

ACCOUNTABILITY TO AFFECTED POPULATIONS (AAP)

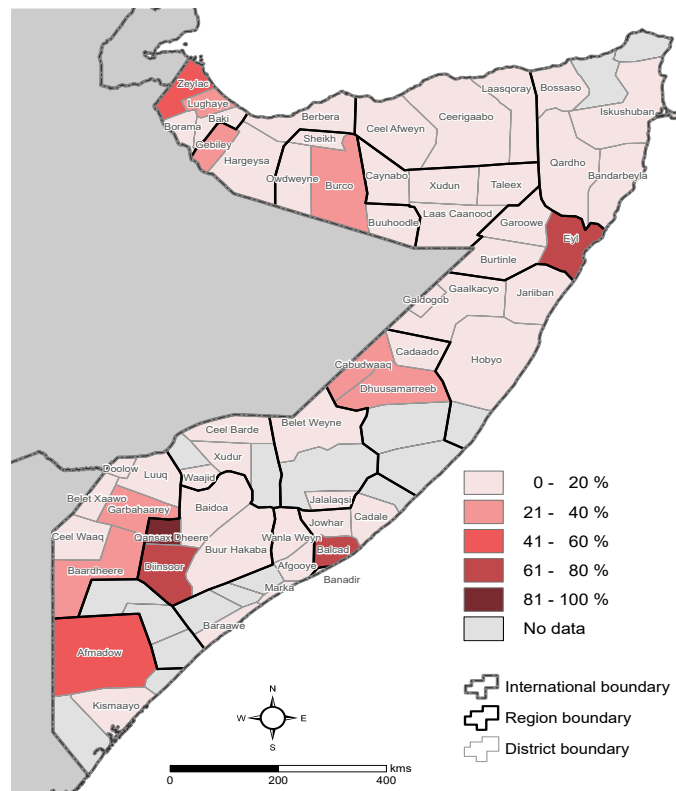
MSNA

FEBRUARY 2023
SOMALIA

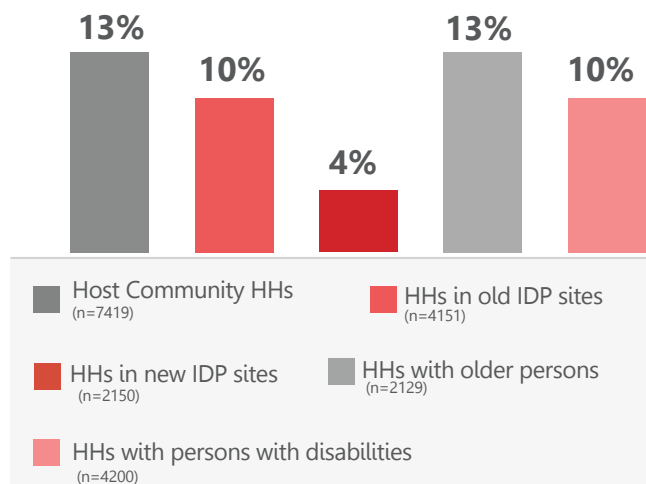
CONTEXT. Protracted drought, conflict, and economic pressures in Somalia continue to drive an increase in humanitarian needs in a wide variety of sectors, with an estimated 8.3 million people in need according to the recent 2023 Humanitarian Needs Overview (HNO).¹ To better understand the humanitarian needs and gaps of the crisis-affected population, REACH conducted a Multi-Sectoral Needs Assessment (MSNA) for the sixth consecutive year in Somalia. More than 13,000 households (HH) surveys were carried out in 54 accessible districts between July and August 2022. In line with the Community Engagement and Accountability (CEA) Task Force's aim to mainstream AAP in the humanitarian response and engage affected populations as active participants and agents of change,² this factsheet provides key findings on AAP, drawn from the 2022 MSNA. Findings are generalisable with a 90% CI and a 10% MoE at the district level. When presented for subsets of the sample, findings are to be considered indicative only. More information on the 2022 MSNA research design and methodology can be found [here](#).

RECEPTION OF ASSISTANCE

% of HHs which reportedly received assistance in the 30 days prior to data collection, per district:



% of HHs which reportedly received assistance in the 30 days prior to data collection, per population group:³



12%

of households reported having **received** humanitarian assistance in the 30 days prior to data collection.

The geographical distribution of humanitarian aid partially corresponds to the districts worst affected by the consecutive multi-season drought and classified to face Emergency levels of food insecurity (IPC 4) during the June to September 2022 period, according to the IPC analysis.⁴ There has been particularly strong mobilisation of humanitarian actors particularly in south and central parts of Somalia in Qansax Dheere, Afmadow, Balcad and Diinsoor, following major population movements due to insecurity.⁵ Non-displaced populations more often reported receiving humanitarian assistance than internally displaced population groups, with findings suggesting that newly displaced populations were least likely to have received assistance. Despite 81% of overall HHs assessed facing no barriers in accessing humanitarian aid, almost half of HHs residing in displaced sites faced barriers in accessing humanitarian aid (old-IDP sites 44%, new-IDP sites 41%) with the lack of information about aid reportedly being the most prominent issue (old-IDP sites 18%, new-IDP 37%). In addition, HHs with persons with disabilities also particularly commonly reported facing barriers, with a lack of information about aid (36%) and physically being unable to join (18%) being the most reported barriers.

SATISFACTION UPON RECEPTION

91%

[Among the 12% of HHs reporting having received assistance in the 30 days prior to data collection]

of HHs were reportedly **satisfied** with the humanitarian assistance

Top three most commonly reported reasons for **dissatisfaction** with the humanitarian assistance received: ⁶

[Of those who received aid and were dissatisfied with assistance received] *

1. **Quantity was not enough (44%)**
2. **Quality was not good enough (34%)**
3. **Did not receive the humanitarian aid on time/delays in delivery of aid (26%)**

Among HHs who reported being dissatisfied with the aid received, the main reported reasons for dissatisfaction appeared to vary slightly between population groups. For instance, **timeliness (did not receive aid on time)** was the **most reported reason for dissatisfaction by HHs in IDP sites** (62% in new IDP sites, 40% in old IDP sites, compared to 26% overall), while **quantity was the most reported reason among host community HHs** (45%). HHs in old IDP sites also relatively commonly reported **distance to distribution sites to be a reason for dissatisfaction** (14%, compared to 4% overall).

*HHs could select multiple response options. Therefore, the total may exceed 100. This subset represents overall 1,098 HHs among the 13,720 households that participated in the assessment.

NEEDS AND MODALITIES

Most commonly reported modalities of assistance that HHs would prefer to receive in the future:

In-kind (food)	75%
Physical cash	67%
In-kind (NFI)	53%
Cash via mobile	36%
Cash via bank transfer	18%
Cash via prepaid	15%
Provision of services	14%
Vouchers	8%

Top three most reported priority needs, by % of HHs:



Food (72%)



Shelter (67%)



Health (59%)

Most HHs reported food (72%) to be their top priority need, which was slightly more often reported by displaced HHs (81% in both new and old IDP sites) than host community HHs (71%). The second most cited priority need reported by HHs, shelter (67%), was more frequently reported by households in IDP sites (83% in new IDP sites, 79% in old IDP sites). In line with this, in-kind food assistance was the most reported modality preference, and was more often reported than physical cash and various other forms of cash. HHs in displaced sites more often reported preferring the direct provision of shelter construction materials (17% in old IDP sites, 12% in new IDP sites), while 67% of HHs in host community sites reported preferring money to buy

DELIVERY OF ASSISTANCE

67%

of HHs were reportedly **satisfied** with humanitarian assistance workers' behaviour in the area.

Top three most reported reasons for **dissatisfaction** with the behaviour of aid workers in the area, by % of HHs:

[Of those who were dissatisfied with aid workers' behaviour] *

1. **Aid workers are not available when needed (55%)**
2. **Asked for favour or payment to receive assets (19%)**
3. **Workers refused to put friends and family on lists (18%)**

Overall, 92% of HHs that were dissatisfied were reportedly unaware of how to report on issues related to humanitarian aid workers and 41% of HHs reported not being aware of conveying information about humanitarian assistance through which ask a question or make a suggestion or complaint about the humanitarian assistance they receive.

* This subset represents 1,098 HHs overall among the 13,720 households that participated in the assessment.

ENDNOTES

1. [Somalia Humanitarian Needs Overview 2023](#)

2. [Somalia National Community Engagement and Accountability \(CEA\) Strategy and Action Plan \(May 2022 - 2024\)](#)

3. Residents, IDP populations living out of sites, and households hosting other households, were defined as "populations living in non-IDP settlements". Displaced populations living in IDP sites established for more than 18 months with no new arrivals, were defined as "persons or groups of persons who have been forced or obliged to flee or to leave their homes or places of habitual residence, and now live in an IDP settlement that has been established for more than 18 months that did not welcome new arrivals in the last 12 months". Displaced populations living in newly established IDP sites or IDP sites with new arrivals, were defined as "persons or groups of persons who have been forced or obliged to flee or to leave their homes or places of habitual residence, and now live in an IDP settlement that has been established for less than 18 months, or persons residing in an IDP settlement that has welcomed the majority of the residents less than 12 months ago".

4. [Somalia Updated IPC and Famine Risk Analysis Technical Release 4th June 2022](#)

5. [Somalia Drought Displacement Monitoring Dashboard \(September 2022\)](#)

6. Findings relate to the subset of HHs who reportedly received aid and were dissatisfied per population group: Host community HHs (n=153) - HHs in old IDP sites (n=65) - HHs in new IDP sites (n=115).