INTRODUCTION

The number of internally displaced people (IDPs) in Somalia has been increasing for the last several years. As of 2020, 2.6 million IDPs live in 2,000 sites across Somalia, the majority of whom were found to be in need of humanitarian assistance and protection.[1]

In May 2020, intense rains in Ethiopia and Somalia triggered flash flooding in several regions, especially along the Juba and Shabelle rivers. Beletweyne has been reported as the most affected district, with 85% of the town and 25 riverine villages inundated.[2] The flooding caused the displacement of about 240,000 people, according to the district flood taskforce.[3]

Along other major urban centres along the Shabelle and the Juba river basins like Baidoa and Mogadishu, Beletweyne concentrates a large number of IDP sites. However, floods such as the one in May 2020 are unfortunately not uncommon in the region, with hundreds of thousands displaced in Beletweyne in 2019 and 2018 from similar events.[4] In addition, the outbreak of COVID-19 and the subsequent measures are likely to negatively impact the access to livelihoods of already-vulnerable people, further aggravating their humanitarian needs.

Within this context, REACH conducted a market feasibility study in Beletweyne, in consultation with the Somalia Cash Working Group (CWG), aiming at understanding IDP household (HH) needs and preferences in relation to the host community (HC), as well as vendor capacity in the main markets in Beletweyne. Through assessing HHs' market needs and preferences and vendor expansion capacities, the assessment aims to support cash actors in Beletweyne to make evidence-based decisions related to the viability of cash and voucher assistance (CVA) and market based programming (MBP).

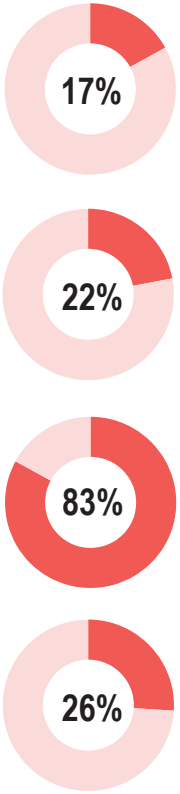
Household findings are based on surveys with **119 IDP HHs and 101 HC HHs**, representative at the Beletweyne level with a 95% confidence level and a 10% margin of error. Findings relating to a subset of this sample might have a lower confidence level and a wider margin of error. Market findings are based on **90 structured key informant interviews with market vendors**, and are indicative only. For a detailed overview of the methodology, please refer to page 3.

KEY FINDINGS

DEMAND

- While daily labor was reported as one of the HHs' main livelihood sources by most respondents, IDP HHs reported in-kind and voucher assistance more commonly than HC HHs. At the same time, HC HHs seem to rely more on farming and remittances. Cash assistance was reported by a similar percentage of IDP and HC HHs (Figure 10).
- Findings suggest that accruing debt was a common practice for both IDP and HC HHs. However, HC HHs seemed to have access to higher amounts of credit than IDP HHs (Figure 11). While 50% of IDP HHs reported believing that they will not be able to repay their debts, only 32% of HC HHs reported the same.
- All IDP HHs were asked which type of assistance presents their HH with the best value. Cash (42%) was the most commonly reported type, followed by voucher (27%). This could be due to the recurrent flooding and lowered capacity to source key items in local markets.

Figure 1: Key findings



17% of HC HHs reported relying on remittances, while only 8% of IDP HHs reported the same.

22% of vendors reported not having access to any sources of credit to conduct business.

83% of vendors reported facing transportation issues, one of the main reported reasons for not being able to increase their supplies.

Among IDP HHs preferring cash assistance (42%), 26% reported that the ability to save money for times of greater needs was among their main reasons for preferring cash.

While HC HHs seem to have access to higher amounts of credit with relatives, IDP HHs more commonly reported having access to FSPs.

- Among those who reported a preference for cash (n=99), among the main reasons reported were more freedom to purchase preferred items (57%), and ability to save money for times of greater need (26%). Among those who reported a preference for in-kind (n=32), the most commonly reported reasons were poor quality of items at markets (9 HHs) and inability to access market (7 HHs).
- IDP HHs have more commonly reported having access to financial service providers (FSP), than HC HHs. Among all HHs, the most commonly reported FSP was mobile money operators, respectively by 34% of IDP and 31% of HC HHs. Village savings and loan associations (VSLA) were mentioned by 12% of IDP and 7% of HC HHs.

SUPPLY

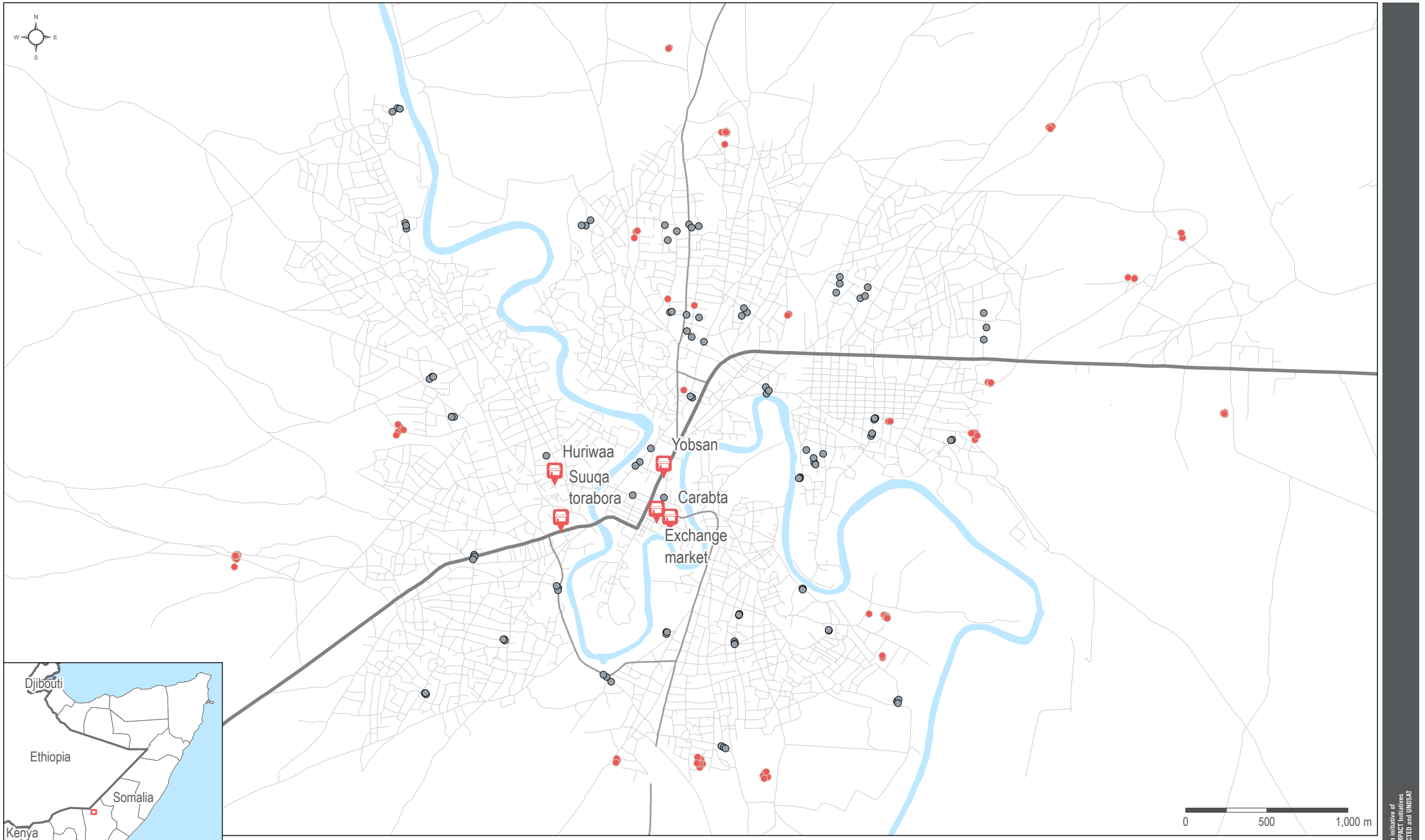
- While one fifth of vendors interviewed (22%) reported not having access to any sources of credit to conduct business, most reportedly rely on banks and relatives (Figure 18).
- The majority of vendors interviewed (73%) reported facing financial issues, such as low purchasing power (29% of all vendors) and banks offering limited loans (27%). However, an even higher percentage of vendors reported facing barriers related to transportation (83%).
- Transportation barriers such as poor quality of roads (reported by 38% of vendors interviewed), roads affected by floods (36%), theft (24%), and road closure (24%), are a significant factor limiting vendors' capacity to increase their stock (along financial barriers).

SOMALIA
CWG CASH WORKING GROUP

SOMALIA - Belet Weyne

Market Feasibility Study

For humanitarian purposes only
Production date : 24 AUG 2020



Assessed market
Household surveyed (Host)
Household surveyed (IDP)
River
Roads

Data sources:
Assessment data: REACH (2020)
Roads: OpenStreetmap Contributors

Coordinate System:GCS WGS 1984

Note: Data, designations and boundaries contained on this map are not warranted to be error-free and do not imply acceptance by the REACH partners, associates or donors mentioned on this map.

File: REACH_SOM_Map_BeletWeyne_STM_Market_assessment_24AUG2020_A4.pdf
Contact: somalia@reach-initiative.org

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METHODOLOGY

The study applied a quantitative methodology entailing primary data collection through household surveys and individual interviews with vendors. Data was collected by REACH enumerators between 11 and 17 August 2020. The surveys and majority of the interviews were conducted face-to-face, following the necessary precautions related to COVID-19.

For questions where respondents were able to choose more than one answer, the total of percentages for all options may exceed 100%. Figures reported in Somali shillings (SOS) have been converted to USD at an estimated market rate of 1 USD = 25,000 SOS.[5]

HOUSEHOLD SURVEYS

Household (HH) surveys targeted internally displaced person (IDP) HHs and host community (HC) HHs (see Map 1). IDP HHs were selected purposively, based on settlement and population data from both United Nations Office for the Coordination of Humanitarian Affairs (OCHA) and the Detailed Site Assessment[6] (DSA).

IDP HHs are defined by the HH status, exclusive to those residing in IDP settlements identified on the latest Detailed Sites Assessment in collaboration with CCCM. Limiting established IDP settlements excludes possible households that self-identify as IDPs whose living arrangements are similar to the host community. This choice is motivated by a shortage of detailed knowledge concerning IDPs living outside settlements.

Samples for both IDP and HC HHs were drawn randomly, and are representative with a 95% confidence level and a 10% margin of error at the urban area of Beletweyne. Findings relating to a subset of this sample might have a lower confidence level and a wider margin of error.

A total of 119 IDP HHs and 101 HC HHs were surveyed in this assessment. Surveys were answered by the head of household (HoHH), and in case of their absence, by someone else able to report on behalf of the household. The majority of the surveyed IDP HHs were women aged 18-59 (56%), followed by men within the same age range (18%) and women older than 60 (20%). Among HC HHs, the majority of respondents were women aged 18-59 (56%), followed by men within the same age range (19%), women older than 60 (15%), and men within the same age range (10%).

KEY INFORMANT INTERVIEWS

Key informant interviews targeted mostly retailers (90%) and wholesalers selling food items, hygiene items, and other non-food items that inform the Somalia Minimum Expenditure Basket (MEB). Given the protective measures to prevent the spread of COVID-19, enumerators spent only a few hours in the markets and findings should be considered indicative only.

A total of 90 vendors were purposively selected from six markets: Huriwaa, Exchange Market, Torabora, Yobsan, and Carabta (see Map 1). These markets were selected based on their location, size, and accessibility. Enumerators targeted medium to large accessible markets in key areas across the city.

HOUSEHOLDS

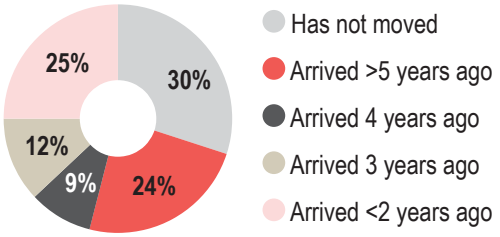
DISPLACEMENT PATTERNS

When asked about the date they arrived in the settlement where they currently live, a considerable percentage of IDP HHs (30%) reported having always lived in the same place. Compared to other locations previously assessed,[7] this percentage is relatively high. This is likely due to the fact that many IDP HHs in Beletweyne have settled in their current location decades ago, with some HH members having been born in Beletweyne into IDP families that have never moved out of the IDP settlements. It is unclear if the elevated number suggests a difficulty to relocate or lack of interest in relocating.

About 17% of IDP HHs reported having arrived in their current settlement two years prior to the time of data collection, 4% reported having arrived in the year prior to data collection, and another 4% reported having arrived in the six months prior to data collection (Figure 2).

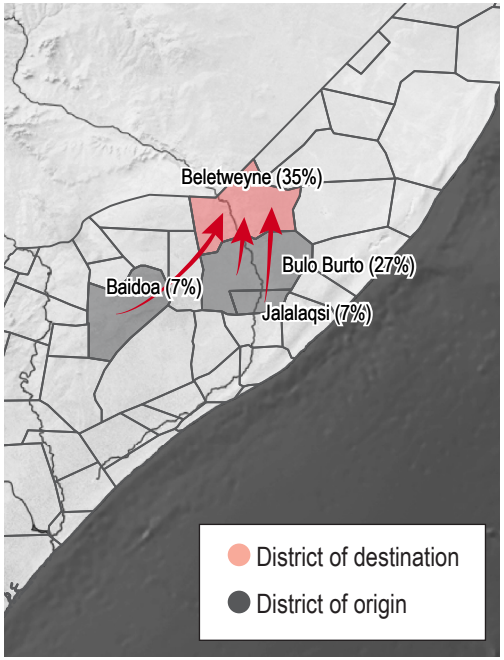
The most commonly reported regions of displacement origin were Hiraan (68%), Bay (8%), and Bakool (5%). In terms of districts, the largest proportions of IDP HHs reported having arrived from Beletweyne (35%), Bulo Burto (27%), Jalalaqsi (7%) and Baidoa (7%).

Figure 2: % of IDP HHs reporting having arrived in their current location at different time frames



The two most commonly reported push factors by IDP HHs were lack of food (73%) and lack of water (47%), followed by the drought (41%) and conflict (31%). These findings indicate the complex and possibly interconnected nature of push factors; drought related water shortages can lead to crop failures, which impacts HH livelihoods and food security. Conversely, the absence of conflict (66%), presence of food aid (54%), health services (51%), livelihood opportunities (49%), and educational services (41%) were the most commonly reported pull factors by IDP HHs.

Map 2: Most common districts of origin reported by IDP HHs



NEEDS

When asked to rank their top three unmet needs in the three months prior to data collection, more than two-thirds (71%) of the IDP HHs and more than half (57%) of the HC HHs reported food as one of their main unmet needs. Healthcare and education were also commonly mentioned by both IDP and HC HHs (Figure 3).

A relatively higher proportion of IDP HHs reported unmet needs in access to food and water, while fewer reported unmet needs in education, security, and nutrition, when compared with HC HHs (Figure 3).

ACCESS TO KEY ITEMS

Nearly two thirds of the HC HHs (65%) reported primarily using markets to access key food items and non-food items (NFIs), compared to 50% of the IDP HHs. Concurrently, about one third of the IDP HHs (30%) reported primarily relying on humanitarian aid, compared to 13% of the HC HHs. Subsistence farming or fishing was reported by 9% of IDP and 6% of HC HHs as their primary sources of access to key items.

Among the main markets identified in this assessment, about half of both IDP (51%) and HC HHs (54%) reported mainly buying items at the Yobsan Market. Suuqa Torabora was reported by 17% of IDP HHs and 11% of HC HHs, followed by the Huriwaa market (8% IDP, 14% HC HHs) Carabta market (8% IDP, 10% HC HHs), and Dabageed market (7% IDP, 9% HC HHs).

However, IDP and HC HHs reported different modes of transport to access markets. While the majority of both IDP and HC HHs reported walking to the market (85% and 75%, respectively), a higher percentage of IDP HHs (48%) reported taking between 31 and 60 minutes in transportation to the market, while half of HC HHs (50%) reported taking between 10 and 30 minutes in transportation (Figure 4). This might be due to the fact that HC HHs generally are located more centrally and closer to the main markets than IDP HHs, who are more often living in settlements on the outskirts of the city.

HC HHs reported visiting the market place more often on average than IDP HHs (Figure 5), which might be due to the considerable differences in reported time spent to reach the market place, in turn potentially suggesting a spatial inequality in access to markets between HC and IDP HHs.

BARRIERS

Indeed, when asked about barriers accessing the market, a higher proportion of IDP HHs (43%) reported the market being too far, compared to HC HHs (22%). A similar percentage of HHs reported the transportation being too expensive (19% IDP, 17% HC HHs). However, a higher proportion of IDP HHs reported damaged roads leading to the market (18%), and having nobody to look over the their children or elderly family members while visiting the market (17%), when compared with HC HHs (6% and 10%, respectively).

A slightly higher percentage of IDP HHs (82%) seemed to be affected by barriers accessing the market, when compared to HC HHs (74%). These challenges might be reflected in previously highlighted indicators, such as transportation methods, travel duration, and frequency of market visits.

Among the most commonly reported barriers at the market, a slightly higher percentage of IDP HHs (85%) reported having faced barriers of this type in the three months prior to data collection, when compared to HC HHs (76%). The most commonly reported barriers affecting IDP HHs were items being too expensive (41%) and having no means of payment (31%; e.g. no cash, vendors not accepting vouchers, or alternative forms of payment). For HC HHs, the most commonly reported barriers at the market were the poor quality of items available (31%) and items being too expensive (30%).

Figure 3: Most commonly unmet needs reported by HC and IDP HHs

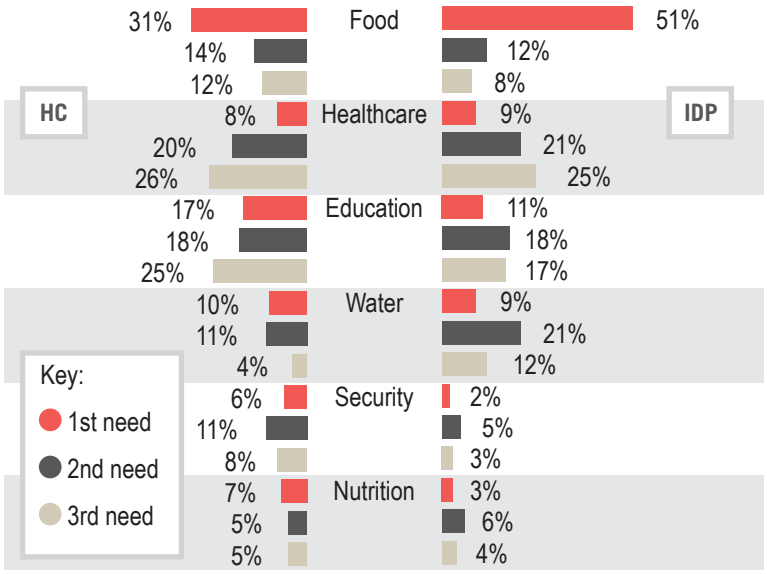
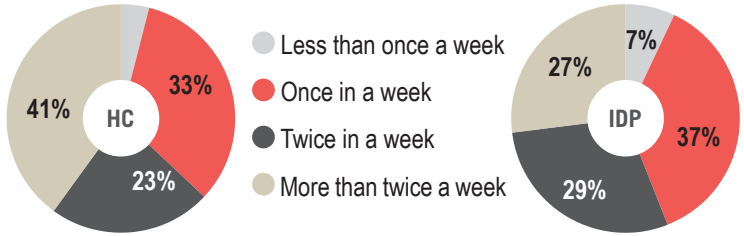


Figure 4: Reported time spent in transportation to the market

Figure 5: Reported frequency of visits to the market



AFFORDABILITY

When asked whether, in the three months prior to data collection, their HH had been unable to purchase any of the assessed items due to financial constraints, IDP and HC HHs reported similar items. At the top of the list for both strata were sugar, meat, rice, and cowpeas. However, a higher percentage of IDP HHs reported not being able to purchase these items than HC HHs (Figure 6).

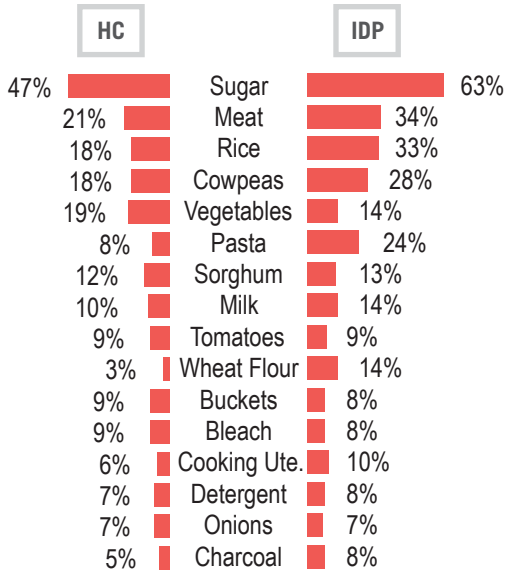
The items listed in Figure 6 are all items reported by more than 7% of IDP HHs. HC HHs (19%) more commonly reported not being able to purchase vegetables, when compared to IDP HHs (14%). For the majority of other items, however, IDP HHs more commonly reported not being able to purchase, when compared to HC HHs.

AVAILABILITY

Considering the average of reported availability among all items assessed, items were reported to be usually available between 25 and all days of the month by nearly half of both IDP (42%) and HC (51%) HHs. Considering that both strata reported primarily using the same markets (see "Access to key items"), it is expected that these percentages are similar. About 23% of IDP HHs reported items being available more than half of the time, while 19% of HC HHs reported the same (Figure 7). A smaller percentage reported items being available only rarely (13% IDP, 8% HC HHs), while the minority reported items not being available at all (4% IDP, 2% HC HHs).

Looking at specific items, a lower percentage of IDP HHs reported items being available between 25 and all days of the month than HC HHs, without exception. Water, wheat flour, rice, milk, and meat were the items most commonly reported by HHs to be available between 25 and all days of the month. Conversely, water treatment, cowpeas, and soap were the items most commonly reported by HHs to be rarely available in the market.

Figure 6: % of HHs reporting not being able to purchase the following main items due to financial constraints, in the three months prior to data collection



Focusing on the reported changes in availability of key items, when compared to the month prior to data collection (Figure 8), the most commonly reported by both IDP (33%) and HC HHs (33%) was not having experienced any changes in the availability of the assessed items (on average). However, 26% of both IDP and HC HHs reported a slight increase in availability of items, on average, when compared to the month previous to data collection. The remaining are mostly divided between a significant increase and a slight decrease in availability (Figure 8).

PRICE CHANGE

Averaging all assessed items, prices had seemingly remained the same during the month prior to data collection according to about one third of both IDP and HC HHs (32% and 34%, respectively). Nearly the same proportion of HHs reported prices to have slightly increased (29% IDP, 24% HC HHs), and still a considerable amount of HHs reported prices to have decreased slightly (16% IDP, 19% HC HHs) or increased significantly (12% IDP, 14% HC HHs).

The specific items for which IDP HHs commonly reported having perceived significant price increases during the month prior to data collection (Figure 8) were cowpeas (39% of IDP HHs), vegetables (33%), water (32%), menstrual hygiene management (MHM, 29%), and wheat flour (28%). Considering the items reported by a considerable percentage of both IDP and HC HHs to be unaffordable in the three months prior to data collection (Figure 6), either HHs are being able to cope with a few price increases, or the effect of these price increases is not yet reflected in the HHs' purchasing power.

Overall, a higher percentage of both IDP and HC HHs reported not being aware of the availability and/or price changes of key water, sanitation, and hygiene (WASH) items (such as bleach, MHM, and water treatment) and timber, when compared to other items assessed (see Figures 7-9). This could suggest that such items were not regularly purchased by HHs. Finally, it is possible that the question was not well understood, and/or that some HHs adjusted their answers based on an expectation of financial assistance.

LIVELIHOODS

When asked about the three main sources of livelihood in the 12 months prior to data collection the vast majority of IDP HHs (80%) and three quarters of HC HHs (75%) reported daily labor as one of their HHs' main livelihoods sources (Figure 10).

Humanitarian aid was reported by a considerable percentage of IDP HHs, particularly as in-kind (30%), but also voucher (24%), or cash (19%). Among HC HHs, on the other hand, the proportion of HHs reportedly relying on any type of humanitarian aid was lower (Figure 10). Conversely, a higher percentage of HC HHs reported the sale of agricultural products (26%) and subsistence farming or fishing (25%) as one of their main sources of livelihood. Among IDP HHs, the percentages for these two sources were 13% and 15% respectively.

About 12% of IDP HHs reported having only one source of livelihood, while 6% of HC HHs reported the same. Another 15% of IDP HHs reported not having a third source of livelihood, a lower percentage than HC HHs (24%).

Among IDP HHs, findings indicate that in 40% of HHs adult females have contributed to the income in the three months prior to data collection, compared to 42% of HHs where adult males have contributed. The situation seems to be similar for HC HHs, with adult females (in 41% of HHs) contributing to the income in slightly less HHs than adult males (47%). However, findings indicate that in 16% of IDP HHs under aged males have contributed to the income, compared to 6% of HC HHs.

Figure 7: % of HHs reporting perceived market availability (days per month) of key items

	25-30 days per month		16-24 days per month		6-15 days per month		1-5 days per month		0 days per month		Don't know	
Strata	IDP	HC	IDP	HC	IDP	HC	IDP	HC	IDP	HC	IDP	HC
Average across items	42%	51%	23%	19%	16%	17%	13%	8%	4%	2%	3%	2%
Bleach	27%	34%	15%	12%	6%	15%	18%	13%	12%	9%	22%	18%
Cowpeas	36%	55%	27%	11%	10%	20%	24%	14%	2%	0%	1%	0%
Jerry can	43%	45%	20%	22%	13%	24%	22%	8%	3%	1%	0%	1%
Meat	39%	59%	24%	15%	19%	23%	14%	3%	3%	0%	0%	0%
MHM*	29%	48%	25%	24%	19%	9%	13%	16%	10%	1%	3%	3%
Milk	41%	59%	27%	25%	18%	14%	10%	2%	3%	0%	0%	0%
Rice	52%	60%	23%	16%	19%	23%	5%	1%	1%	0%	0%	0%
Soap	39%	44%	21%	22%	18%	16%	18%	16%	5%	2%	0%	1%
Sorghum	45%	45%	31%	30%	18%	20%	6%	5%	1%	1%	0%	0%
Timber	39%	40%	12%	18%	6%	13%	9%	12%	10%	6%	24%	12%
Vegetable oil	50%	57%	29%	12%	18%	23%	3%	7%	0%	1%	0%	0%
Vegetables	40%	54%	24%	20%	26%	19%	8%	6%	3%	1%	0%	0%
Water	57%	71%	24%	10%	11%	17%	7%	2%	1%	0%	1%	0%
Water treatment	31%	35%	24%	29%	18%	12%	22%	21%	4%	2%	2%	2%
Wheat flour	60%	64%	16%	20%	14%	14%	9%	2%	1%	0%	0%	0%

Figure 8: % of HHs reporting perceived change in availability of key items, compared with the month prior to data collection

	Increased significantly		Increased slightly		No change		Decreased slightly		Decreased significantly		Don't know	
Strata	IDP	HC	IDP	HC	IDP	HC	IDP	HC	IDP	HC	IDP	HC
Average across items	11%	15%	29%	29%	33%	33%	14%	15%	8%	5%	4%	3%
Bleach	9%	15%	18%	15%	30%	28%	9%	11%	10%	12%	21%	20%
Cowpeas	19%	23%	34%	32%	24%	25%	16%	17%	6%	4%	1%	0%
Jerry can	10%	16%	24%	31%	42%	35%	16%	16%	8%	1%	1%	2%
Meat	6%	11%	34%	38%	34%	31%	14%	13%	10%	8%	1%	0%
MHM*	16%	14%	23%	35%	33%	30%	14%	10%	7%	7%	7%	5%
Milk	11%	13%	34%	33%	29%	36%	17%	17%	8%	2%	2%	0%
Rice	11%	13%	33%	35%	35%	33%	15%	18%	6%	2%	0%	0%
Soap	13%	13%	24%	34%	35%	35%	13%	10%	12%	8%	3%	1%
Sorghum	8%	12%	36%	33%	35%	33%	15%	17%	4%	6%	1%	0%
Timber	12%	11%	24%	22%	20%	32%	10%	13%	8%	9%	25%	13%
Vegetable oil	9%	14%	34%	25%	31%	41%	18%	17%	7%	4%	0%	0%
Vegetables	12%	24%	37%	25%	34%	28%	13%	20%	4%	4%	0%	0%
Water	8%	20%	26%	19%	43%	44%	13%	14%	8%	4%	1%	0%
Water treatment	14%	16%	27%	28%	29%	28%	14%	17%	11%	9%	5%	3%
Wheat flour	9%	18%	25%	31%	45%	37%	13%	14%	7%	1%	0%	0%

Figure 9: % of HHs reporting perceived price change of key items, compared with month prior to data collection

	Increased significantly		Increased slightly		No change		Decreased slightly		Decreased significantly		Don't know	
Strata	IDP	HC	IDP	HC	IDP	HC	IDP	HC	IDP	HC	IDP	HC
Average across items	12%	14%	29%	24%	32%	34%	16%	19%	7%	6%	5%	3%
Bleach	9%	15%	18%	16%	29%	27%	12%	11%	8%	11%	23%	21%
Cowpeas	19%	20%	34%	34%	24%	22%	13%	22%	8%	2%	1%	0%
Jerry can	9%	15%	24%	25%	37%	39%	23%	19%	7%	1%	0%	2%
Meat	4%	11%	35%	33%	28%	32%	19%	17%	13%	8%	1%	0%
MHM*	16%	13%	23%	24%	29%	34%	14%	18%	8%	7%	9%	5%
Milk	12%	12%	33%	21%	27%	41%	18%	25%	8%	2%	3%	0%
Rice	11%	14%	31%	24%	33%	36%	18%	25%	7%	2%	0%	0%
Soap	14%	13%	26%	25%	37%	35%	14%	18%	5%	9%	3%	1%
Sorghum	7%	12%	36%	30%	37%	31%	15%	23%	5%	5%	0%	0%
Timber	12%	10%	25%	20%	22%	31%	11%	19%	8%	8%	23%	13%
Vegetable oil	10%	11%	34%	22%	33%	40%	17%	24%	6%	4%	0%	0%
Vegetables	15%	18%	34%	28%	33%	28%	13%	17%	6%	10%	0%	0%
Water	11%	21%	25%	16%	39%	43%	17%	16%	7%	5%	1%	0%
Water treatment	13%	14%	26%	23%	27%	32%	20%	20%	8%	9%	5%	3%
Wheat flour	10%	18%	26%	23%	40%	37%	15%	21%	8%	2%	0%	0%

* Menstrual Hygiene Management (more commonly, "sanitary pads")

Figure 10: Most commonly reported first, second, and third livelihoods sources

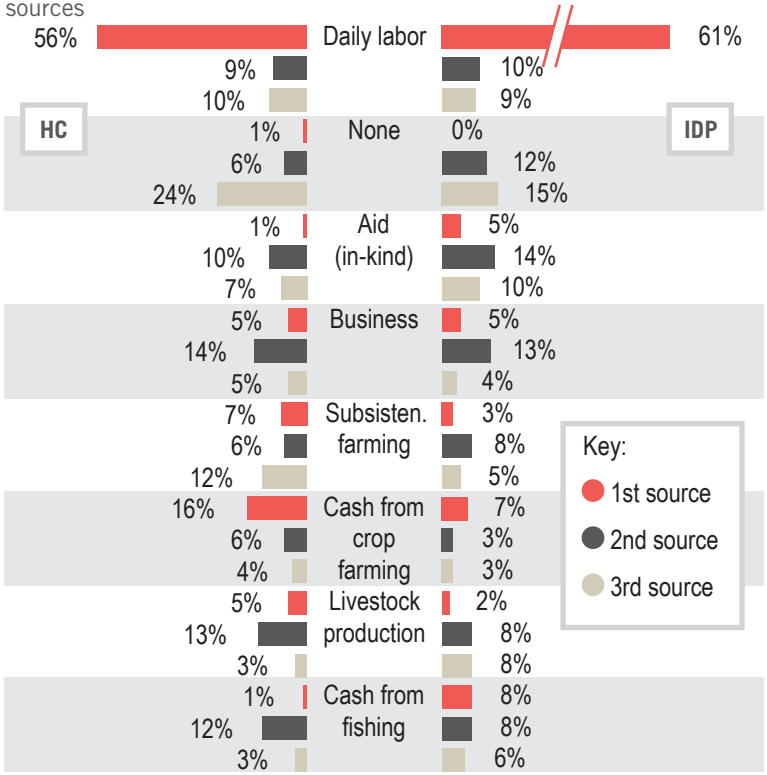


Figure 11: Reported amount of debt in USD (if any) at the market and with friends and family

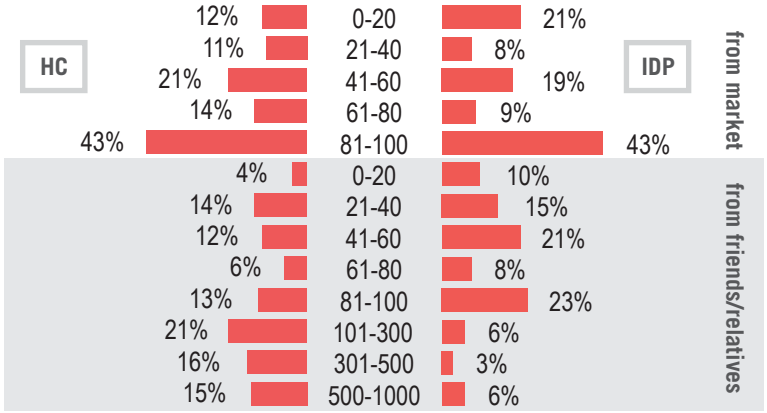
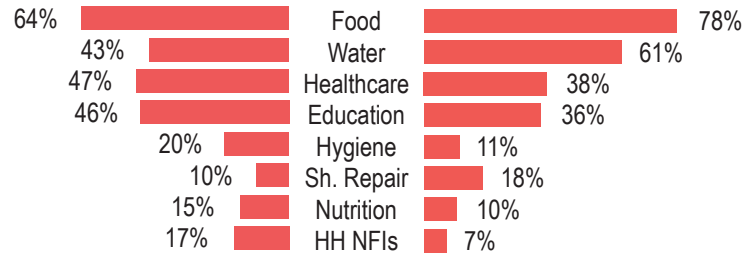


Figure 12: Of HHs reporting having debts, the most commonly reported reasons for assuming debt



DEBT

The dependency on daily labor puts IDP HHs under high job insecurity. Assuming debts with market vendors and with relatives was reportedly a common practice, among both IDP and HC HHs.

The majority of both IDP (85%) and HC (92%) HHs reported having taken on debts with market vendors in the three months prior to data collection. Among those HHs reporting having assumed a debt, the median amount of debt assumed by HHs with market vendors was 80 USD, although the reported amounts of debt vary considerably (Figure 11).

Assuming debts with relatives was even more common than with market vendors, being reported by 97% and 98% of all IDP and HC HHs , respectively. Among those, the reported amounts of debt vary considerably. The median value for IDP HHs was 80 USD, with 50% of all reported values being between 50-150 USD. Among HC HHs, the median value was 150 USD, with 50% of all reported values being between 55-400 USD.

These findings suggest that assuming debt is a common practice, not significantly particular to one or another stratum. One difference, however, was that HC HHs seem to have access to higher amounts of credit than IDP HHs (Figure 11).

Another important factor is the reported expectation to be able to repay such debts in the 12 months following data collection. While 50% of IDP HHs with debts reported believing that they will not be able to repay their debts, only 32% of indebted HC HHs reported the same. Household debt at the market is an important factor limiting vendors' access to liquidity and capacity to increase supply if needed, particularly aggravated by the low probability of repayment.

Among the HHs which have reported assuming a debt in the three months prior to data collection, the most commonly reported reasons by IDP HHs for assuming debts with either market vendors or relatives (Figure 12) were food (78%), water (61%), healthcare (38%), education (36%). Among HC HHs, the most commonly reported reasons were related to food (64%), healthcare (47%), education (46%), water (43%).

FINANCIAL SERVICE PROVIDERS

When asked about whether they used any financial service providers (FSPs) in the three months prior to data collection, nearly a third of IDP HHs (32%) and two fifths of HC HHs (40%) reported not having used any. Among all HHs, the most commonly reported FSP was mobile money operators, respectively by 34% of IDP and 31% of HC HHs. Village savings and loan associations (VSLA) were mentioned by 12% of IDP and 7% of HC HHs. Other FSPs such as microfinance institutions (MFI) and savings and credit cooperative organizations (SACCO) were mentioned by less than 10% of both IDP and HC HHs.

The time spent in transportation to reach an FSP seems to follow a similar pattern as observed in transportation time to the market (Figure 4), with IDP HHs reportedly taking slightly longer, on average, than HC HHs (Figure 13).

Among the HHs, about half of both IDP (50%) and HC HHs (54%) reported facing no barriers to access FSPs. Among all of the HHs, the most commonly reported barriers were expensive transportation (20% IDP, 12% HC HHs), insecurity traveling to and from the FSP (14% IDP, 12% HC HHs), and/or having nobody to look after their children or elderly family while visiting the FSP (11% IDP, 14% HC HHs).

AID

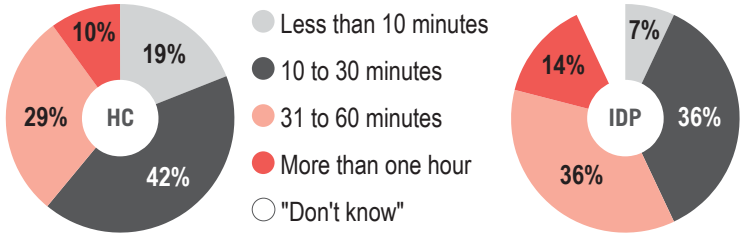
When asked whether any HH member had received any kind of humanitarian assistance (in their current location) in the 12 months prior to data collection, 73% of IDP and 48% of HC HHs reported having received assistance. As most of the aid is directed to IDP HHs in urban centers in Somalia, the following section focuses on the IDP HHs[8] that reported having received aid.

Among the IDP HHs receiving humanitarian assistance, cash (58%) was the most prevalent type, followed by in-kind (53%), services (18%), voucher (15%), and training (7%). Among those reportedly receiving cash (n=51), mobile money was the cash modality most commonly reported (63%), followed by currency (29%) and prepaid card (2%).

Among the IDP HHs who had reportedly received aid in the 12-month period leading to data collection, the majority (57%) reported they were satisfied with the aid received. The remaining 43% reported that the assistance received was not enough to meet their needs. This could be linked to the reported duration of the assistance provided. Nearly all recipients of cash assistance (n=44) reported feeling safe while accessing cash assistance (92%). Among recipients of mobile money (n=20), about half (56%) reported not having difficulties receiving and/or using mobile money. The most commonly reported issues by the remaining 44% were issues with SIM cards (57%) and difficulty to use (43%).

Among IDP HHs that had reportedly received cash or voucher assistance (n=56), 16% reported having received aid for one month in the 12-month period leading to data collection. About a quarter (25%) reported having received aid for two months, while 24% reported having received aid for three months. The remaining reported having received aid for 4 months (2%), 5 months (9%), or more than 6 months (11%).

Figure 13: Among HHs reportedly accessing FSPs, reported approximate time spent in transportation to access FSPs



All IDP HHs (n=119) were asked which type of assistance would present their household with the best value. Cash (42%) was the most commonly reported type, followed by in-kind (27%), voucher (15%), training (5%), and services (3%). The remaining 8% preferred not to answer or reported not knowing.

Among those who reported a preference for cash (n=50), the most commonly reported reasons were more freedom to purchase preferred items (57%), more dignity (52%), ability to save money for times of greater need (26%), and that it is a less visible form of aid (24%). Among those who reported a preference for in-kind (n=32), the most commonly reported reasons were poor quality of items at markets (9 HHs) and inability to access market (7 HHs). Among those who reported a preference for voucher (n=18), the most commonly reported reasons were the instability of currency (7 HHs) and unstable prices at the market (6 HHs).

Figure 14: % of IDP respondents reporting being satisfied with their participation in HH expenditure decision-making, disaggregated by gender

PROTECTION

Decision-making on IDP HH expenditure seems to be similar between women and men, as 45% of IDP HHs reported women and 55% reported men to be the main decision-maker. Overall, about two fifths of IDP respondents (43%) reported being "always" satisfied with how their preferences were included when deciding about IDP HH expenditure. About one third (38%) reported being "mostly" satisfied, followed by "sometimes" satisfied (11%), and "never" satisfied (8%).

Disaggregated by gender, findings suggest a small difference between male and female respondents (Figure 14). A smaller percentage of female respondents reported being "mostly" satisfied with how their preferences were included when deciding about IDP HH expenditure while a higher percentage of female respondents reported being "always" satisfied.

Considering that more than one individual from the same IDP HH might have been a beneficiary of aid in the 12-month period leading to data collection, aid was reportedly most commonly received by females aged between 18-59 years old (36% of IDP HHs receiving aid) and by males between 18-59 years old (36%), followed by females aged 60 and above (19%) and by males aged 60 and above (17%).

Among IDP HHs reporting having received humanitarian aid in the 12 months prior to data collection, the slight majority reported not having perceived any change in household tensions (53%), while 21% reported a slight increase and 14% reported a slight decrease in intra-household tensions. Among those HHs who did report a change in tensions (n=51), about one third (28%) reported not knowing the nature of the tension, and another third (28%) reported conflict with the spouse, while 21% reported disagreements over the use of resources and 19% reported jealousy in polygamous HHs.

Between male respondents (n=28, regardless of marital status), 14% reported that they would feel comfortable with their spouse having a mobile phone only while another 57% reported that they would feel comfortable with them having both a mobile phone and a bank account. Among female respondents (n=91, regardless of marital status), 14% reported thinking their spouse would be comfortable with them having a mobile phone while another 36% reported thinking that their spouse would be comfortable with them having both. This could indicate that, despite the majority of men being comfortable with mobile phones, delivering aid in the form of mobile cash to women in some IDP HHs could contribute to escalating tensions.

VENDORS

INFRASTRUCTURE

The most commonly reported infrastructure types of vendors' shops were solid buildings (52%) and makeshift stalls with improvised roofs (24%), while 22% of vendors interviewed reported selling their items in the open air. Nearly all vendors interviewed reported paying some sort of fee related to their business. The most common types reported were market administrative fees (31%), local authorities fees (30%), shop rent (30%), storage space rent (24%), and association of traders (18%). Only 10% reported not paying any fees at all.

For those vendors who reportedly paid fees, the median reported value of the monthly cost of running the shop was 80 USD, with half of the vendors interviewed (interquartile range) paying between 34 and 90 USD per month. The highest reported monthly cost was 150 USD. About a third of vendors interviewed reportedly serve between 26 and 50 customers per week (36%), while other vendors reported serving between 51-100 (26%), 1-25 (19%), or more than 100 (19%). The majority of vendors reported usually being open for either 6 days (54%) or 7 days (31%) per week.

ITEMS SOLD

Figure 15 summarizes the total number of interviewed vendors selling each item included in this assessment. Even though this data is not representative, it might still be useful for the interpretation of indicators related to item availability and supply.

Some produce such as meat (19 vendors), vegetables (17), and onions (10) were among the most commonly reported to be sold. At the same time, others like sorghum (2) seemed to be less widely available. Compared to other locations previously assessed[9], these numbers are relatively low.

Figure 15: Number of vendors (n=90) selling each item included in this assessment

	Item	n	Item	n
Food	Cowpeas	0	Sorghum	2
	Maize	0	Sugar	12
	Meat	19	Tea Leaves	3
	Milk (Powder)	3	Tomatoes	11
	Onions	10	Vegetable Oil	5
	Pasta	10	Vegetables	17
	Rice	6	Wheat Flour	6
	Salt	4		
WASH	Bleach	2	Soap (Body)	4
	Detergent	3	Water	0
	MHM	2	Water Treat.	3
	Sanitizer	1		
NFI	Batteries	1	Iron Sheet	6
	Blankets	3	Jerry Cans	5
	Buckets	14	Mosquito Nets	3
	Building Nails	10	Plastic Sheet	2
	Cement	7	Sleeping Mats	6
	Charcoal	11	Timber	6
	Cooking Uten.	11	Torch	0
	Firewood	2	Wooden Pole	2

While the majority of vendors interviewed (54%) reported not offering home delivery, some vendors reported offering home delivery of food items (23%), gas (8%), water (6%), and/or bread (2%). The remaining 7% reported not knowing.

SUPPLY

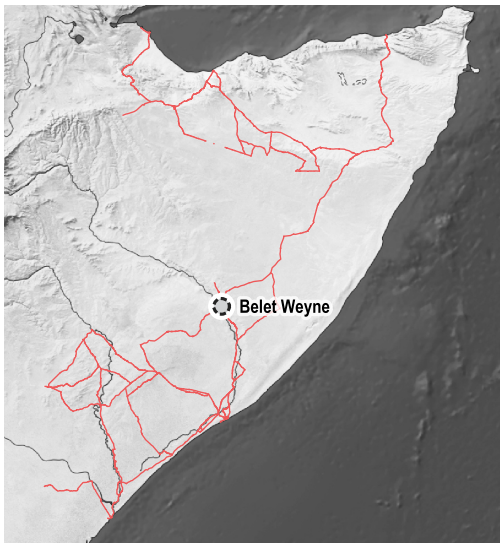
Vendors interviewed most commonly reported restocking once per week (29%), followed by twice per week (23%), more than twice (20%) or less than once per week (18%). Expectedly, vendors reportedly selling vegetables, which generally have a shorter shelf life than other assessed items, commonly reported slightly higher restocking frequencies than the overall vendor sample.

Nearly a quarter of all vendors interviewed reported having two suppliers (24%). Less vendors reported having one (16%), three (13%), six (13%), five (11%), four (6%), or seven or more (10%) suppliers. The overall relatively low number of suppliers[10] per vendor might indicate a general vulnerability of vendors interviewed to disruptions in the supply chain.

When asked which supply sources they used, vendors interviewed most commonly reported working with suppliers who were wholesalers working from the same market (39%), which suggests that a supply chain disruption is likely to simultaneously impact multiple vendors in the same market, limiting the potential for markets to be used to respond as a local support during supply chain disruptions, as many vendors might be impacted by the same disruption. However, 30% also reported buying from a supplier from another city. Local producers/farmers, as well as wholesalers from other parts of Beletweyne, were also relatively frequently reported suppliers, by 28% and 19% of vendors interviewed respectively; this could suggest at least some market resilience to supply chain disruptions.

Most vendors interviewed reported using a hired vehicle to transport their stock (54%), while others reported having the supplier delivering items directly (14%). A smaller percentage reported using professional transportation services (13%), or using their own vehicle (8%).

Map 3: Assessed location and main domestic roads



SHORTAGES

More than half of vendors interviewed (57%) reported having faced shortage of at least one item that they normally sell in the weeks prior to data collection.

Among the items assessed, vendors most commonly reported having experienced shortages of meat, vegetables, buckets, and cooking utensils (Figure 16). Due to the low number of vendors interviewed selling each items, factoring the items that were relatively more commonly reported facing shortages was not possible.

Of all vendors interviewed reporting shortages (n=51), vendors most commonly reported shortages were due to closed roads (43%), limited funds (27%), unusable roads (23%), shortage on the supplier side (17%), sudden increase of demand (13%), and/or stolen or damaged goods (11%).

ABILITY TO MEET DEMAND

Figure 17 illustrates the number of vendors interviewed who reported expecting to be able to increase their supply of each item that they reported selling. As an example, 2 of the 10 vendors who usually sell onions believe they would be able to increase their supply of onions.

Figure 16: Number of vendors reportedly selling the following items reporting having experienced shortages in the two weeks prior to data collection

	Item	n	Item	n
Food	Meat	13/19	Sorghum	1/2
	Onions	2/10	Tomatoes	3/11
	Pasta	1/10	Vegetables	9/17
	Salt	1/4	Wheat Flour	1/6
WASH	Detergent	1/3	Soap (Body)	2/4
	MHM	1/2	Water Treat.	2/3
	Sanitizer	1/1		
NFI	Blankets	1/3	Firewood	1/2
	Buckets	8/14	Iron Sheet	4/6
	Building Nails	8/10	Jerry Cans	2/5
	Cement	4/7	Mosquito Nets	2/3
	Charcoal	1/11	Sleeping Mats	2/6
	Cooking Uten.	7/11	Timber	3/6

The most commonly reported strategies to increase supply were buying items on credit (40%), buying additional stock from other suppliers (30%), buying larger quantities from their current supplier (25%) and/or restocking more often (19%).

Conversely, among the main reasons reportedly keeping vendors interviewed from increasing the stock of particular items were not having capital or access to credit (42%), not having enough space to stock more stock safely (38%), suppliers having limited supply (16%), lack of vehicles to transport larger quantities of the products (14%), and/or not feeling safe making additional trips despite having capital (9%).

Figure 17: Number of vendors reporting being able to increase supply, by item sold

	Item	n	Item	n
Food	Meat	19/19	Sorghum	2/2
	Milk (Powder)	3/3	Sugar	8/12
	Onions	2/10	Tea Leaves	1/3
	Pasta	2/10	Tomatoes	6/11
	Rice	1/6	Vegetables	14/17
	Salt	1/4	Wheat Flour	3/6
WASH	Detergent	1/3	Soap (Body)	4/4
	MHM	1/2	Water Treat.	1/3
	Sanitizer	1/1		
NFI	Batteries	1/1	Iron Sheet	4/6
	Buckets	7/14	Jerry Cans	3/5
	Building Nails	9/10	Mosquito Nets	1/3
	Cement	4/7	Sleeping Mats	3/6
	Charcoal	3/11	Timber	3/6
	Cooking Uten.	11/11	Wooden Pole	2/2

CREDIT

Nearly one fifth of vendors interviewed (22%) reported not having access to any sources of credit to conduct business (Figure 18), which may limit their capacity to scale up and respond to disruptions.

Among those who do have access, reported sources include bank loans (32%), borrowing from friends and family in Beletweyne (19%), borrowing from friends and family from another location (19%), loans from savings and credit cooperative organizations (SACCOs, 10%), loans from hawalas[11] (8%), and/or loans from microfinance organizations (4%). On the other hand, the majority of interviewed vendors (74%) reported having offered credit to customers in the 30 days prior to data collection themselves (Figure 19).

BARRIERS

The majority of vendors interviewed (73%) reported facing financial issues, such as low purchasing power (29% of all vendors interviewed) and banks either offering limited loans (27%). Other, less frequently reported issues were having limited cash (19%), hawalas being closed (12%), banks having limed cash (9%), and/or hawalas having limited cash (8%).

The relatively high proportion of vendors interviewed reportedly having financial issues might be associated with the limited access to sources of credit reported, and the reported dependency on family or friends for credit. While SACCOs were reportedly accessed for credit (see 'Credit'), it is possible that vendors interviewed were not widely familiar with other sources of credit that could alleviate their financial issues. Other possibilities are that vendors were aware of but for other reasons either unable to access these sources of credit or unwilling to commit to credit.

Figure 18: % of vendors reportedly able to access different sources of credit

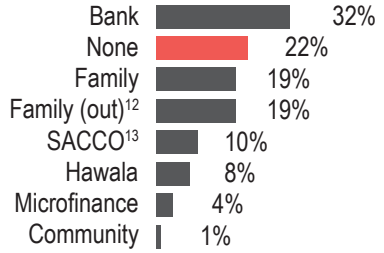
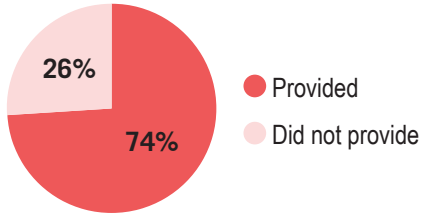


Figure 19: % of vendors reporting having provided credit to any of their customers, in the 30 days prior to data collection



35 USD is the median maximum amount that vendors reported allowing in credit for a single customer.

300 USD is the median reported estimated value of credit that vendors had offered to customers and were still expecting to be paid back.

Beyond financial barriers, vendors might encounter other types of barriers when conducting their business in Somalia: transportation from suppliers to the shop, security issues at the shop/market, and non-security issues at the shop/market. A high percentage of vendors interviewed in Beletweyne reported facing transportation (83%), non-security (80%) and security related barriers (71%).

Among all vendors interviewed, the most commonly reported transportation barriers were poor quality of roads (38%), roads affected by floods (36%), theft (24%), road closure (24%), detention (18%), and/or bombing (8%). The most commonly reported non-security barriers were supplier having limited supply (27%), supplier being out of stock (18%), expiration of commodities (14%), having no suppliers (13%), and/or having suppliers unwilling to sell (12%). The most commonly reported security barriers at the market were theft (34%), detention (26%), and popular tension (19%).

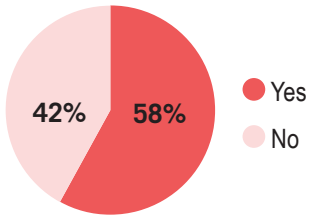
Finally, about half of vendors interviewed (58%) reported facing greater supply issues in a particular season (Figure 21). Vendors who reportedly faced seasonality-related supply issues most commonly reported facing issues replenishing their supply in Deyr (65%), followed by Gu' (52%), Hagaa (37%), and Jilal (19%).

BARTER

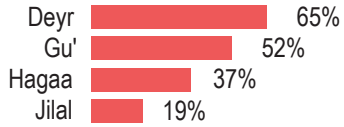
Nearly one quarter of all vendors interviewed reported that customers had tried to sell them items received from humanitarian aid (23%), the majority of whom (81%) reported not having accepted the barter.

Figure 20: % of vendors reporting facing each type of barrier

Figure 21 : % of vendors reporting facing greater supply issues in a particular season



Of those, particular seasons[14] in which they reported facing greater supply issues



ENDNOTES

1. OCHA. Somalia Humanitarian Response Plan (HRP) 2020 (p.5). January 2020
2. OCHA. Flood Response Plan - Somalia. June 2020
3. Ibid.
4. OCHA. Humanitarian Needs Overview 2020 (p.60). December 2019
5. This is the commonly used exchange rate, according to FSNAU's monthly market price monitoring.
6. CCCM Somalia. Detailed Site Assessment (DSA) January 2019
7. REACH. Market Feasibility Studies 2019-2020.
8. Identified in this assessment based on pre-identified OCHA settlements and the shelter conditions.
9. REACH. Market Feasibility Studies 2019-2020.
10. When compared with findings from the Joint Market Monitoring Initiative (JMMI). Factsheet Booklet. August 2020
11. Money transfer system whereby money is paid to an operator in one location who then directs a counterpart in another location to pay the final recipient.
12. Family residing outside of the location assessed.
13. Savings and Credit Cooperative Organization (SACCO)
14. Seasons are referred to using their names in Somali, as they are normally referred to in other publications. A rough equivalence with the seasons in the northern hemisphere would be Hagaa (summer), Deyr (autumn), Jilal (winter), and Gu' (spring). The two rainy seasons are Deyr and Gu'. More info here.

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