

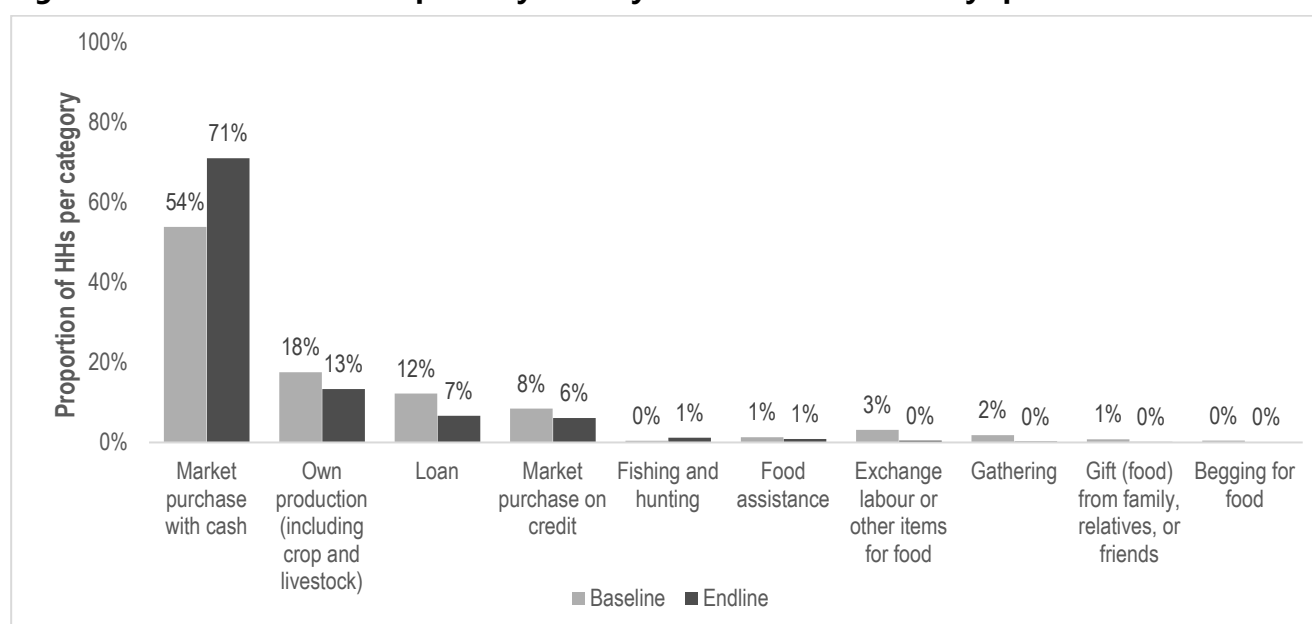
Table 5: Proportion of households by reported # of meals consumed in the 24 hours prior to data collection.

# of Meals Eaten in the 24 hours prior to data collection	% of households Baseline	% of households Endline
0	0%	0%
1	5%	1%
2	74%	66%
3	20%	31%
>3	0%	1%

Categorisation of households by the number of meals eaten in the 24 hours prior to data collection allows for further analysis. **The proportion of households reporting consumption of fewer than two meals slightly decreased from 5% at the baseline to 1% during the endline, while the proportion of households reporting consumption of three or more meals increased from 20% to 32%.**

Main Household Food Sources

To provide context to 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.

Figure 9: Main food source reportedly used by households in the 7 days prior to data collection.

Market purchases made with cash³² represented the main food source reported by households during all assessments. The proportion of households reporting market purchases with cash to be their main food source increased from 54% at the baseline to 71% at the endline, indicating that

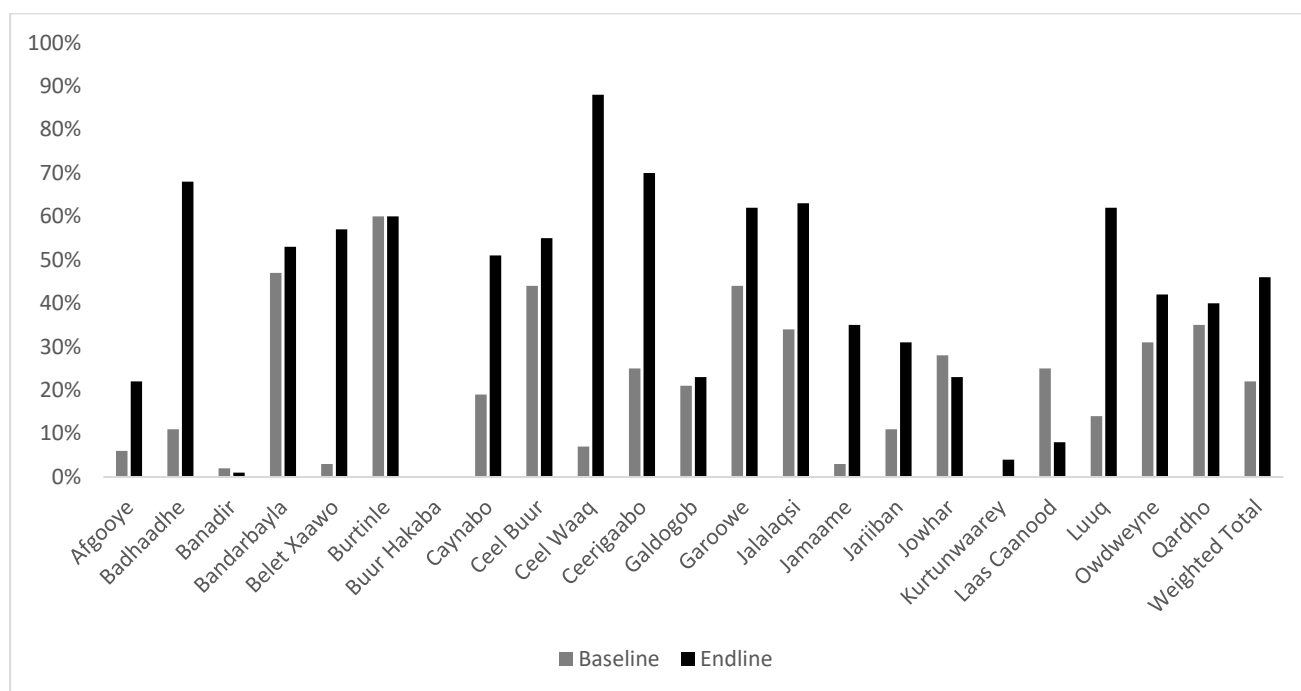
³² Also including purchases made through mobile money applications.

households’ purchasing power increased, in turn decreasing their reliance on less sustainable or more insecure sources. Indeed, while loans and market credit³³ also represented an important main food source for many households at the endline assessment, findings suggest that households’ reliance on loans as their main food decreased considerably between the baseline (reported by 12% of households) and the endline (7%). However, the proportion of HHs relying on their own production had decreased from 18% at the baseline to 13% during the endline. This is likely due to the drought which reportedly led to crop and livestock losses. HH's vulnerability status is likely to scale up due to the end of cash transfers. The 3 cycles of cash transfer enabled HHs to purchase different commodities from the market. With over-reliance on markets as the main source of food, these HHs are likely to face challenges as they may not have enough money to cover their basic needs post the programme period.

The Economic Capacity to Meet Essential Needs (ECMEN)^{34,35}

During the endline assessment, the September minimum expenditure basket (MEB)³⁶ cost was used to calculate the ECMEN value. The proportion of households whose spendings were equal to or above the MEB increased considerably from 22% at the baseline to 46% during the endline. However, it is worth noting that all HHs in Buur Hakaba were found to have spent below the MEB costs. ECMEN values decreased in Banadir, Jowhar and Laas Caanood districts, as shown by the corresponding data in figure 10. On the other hand, positive improvements were found to be in Belet Xaawo, Caynabo, Ceel Waaq, Ceerigaabo, Jalalaqsi, Jamaame and Luuq districts.

Figure 10: Proportion of households whose spendings were equal to or above the MEB cost per assessed district.



³³ The categories of 'market purchases made on credit' and 'loans' seem similar but have been used to mean different things for the purpose of this assessment. While market purchases made on credit refer specifically to credits provided by market vendors, loans can be provided by different sources including friends or family, community members, or lending institutions.

³⁴ [World Food Programme \(WFP\) essential Needs Assessment \(December 2020\)](#)

³⁵ 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.

³⁶ [Somalia cash and markets quarterly dashboard \(July-September 2022\)](#).

Reduced Coping Strategies Index (rCSI)^{37,38}

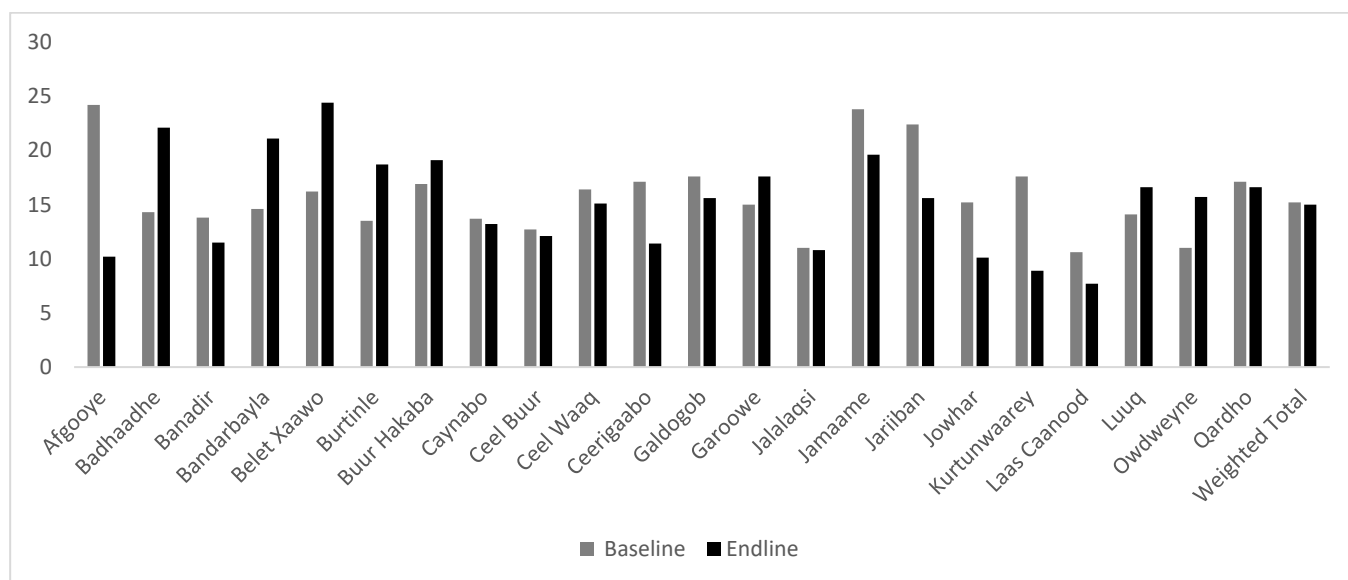
The rCSI measures the frequency at which households have relied on certain negative coping strategies (related to food consumption in the household) within the 7 days prior to data collection to cope with food insecurity.³⁹

As seen in figure 11, Afgooye, Ceerigaabo, Galdogob, Jaamame, Jariiban, Kurtunwaarey and Qardho recorded the highest levels of average rCSI during the baseline. A considerable improvement in average rCSI was found in Afgooye, Ceerigaabo, and Kurtunwaarey at the time of endline assessment. Although there appears to be an overall decrease in the negative coping strategies measured by the rCSI between the baseline and the endline, the average endline rCSI score of 15.0 still indicates relatively frequent use of severe coping strategies.

The rCSI includes the following coping strategies:⁴⁰

- Relied on less preferred, less expensive food (1);
- Borrowed food or relied on help from friends or relatives (2);
- Reduced the number of meals eaten per day (1).
- Reduced portion size of meals (1);
- Restrict consumption by adults in order for young children to eat (3).

Figure 11: Average rCSI score, based on reported coping strategies used over the 7 days prior to data collection by district.⁴¹



³⁷ The coping strategy index (CSI) is an indicator of a household's current food security status and a good predictor of vulnerability to future food insecurity. It measures the frequency and severity of changes in food consumption behaviours in the seven days prior to data collection when households are faced with a shortage of food. A high CSI value suggests that a household has been engaging in erosive, negative behaviours to meet food needs in the past seven days and is indicative of experienced food insecurity.

³⁸ 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.

³⁹ Calculated according to the standards of the CWG M&E Workstream Recommended Indicators document.

⁴⁰ The strategies are weighted, with the highest weight given to the most "severe" categories. The categories range between 1 and 3. The weighted frequency scores are summed up into one final score (rCSI) with a minimum value of 0 and a maximum value of 56.

⁴¹ 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.

The three consumption-based coping strategies reportedly employed in the 7 days prior to data collection by the greatest proportion of households are listed in the table below:

Table 6: Consumption-based coping strategies.

Baseline	Endline
Relied on less preferred, less expensive food – 2.7/7 days	Relied on less preferred, less expensive food – 2.8/7 days
Borrowed food or relied on help from friends or relatives – 2.0/7 days	Borrowed food or relied on help from friends or relatives – 2.3/7 days
Reduced the number of meals eaten per day – 2.1/7 days	Reduced portion size of meals – 1.8/7 days

Across the baseline and endline assessments, the most reported consumption-based coping strategy was relying on less preferred and less expensive food.

Livelihood Coping Strategies Index (LCSI) ⁴²

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 the purposes of this assessment, and in line with the Somali context, livelihood zones are categorised as either urban, agro-pastoral (including riverine populations), or pastoral. Coping strategies are context-sensitive and thus specific to each livelihood zone, with some overlap.⁴³

Table 7: Proportion of households per LCSI severity category, based on strategies reportedly used over the 30 days prior to data collection at the baseline and endline.

	Baseline	Endline
None	10%	17%
Stress	34%	37%
Crisis	27%	25%
Emergency	29%	21%

Table 7 shows the prevalence of each LCSI severity category. The proportion of households who reported having employed none of the livelihood-related coping strategies in the 30 days prior to data

⁴² 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.

⁴³ [World Food Programme \(January 2009\). Emergency food security assessment handbook.](#)

collection increased from 10% of households at the baseline to 17% at the endline. In addition, the proportion of households in the "emergency" category decreased from 29% at the baseline to 21% at the endline. Despite these positive changes observed in the analysis, the continued use of crisis and emergency coping strategies among most interviewed households after the receipt of the UCT might reflect the impact of the continuing drought on interviewed households.^{15,44} Extreme drought has been experienced in the north leading to large movements of drought-displaced people to sites of internally displaced people (IDPs) in the Dayniile and Kahda districts of Banadir. Bay and Lower Juba regions have seen the most new arrivals followed by Gedo and Banadir. These districts have been experiencing water scarcity and most rain-fed crops have failed. The rains have been erratic and unevenly distributed thus affecting the planting season in the agro-pastoral districts.⁴⁵

At the time of the baseline assessment, the three most commonly reported livelihood coping strategies were (with % of HHs reporting having used these strategies shown in brackets):

1. Purchased food on credit or borrowed food (78%);
2. Borrowed money to buy food (52%);
3. Decreased expenditure on fodder (45%).

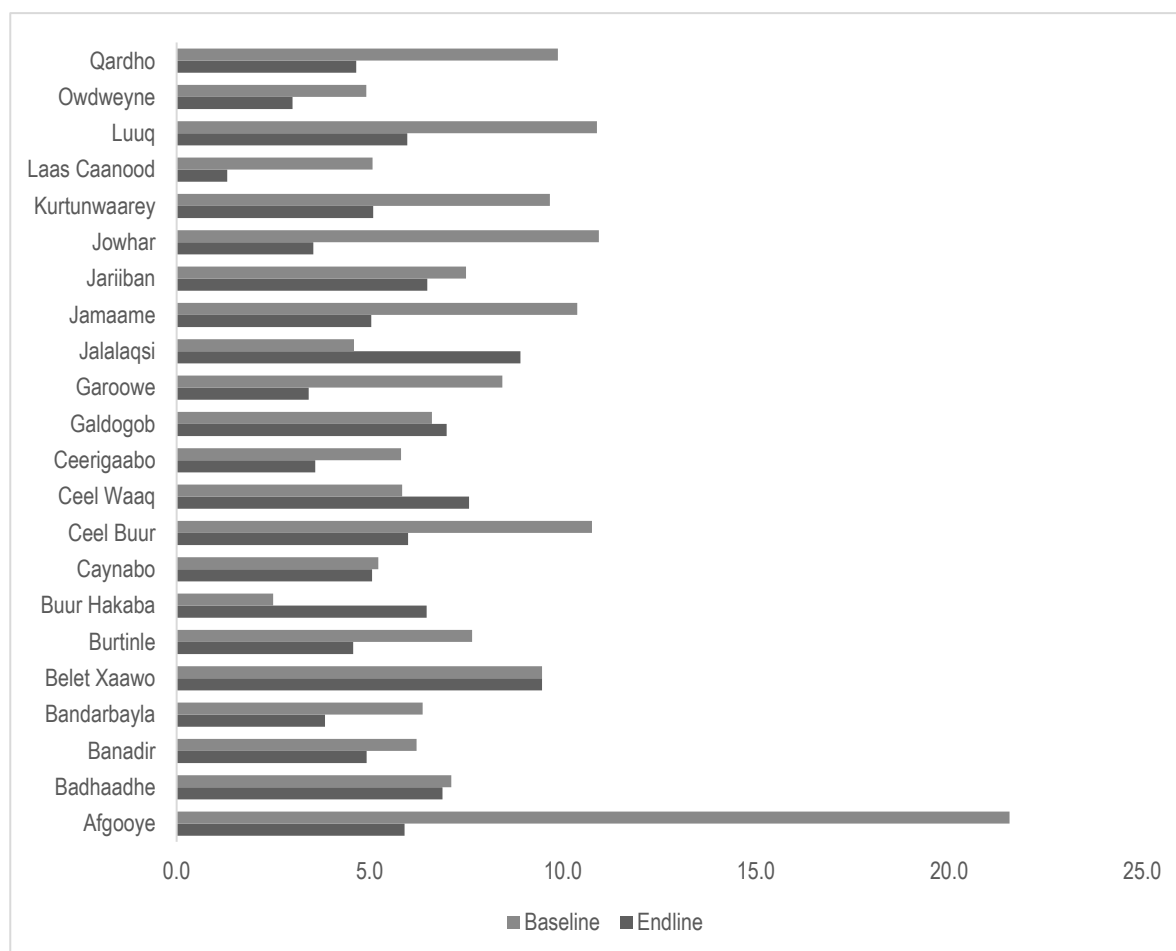
At the endline assessment, the three most commonly reported livelihood coping strategies were:

1. Purchased food on credit or borrowed food (73%);
2. Spending savings (38%);
3. Decreased expenditure on fodder (34%).

It should also be noted that the use of livelihood-based coping strategies reported by households varied greatly by district (see Figure 12 below). The LCSi is an indicator used to understand the medium and longer-term coping capacity of households in response to the lack of food or lack of money to buy food and their ability to overcome challenges in the future. The LCSi also extends to other basic needs other than food. **A majority of the households (83%) reported having engaged in emergency, crisis or stress level coping strategies** in the 30 days prior to data collection. However, the average LCSi decreased from 7.8 at the baseline to 5.4 during the endline. Households in Buur Hakaba Belet Xaawo, Jalalaqsi, Kurtunwaarey, Badhaadhe and Jariiban districts were found to engage in high emergency-level coping strategies. A considerable improvement in emergency-level coping were found in Afgoye, Bandarbayla, Burtinle, Ceerigaabo, Garoowe, Laas Caanood and Qardho districts. These households are likely to have eroded their overall resilience, hence increasing the likelihood of exhausting their limited resources to afford basic needs. Food access (86%) and healthcare (54%) were the top cited reasons for engaging in these coping strategies during the endline.

⁴⁴ ibid

⁴⁵ [Food and Agriculture Organization \(October, 2022\). Somalia Drought Update.](#)

Figure 12: Average LCSI score of beneficiary households, by district.

Food Consumption Score (FCS)

The FCS is a composite score based on the dietary diversity, 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, based on reported food consumed in the 7 days prior to data collection.

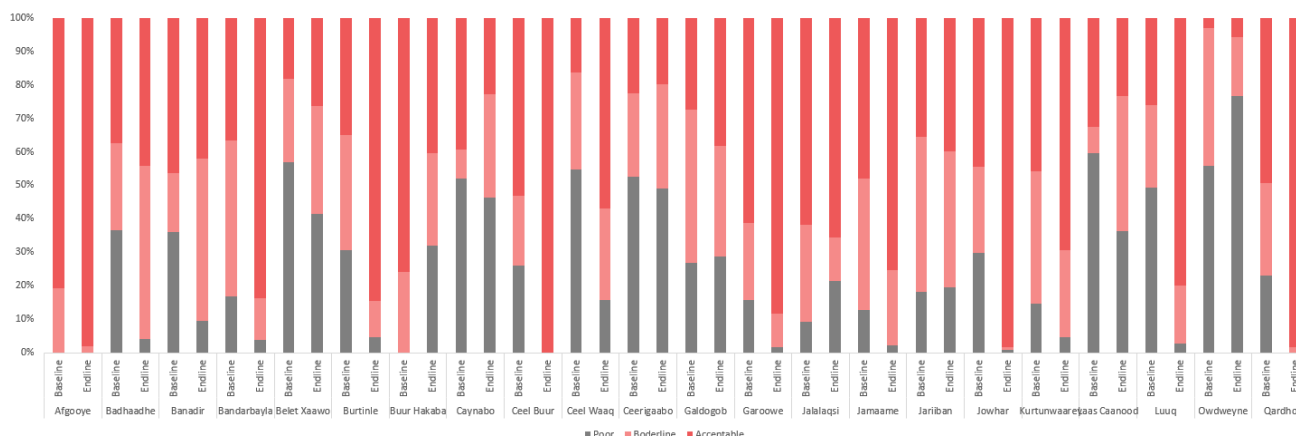
	Baseline	Endline
Poor	37%	18%
Borderline	28%	24%
Acceptable	35%	58%

The proportion of households with a poor FCS decreased from 37% at the baseline to 18% at the endline. In addition, the average FCS increased from 38.5 at the baseline to 49.0 during the endline assessment. However, despite overall decrease in the number of households with poor and borderline scores in Buur Hakaba, Belet Xaawo, Caynabo, Ceerigabo, Laas Caanood and Owdweyne districts, the

proportion of households with a poor FCS remained comparatively high (30% and above). This suggests that despite the receipt of UCT, households from these districts in particular were still relatively commonly experiencing food gaps.

The proportion of households with an acceptable FCS increased between the baseline and the endline for most of the districts except; Buur Hakaba, Caynabo, Ceerigaabo and Laas Caanood.

Figure 13: Proportion of households in each FCS classification



Household Dietary Diversity Score

The HDDS is used to gain a more comprehensive understanding of household food security by considering the diversity of the food consumed per household in the 7 days prior to data collection. While households may be satisfying their caloric needs by consuming considerable amounts of dense staple foods, including wheat or rice, their diets may nevertheless be lacking in more nutritiously diverse foods. Hence, by scoring households based on the number of diverse food groups consumed, the HDDS attempts to capture the overall quality of food consumption more so than the quantity of foods consumed.

At the baseline, the average HDDS of SCC beneficiary households was 4.6, placing the overall HDDS in the medium dietary diversity threshold. Since the baseline, findings suggest that dietary diversity increased among beneficiary households, with an average HDDS of 6.5 at the endline.

Households in Buur Hakaba, Ceel Waaq, Jamaame, Kurtunwaarey were found to have recorded a decrease in the average HDDS during the endline assessment.

Table 9: Average HDDS by district.⁴⁶

District	Average HDDS Baseline	Average HDDS Endline
Afgooye	6.4	8.0
Badhaadhe	4.8	7.2

⁴⁶ The average HDDS is classified as: ≤4 “low”, ≥5 ≤ 6 “medium” and >6 “high”.

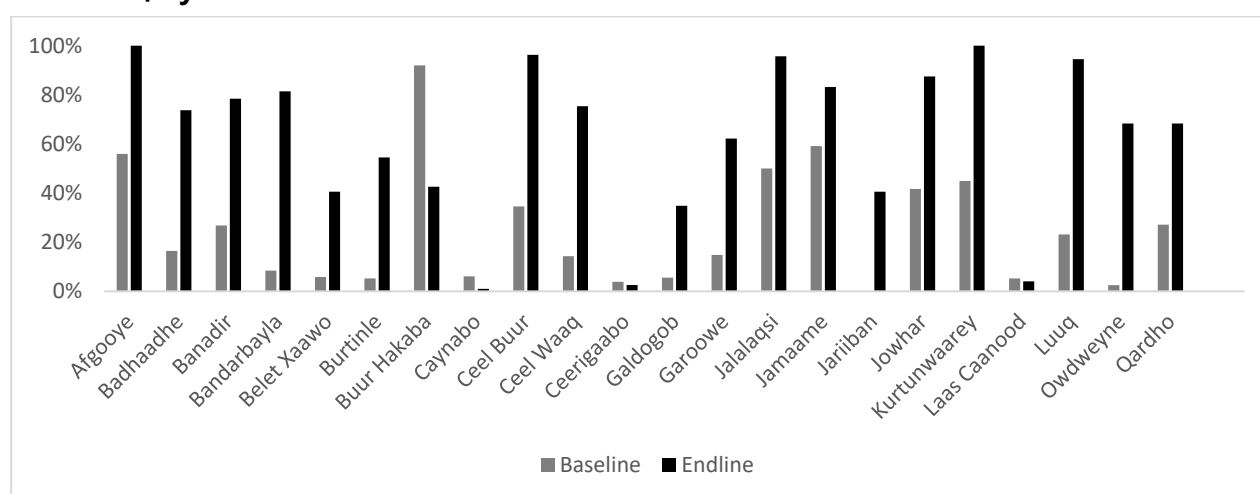
Banadir	5.3	7.3
Bandarbayla	4.4	5.8
Belet Xaawo	4.4	6.4
Burtinle	4.2	6.5
Buur Hakaba	6.9	4.3
Caynabo	3.3	7.7
Ceel Buur	5.0	7.2
Ceel Waaq	5.0	4.5
Ceerigaabo	3.6	6.2
Galdogob	4.6	6.7
Garoowe	4.4	7.8
Jalalaqsi	5.7	7.4
Jamaame	6.3	6.2
Jariiban	4.7	7.5
Jowhar	4.7	8.0
Kurtunwaarey	6.0	4.5
Laas Caanood	3.3	7.8
Luuq	5.4	7.2
Owdweyne	3.3	4.0
Qardho	4.4	6.9
Weighted Average	4.6	6.5

Table 10: Proportion of households per HDDS category.

	Baseline	Endline
Low	49%	15%
Medium	33%	26%
High	18%	59%

Positive improvements were seen in the proportion of households with high dietary diversity between the baseline and the endline. **The proportion of households with a low HDDS considerably decreased from 49% at the baseline to 15% at the endline and the proportion of households with a high HDDS increased from 18% to 59% during the same period**, indicative of an improved but still relatively low access to different food groups among beneficiary households, after the third cycle of cash transfer.

Figure 14: Proportion of households with high HDDS category in the 7 days prior to data collection, by district.



When looking at the proportion of households per HDDS category by district (see Figure 14 above) it becomes apparent that there are district differences. Consistent with changes in the FCS, LCSi and rCSI scores, the HDDS in all districts improved from the baseline to the endline, with the proportion of households with a high HDDS consistently increasing at the endline in all the districts. The magnitude of positive change in a high HDDS was particular in Afgooye (where it increased from 56% at the baseline to 100% at the endline), Badhaadhe (where it increased from 16% at the baseline to 74% at the endline), Ceel Buur (where it increased from 35% at the baseline to 96% at the endline) and Banadir district (where it increased from 27% at the baseline to 78% at the endline). Findings suggest that, while dietary diversity has generally improved, it remained considerably low in the districts of Buur Hakaba, Caynabo, Ceerigaabo and Laas Caanood.

Household Expenditure Breakdown

Findings suggest that the most significant category of household spending was food, which may be indicative of the precarious financial situation of the SCC UCT beneficiary households. Despite a decrease in the proportion of household expenditure on food items following the reception of UCT, food purchases still accounted for nearly half (48%) of all monthly household expenditure at the endline. At the time of the baseline, average household spending on food was reportedly higher, accounting for 56% of all household expenditures. However, the spending proportion on food slightly decreased to 48% during the endline. During the endline, clothing and rent formed part of the top-four reported expenditure categories. This is likely due to the celebrations of 12th Rabi al-Awwal (October 8, 2022) which fell in the data collection period.⁴⁷ Expenditure on rent might have increased since nearly half (49%) of the assessed households were found to be in the urban livelihood zone. At the same time, the average reported monthly household income increased from USD 111.0 at the baseline to USD 147.8 at the endline.⁴⁸

⁴⁷ Islamic Hijri calendar.

⁴⁸ The average monthly income included all sources of income, including cash received from aid organisations, agriculture, livestock, private business, casual labour, petty trade, wage labour, loans, gifts, remittances etc..

Table 11: Change in average amount spent by households on categories of items in the 30 days prior to data collection.⁴⁹

Expenditure Category	Baseline Average (USD)	Endline Average (USD)	Expenditure Change (USD): Baseline to Endline
Food	54.7	67.8	13.1
Debt repayment for food	19.0	21.4	2.3
Debt repayment for non-food items	13.4	14.6	1.2
Clothing	20.8	23.4	2.6
Medical services	17.8	19.9	2.1
Water, sanitation, and hygiene (WASH)	13.9	13.6	-0.3
Education	16.1	17.3	1.2
Fuel	11.8	10.2	-1.7
Shelter and rent	35.7	32.0	-3.7
Khat	12.0	11.4	-0.6
Other	12.2	17.4	5.3

As the cash provided was unrestricted, households were free to decide for themselves how best to spend it. To understand the impact of UCT on non-food-related decision-making, it is important to consider not only the change in the proportion of expenditure spent on a particular expense category but also the change in the amount. **Looking at the change in spending amounts presented in Table 11 reveals that, although the overall proportion of household expenditure on food may have decreased over time, the actual amount spent on food in the past 30 days increased.** This increase in expenditure on food is aligned with the overall improvements seen following the reception of UCT in household-level food security indicators, such as the FCS, HDDS, and rCSI, and suggests that households were generally able to afford more and/or better-quality food. The expenditure categories that saw the biggest change in the amount spent between the baseline and the endline were food and debt repayment, education, medical services and clothing.

Savings and Debts

The average amount of savings slightly increased after the three rounds of cash distributions. During the endline, only 3% of the interviewed households reportedly had some savings averaging to 43.0 USD a slight improvement from the baseline where 4% of the households were found to have savings averaging to 26.6 USD. The proportion of households with debts during this period slightly decreased from 87% at the baseline to 83% at the endline. Moreover, households' average debt amounts seem to have slightly decreased from USD 138.7 at the baseline to USD 97.7 during the endline assessment.

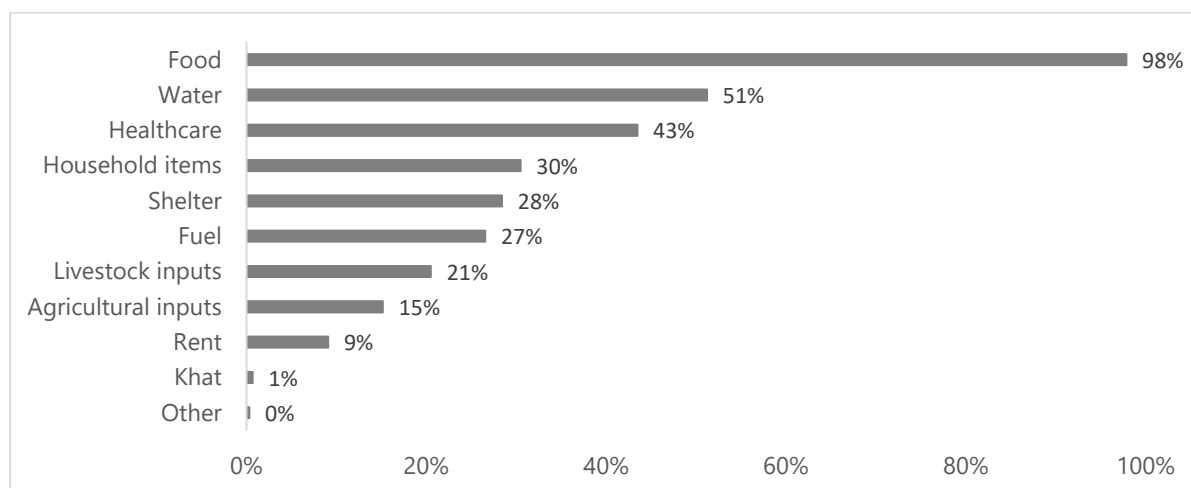
⁴⁹ Please note that for clarity in visualisation, 'other' in Figure 15 and Table 15 differ. In Figure 13, 'other' also includes the following categories: agricultural inputs, business inputs, livelihood inputs, electricity, hygiene items, savings, sharing/loans, social expenses – all of which represented less than 2.0% of total household expenditure. In Table 11, "other" includes unspecified expenses and money spent on khat.

Households' top reported reasons for taking debts at the time of data collection were: To acquire clothes, access healthcare services, improve livelihoods and to pay rent.

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, particularly debt taken on for food purchases.

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.^{50, 51} Overall, at endline, 22% of households reported perceiving that their household had been overcharged by vendors due to their beneficiary status, and 14% reported perceiving vendors more generally had increased their prices since the start of the transfers. During the endline, assessed households reported that vendors increased the prices of commodities, either for the entire community or specifically overcharging beneficiary households. Households who answered positively to either question were asked which goods they felt had increased in price. Their responses are provided in Figure 15 below.

Figure 15: Items for which vendors reportedly increased prices since the transfers started, by % of households who reported perceiving vendors had increased their prices. (n=548 at the endline).⁵²



Of the households that reported at the endline that they had been overcharged by vendors due to the beneficiary status and/or that vendors had increased their prices since the start of the transfers, nearly all (98%) reported an increase in the price of food. Additional market analysis and price monitoring would be needed to observe any conclusive changes in price inflation in the locations included in the SCC programming as commodity prices have been rising following the worsening drought conditions, as well as the impacts of the Ukraine war, thus preventing sustained economic growth.⁵³

⁵⁰ 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?

⁵¹ 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 UCT programme on their community.

⁵² 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 comments, hence percentages may exceed 100.0%.

⁵³ Somalia Economic Monitor. [Source World Bank website.](#)

Protection Index Score

The Protection Index Score⁵⁴ serves as a proxy indicator for the “% of beneficiaries (disaggregated by sex, age, and livelihood zone) reporting that humanitarian assistance is delivered in a safe, accessible, accountable, and participatory manner”.⁵⁵ The percentage of households responding positively to the relevant questions included in this score was 79% at the baseline and at 82% at the endline assessment (while the target for this score stands at 79%).

During the endline, when the respondents were asked if they felt safe going through the programme’s selection process, registration, and surveys, **all assessed households reported believing that beneficiary selection was fair**. Similarly, nearly all (98%) assessed households reported not having paid, or knowing someone who paid, 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. Nearly all (98%) 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.

During the endline, 29% (a 14%-point increase from the baseline) of the HHs reported that they were aware of options to contact the NGOs to register complaints or problems on receiving assistance. Of these, more than two-thirds (71%) of the HHs reported that they were aware of the existence of a dedicated NGO hotline while another 29% reported that they knew they could directly talk to NGO staff during field visits or at their offices. In addition to being aware of option to contact the NGO, some (15%) of the assessed households reported having raised concerns about the assistance received to the NGO using any of the complaint response mechanisms available. Of the 15% who raised concerns, most (82%) of the households reported being satisfied with the response they received. All assessed households reported feeling safe going through the selection & registration processes of the programme.

When asked whether the cash received from SCC helped the beneficiary households meet their basic needs, **almost all (98%) households reported being able to meet some of their basic needs with the assistance provided**. While the proportion of households who reported having used the CRM to voice concerns appears low, findings suggest that most households had not felt a need to use the CRM in the first place (see Table 12).

Table 12: Most commonly reported reasons for not using CRM by % of households who reported not using CRM. (n=3,448 at the baseline and n=3,350 at the endline, respectively)

	Baseline (n=3,448)	Endline (n=3,350)
Fear of Negative Consequences	1%	1%
Lack of CRM knowledge	43%	32%
No concerns	56%	67%

⁵⁴ The Protection Index Score is calculated according to the DG ECHO Protection Mainstreaming Guidance document provided by the Somali Cash Consortium.

⁵⁵ This score measures the % of beneficiary households giving a positive answer 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 13: Aggregated Protection Index Score by district.⁵⁶

District	Baseline Score	Endline Score
Afgooye	61%	54%
Badhaadhe	75%	82%
Banadir	68%	79%
Bandarbayla	57%	57%
Belet Xaawo	86%	89%
Burtinle	61%	75%
Buur Hakaba	75%	68%
Caynabo	71%	71%
Ceel Buur	68%	75%
Ceel Waaq	68%	82%
Ceerigaabo	75%	75%
Galdogob	75%	86%
Garowee	79%	75%
Jalalaqsi	75%	64%
Jamaame	64%	89%
Jariiban	75%	86%
Jowhar	64%	71%
Kurtunwaarey	82%	57%
Laas Caanood	71%	79%
Luuq	61%	82%
Owdweyne	82%	71%
Qardho	68%	79%
Weighted Average	79%	82%

As can be seen in the table above, the baseline average is exactly on the target while the endline average is slightly above the target. At the baseline assessment, Belet Xaawo, Kurtunwaarey and Owdweyne districts were found to have a KPI score above the target. At the endline assessment, Afgooye, Buur Hakaba, Garowee, Jalalaqsi and Kurtunwaarey districts were found to have reported a decrease in the KPIs score compared to the baseline.

At the endline, households were given the opportunity to make comments or suggestions on how to improve the SCC programming. Two-thirds (**66%**) 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:

⁵⁶ The Protection Index Scores in the Table above are calculated by assigning a mark to each indicator based on the percentage of households answering positively. The highest possible score is 28, and the target threshold for households answering 'yes' across all indicators is 79% (equal to a score of 22.1 out of 28)

Table 14: Among those households who provided comments on how to improve SCC programming (n=1,059 at the baseline and n=1,497 at the endline) reported suggestions provided.⁵⁷

	Baseline (n=1,059)	Endline (n=1,497)
In-kind food aid	55%	52%
Shelter support	38%	47%
Education infrastructure	36%	43%
Livelihood support	26%	38%
Long term support	19%	34%
Medical infrastructure	35%	30%
WASH support	21%	27%
Increase field visits	26%	24%
In-kind NFI aid	12%	22%
Additional assistance	26%	20%
Drought relief	9%	9%
Flood relief	8%	6%
Soap distribution	1%	6%
Disability support	19%	4%

While **all households stated that cash was their preferred modality for receiving aid at the endline and 98% of households stated that cash had helped them to meet basic needs**, a considerable proportion of households reported additional recommendations (66% at the endline) to improve the programme. These households commonly suggested complementing the programming with medical infrastructure, increased field visits, in-kind aid, etc.

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. These findings could indicate that some households would indeed ideally substantiate their cash assistance with additional in-kind food aid, which could allow them to re-prioritise cash towards addressing their more medium-term needs.

Accountability⁵⁸

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'.

⁵⁷ 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%.

⁵⁸ The protection-related issues raised by the remaining households were sent to the cash implementing partners for follow-ups.

Overall, **at the baseline, about 50% of households were able to list at least one selection criterion, while 50% were unable to list any.** Beneficiary households were most aware of the following five selection criteria: ⁵⁹

- Lack of income (83%);
- Lack of assets (39%);
- Use of negative coping strategies (24%);
- Disability of a household member (21%);
- Risk of malnutrition (21%);
- Large size of household with many young children (17%).

Perception of Representation by Village Relief Council (VCR)

Regarding community representation, households were asked at the baseline to score their perception of how well the Village Relief Committee (VRC) advocated for them or represented their belief. Almost all (93%) households answered that they felt that the VRC represented their interests and advocated on their behalf either 'well' or 'very well', while 5% of households reported feeling that they are represented 'poorly' or 'very poorly' and the remainder (2%) preferred not to answer this question.

Difficulties with receiving/accessing UCT

Findings suggest that all beneficiary households were able to access UCT without experiencing any difficulties. When households were asked if they experienced any difficulties with receiving or accessing their most recent UCT payment, all respondents (100% at endline) answered "no".

Community Jealousy

To understand the impact of the programme on social dimensions in the communities, households were asked whether they thought that other members of their community were jealous of their household because they had received the cash transfer. Findings on reported community jealousy followed a similar trend as those on reported pressure to share UCT. Only a small proportion (2%) of households reported perceiving community jealousy because of the cash transfers by the endline.

The most commonly reported consequences households⁶⁰ experienced as a result of jealousy were insults (11%) and threats (5%).⁶¹

Non-monetary Pressure or Coercion

Similarly, when asked at the baseline if they, or anyone in their community, experienced pressure, or coercion to exchange non-monetary favours in order to be registered as a beneficiary, 99% of households answered 'no' and 1% of households "preferred not to say".

Other Negative Consequences

⁵⁹ 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 baseline.

⁶⁰ As reported by the 2% who reported experiencing jealousy at the endline.

⁶¹ This was a multiple-choice question for which households were able to select all applicable answers, hence percentages may not add up to 100%.

When asked at the baseline if they experienced any other negative consequences because of their beneficiary status, 99% of households answered 'no' and 1% answered 'prefer not to say'. During the endline PDM, 99% answered 'no' and 1% answered 'prefer not to say'. No household answered "yes" to this question, and some chose not to answer.

Annex 1 - key indicators summary per assessed district.

Districts	Food Security indicators																			
	Food Consumption Score (FCS)						Households Dietary Diversity Score (HDDS)						Livelihood Coping Strategy (LCS)							
	Acceptable		Borderline		Poor		High		Medium		Low		None		Stress		Crisis		Emergency	
	Baseline	Endline	Baseline	Endline	Baseline	Endline	Baseline	Endline	Baseline	Endline	Baseline	Endline	Baseline	Endline	Baseline	Endline	Baseline	Endline	Baseline	Endline
Banadir	46%	42%	18%	48%	36%	10%	27%	78%	27%	20%	46%	1%	12%	22%	41%	38%	10%	13%	37%	27%
Bandarbayla	37%	84%	46%	12%	17%	4%	8%	81%	35%	16%	56%	3%	15%	26%	32%	43%	17%	20%	26%	10%
Qardho	49%	98%	28%	2%	23%	0%	27%	68%	18%	30%	55%	1%	11%	20%	24%	40%	36%	34%	33%	6%
Buur Hakaba	76%	40%	24%	28%	0%	32%	92%	43%	8%	53%	0%	4%	32%	9%	26%	45%	0%	9%	42%	38%
Ceel Buur	53%	100%	21%	0%	26%	0%	34%	96%	30%	4%	36%	0%	4%	0%	47%	52%	5%	19%	45%	28%
Belet Xaawo	18%	26%	25%	32%	57%	42%	6%	41%	30%	25%	64%	34%	12%	1%	12%	17%	34%	34%	42%	48%
Luuq	26%	80%	25%	17%	49%	3%	23%	94%	51%	6%	26%	0%	7%	16%	7%	21%	50%	39%	36%	24%
Ceel Waaq	16%	57%	29%	27%	55%	16%	14%	75%	44%	23%	42%	1%	5%	7%	32%	13%	34%	50%	29%	30%
Jalalaqsi	62%	66%	29%	13%	9%	21%	50%	96%	25%	4%	25%	0%	27%	7%	39%	36%	16%	8%	18%	48%
Badhaadhe	37%	44%	26%	52%	37%	4%	16%	74%	51%	25%	33%	1%	4%	13%	34%	21%	33%	23%	29%	44%
Jowhar	44%	98%	26%	1%	30%	1%	18%	88%	33%	11%	49%	1%	12%	30%	35%	45%	16%	9%	38%	16%
Galdogob	27%	27%	38%	33%	27%	29%	6%	35%	50%	59%	44%	6%	3%	19%	34%	24%	38%	36%	26%	21%
Jariiban	36%	40%	46%	41%	18%	19%	0%	41%	61%	55%	39%	4%	1%	4%	39%	35%	46%	40%	14%	22%
Burtinle	35%	84%	34%	11%	31%	5%	5%	54%	37%	39%	57%	7%	17%	19%	32%	40%	19%	36%	32%	5%
Garoowe	61%	88%	23%	10%	16%	2%	15%	62%	35%	36%	51%	2%	10%	33%	36%	40%	26%	23%	29%	4%
Ceerigaabo	23%	20%	25%	31%	52%	49%	4%	3%	26%	46%	69%	51%	15%	14%	45%	65%	23%	15%	18%	6%
Caynabo	39%	23%	9%	31%	52%	46%	6%	1%	5%	41%	89%	58%	11%	2%	53%	67%	27%	19%	9%	12%
Laas Caanood	32%	23%	8%	40%	60%	36%	5%	4%	21%	37%	73%	59%	19%	47%	44%	48%	24%	4%	13%	1%
Owdweyne	3%	6%	41%	18%	56%	76%	2%	3%	5%	22%	93%	75%	4%	8%	69%	62%	16%	9%	11%	21%
Jamaame	48%	75%	39%	23%	13%	2%	59%	83%	37%	11%	4%	6%	0%	6%	30%	49%	29%	30%	41%	15%
Afgooye	81%	98%	19%	2%	0%	0%	56%	100%	43%	0%	1%	0%	1%	18%	0%	11%	2%	58%	97%	13%
Kurtunwaarey	46%	69%	39%	26%	15%	5%	45%	100%	41%	0%	14%	0%	0%	48%	15%	6%	46%	8%	39%	37%

Overall, improvements were seen across most of the core indicators used to measure the household level of food security between the baseline and endline assessment as shown in **Annex 1** above. The proportion of SCC beneficiary households with an acceptable FCS increased, while the proportion of households with a poor or borderline FCS decreased. The increase in acceptable FCS was high in Bandarbayla, Qardho, Ceel Buur, Luuq, Ceel Waaq, Jowhar, Burtinle, Garoowe, Jamaame and Afgooye districts. The improvement in FCS is further reflected in the proportion of households with a high HDDS, an indication that households were consuming a more diverse diet at the end of the programme compared to prior to the cash assistance. The improvement in FCS and HDDS at the endline assessment is likely due to the beneficiary HHs having received cash to supplement their income and help them in purchasing a variety of food. During the endline, the use of livelihood-based coping strategies reported by households varied greatly by district. Despite the improvements in FCS and HDDS, HHs in Belet

Xaawo, Jalalaqsi, Badhaadhe and Jariiban districts were found to engage in high emergency-level coping strategies. These HHs are likely to have eroded their overall resilience, hence increasing the likelihood of exhausting their limited resources to afford basic needs.

Annex 2: Completed Consolidated Approach to reporting Indicators of Food Security (CARI) Console*.

CARI analyzes primary data from a single household survey and classifies individual households according to their level of food security. The approach culminates in a food security console which supports the reporting and combining of food security indicators in a systematic and transparent way, using information collected in a typical food security assessment. Central to the approach is an explicit classification of households into four descriptive groups: Food Secure, Marginally Food Secure, Moderately Food Insecure, and Severely Food Insecure. The classification provides a representative estimate of food security within the target population whether it is calculated at the national, district, region or livelihood zone level.

Domain	Indicator	Food Secure		Marginally Food Secure		Moderately Food Insecure		Severely Food Insecure		
		(1)	(2)	(3)	(4)					
		Baseline	Endline	Baseline	Endline	Baseline	Endline	Baseline	Endline	
Current Status	Food Consumption	Food Consumption Group and rCSI	Acceptable 5.6%	Acceptable 10.5%	Acceptable and rCSI >=4 32.1%	Acceptable and rCSI >=4 46.5%	Borderline 27.6%	Borderline 23.4%	Poor 34.7%	Poor 19.7%
Coping Capacity	Economic Vulnerability	Economic Capacity to Meet Essential Needs (ECMEN)	28.4%	24.3%			70.3%	35.4%	1.4%	40.3%
	Asset Depletion	Livelihood Coping Strategies	None 9.9%	None 16.3%	Stress 33.7%	Stress 36.9%	Crisis 26.4%	Crisis 25.2%	Emergency 30.3%	Emergency 21.6%
CARI Food Security Index			2.9%	2.3%	35.8%	34.2%	46.4%	49.7%	14.9%	13.9%

*HHs are classified as food secure if they are able to meet essential food and non-food needs without depletion of assets or marginally food secure if they have a minimally adequate food consumption, but unable to afford some essential non-food expenditures without depletion of assets or moderately food insecure if they have food consumption gaps, or, marginally able to meet minimum food needs only with accelerated depletion of livelihood assets and severely food insecure if they have huge food consumption gaps, or extreme loss of livelihood assets that will lead to large food consumption gaps. More information can be obtained [here](#).

Annex 3: Coping strategies included in the LCSl.

Stress category	Crisis category	Emergency category
Sold household assets/goods (radio, furniture, refrigerator, television, jewelry, clothes etc.) [all livelihood zones]	Sold productive assets or means of transport (sewing machine, tools, wheelbarrow, bicycle, car, etc.) [urban and agro-pastoral]	Sold house or land [all livelihood zones]
Purchased food on credit or borrowed food [all livelihood zones]	Sold animals (productive and non-productive) but retained minimum stock [pastoral]	Begged [urban]
Spent savings/ Sold animals [urban]	Reduced health (including drugs) and education-related expenditures [urban]	Sold last female animal [agro-pastoral and pastoral]
Spent savings/ Sold more animals (non-productive) than usual [agro-pastoral and pastoral]	Consumed seed stocks that were to be held/saved for the next season [agro-pastoral]	Entire household has migrated to this area in the last 6 months or plans to migrate to the new area within the next 6 months to get help [urban]
Borrowed money [all livelihood zones]	Decreased expenditures on fodder, animal feed, veterinary care, etc. [pastoral]	Livelihood activities terminated. Entire household has migrated in the last 6 months or plans to migrate to the new area within the next 6 months [agro-pastoral and pastoral]