SOMALIA

Post Distribution Monitoring Endline Evaluation

Comparative assessment report for the Somali Cash Consortium

October 2022









ABBREVIATIONS AND ACRONYMS

COOPI Cooperazione Internazionale **CRM** Complaint Response Mechanism

CWG Cash Working GroupDRC 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 EvaluationMEB 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 DollarVRC Village Relief Committee

Somali Cash Consortium Partners













Donor



Cover image depicting a Community Mobilization and Sensitization meeting in Saylada village in Bari region Photo | SCI

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). Currently in its sixth year of activities, the SCC distributed three cycles of UCT between April and August 2022 to vulnerable households in districts of Banadir, Qansax Dheere, Baidoa, Buur Hakaba, Diinsor, Baardheere, Doolow, Kismayo, Balcad, Jowhar, Galkacyo, Buuhoodle and Owdweyne and Hard to reach districts of Waajid, Jamaame, Belet Xaawo and Afgoye². The cash transfer amounts were set in line with the harmonised super-region transfer values recommended by the Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO) and the Foreign, Commonwealth and Development Office (FCDO), 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).

Between June and September 2022, an estimated 4.3 million people (26% of the total population) experienced acute food insecurity at crisis or worse levels (IPC Phase 3 or higher). The prolonged drought conditions created a severe shortage of pasture and water leading to widespread animal emaciation and even death from starvation.³ Therefore, the humanitarian needs of people living in Somalia increased throughout 2022, 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 and insecurity.⁴

Table 1 below summarises the key findings of the SCC baseline and endline assessments (which were carried out in April and September 2022), based on the recommended indicators standardised by the Monitoring and Evaluation (M&E) Workstream of the Somalia Cash Working Group (CWG). The results presented in table 1 represent the weighted averages for beneficiary households of the SCC programme at the district level. Overall averages were weighted based on the number of beneficiaries per district within the total SCC main caseload, and findings are representative at the district level, with a 95% confidence level and a 7% margin of error (MoE). Disaggregation of the results by gender of the head of household, livelihood zone, and district are included in the report. Results disaggregated by gender and livelihood 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. The overview of findings per indicator is presented in this section, while a more detailed analysis of the results and disaggregation of the findings by district are provided in the main part of the report.

⁴ Ibid



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

² These were pilot districts classified as hard to reach areas where separate data collection was conducted by the SCC partners.

³ Somalia IPC Famine Review Committee Report

Table 1: Somali Cash Consortium baseline and endline key findings.^{5,6}

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	98.4%	N/A
Average meals consumed per household in the last 24 hours		2.1	2.2	+6%
Average Food Consumption Score (FCS)		40.2	51.1	+27%
% of households with an acceptable FCS	46.0%	39%	67%	+163%
% of households with a high or medium HDDS		75%	82%	+9%
Average Reduced Coping Strategies Index (rCSI)		15.6	13.2	-15%
Average Livelihood Coping Strategies Index (LCSI)	5.4	6.4	4.0	-38%
% of households whose spending was reportedly equal to or above MEB	30%	14%	38%	+24%
% of total household expenditure spent on food		53%	49%	-9%
Total expenditure spent on food (in USD)		50.0	62.2	+24%
Protection Index Score ⁷	79.0%	82%	75%	-9%

KEY FINDINGS 8

Cash use and impact

A high proportion of households felt that cash helped them meet basic needs at the endline assessment (98%). In addition, at the endline, findings indicate that more than half (55%) of the assessed households had suggestions on how to improve the cash assistance to meet their household's needs. Increasing duration of cash transfers (85%), increasing amounts of cash transfers, and providing continuous cash transfers throughout the year (55%) were the top-reported suggestions.

Food security and livelihood

Improvements were seen across most of the core indicators used to measure household level 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

⁵ 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 aggregate results presented only represent the districts where both the baseline and endline data were collected.

⁶ 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.

⁷ Unlike for 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%.

⁸ 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.

households maintain their food security levels over the course of the programme. In addition, some of the improvements fall within the overlap of margins of error, which increases uncertainty, but they are corroborated by the overall upward trend in indicators. This is in the context of worsening situation in terms of the food security across most of the country.

The average number of meals consumed by each person per day increased slightly, from 2.1 to 2.2 at the endline. However, the findings of the Food Consumption Score (FCS) increased considerably: at the time of the baseline, 39% of beneficiary households were found to have an acceptable FCS. By the endline, 67% 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 14% at the baseline to 38% during 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 HDDS slightly increased from 51% at the baseline to 57% during the endline, 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 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). The overall rCSI scores decreased from 15.6 at the baseline to 13.2 at the endline. The overall decrease in the average rCSI score over time, between the baseline and the endline, indicates a decrease in the use of negative coping strategies. During the endline assessment, households had access to money and were able to purchase food that inturn allowed them to decrease the frequency in the use of negative coping strategies.

A majority of the households (90%) were found to engage in emergency, crisis or stress level coping strategies during endline assessments, this slightly increased from 87% during the baseline assessment. These households are likely to have eroded their overall resilience, hence increasing the likelihood exhausting their limited resources to afford the basic needs. Food access (92%) and healthcare (60%) were the top cited reasons for engaging in these coping strategies during the endline. This was consistent with the baseline assessment where food access (91%) and healthcare (57%) were the top cited reasons for engaging in the above strategies.

Household expenditure breakdown

The average proportion of household expenditure representing food purchases decreased from 53% at the baseline to 49% 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 50) and endline (USD 62), this increase could be attributed by the increased food prices at the time of the

¹⁰ The LCSI Stress category includes; selling household assets/goods, purchasing food on credit or borrowing food, spending savings and selling more animals while crisis category comprise of selling productive assets or means of transport, selling of 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 plan to migrate to the new area within the next 6 months.



⁹ More information on LCSI can be obtained <u>here</u> and rCSI <u>here.</u>

endline assessment. In addition, at the endline, clothing formed part of the top-four reported expenditure categories.¹¹

Savings and debts

Slight improvements were reported after the three rounds of the cash transfers. The proportion of households with savings increased slightly from 6% at the baseline to 14% during the endline. On the other hand, households who reportedly had debts with the same period decreased slightly from 83% to 77%. The top reasons for taking debts were; to acquire cloths, access healthcare services and pay rent.

Protection and accountability

Nearly all households (98%) reportedly perceived the selection process for the MPCA programme to be fair. ¹² 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 having been consulted by an NGO at the time of endline data collection. ¹³

A slight increase was reported in the proportion of households who reportedly utilized the CRM platforms. This increased from 25% at the baseline to 31% during the endline. **A majority (71%) of households** reported being **were aware of the existence of a dedicated NGO hotline**, while another 43% reported that they knew they could directly talk to NGO staff during field visits or at their offices.

¹³ The protection related issues raised by the remaining households were sent to the cash implementing partners for follow ups.



¹¹ 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.

¹² Since this finding is only applicable to the selected people who were interviewed, there could be some bias.

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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 27th of April and 31st of May 2022 prior to the first transfer and an endline assessment between 27th July and 29th of September 2022 following the last round of cash transfers. The overall aim of this study was to assess the outcome of MPCA to 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 6,019 households in Somalia.

METHODOLOGY

All assessments conducted by IMPACT within the scope of the 2022 SCC 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.¹⁴

For districts where more than one partner was operating, notably Baidoa, Banadir and Doloow, 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 Waajid, Jamaame, Belet Xaawo, Doloow and Afgoye 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,



¹⁴ 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.

both district averages and the weighted overall average are presented in the analysis and reporting. Due to rounding to the nearest decimal point, percentages may sometimes not add up exactly to 100.0%.

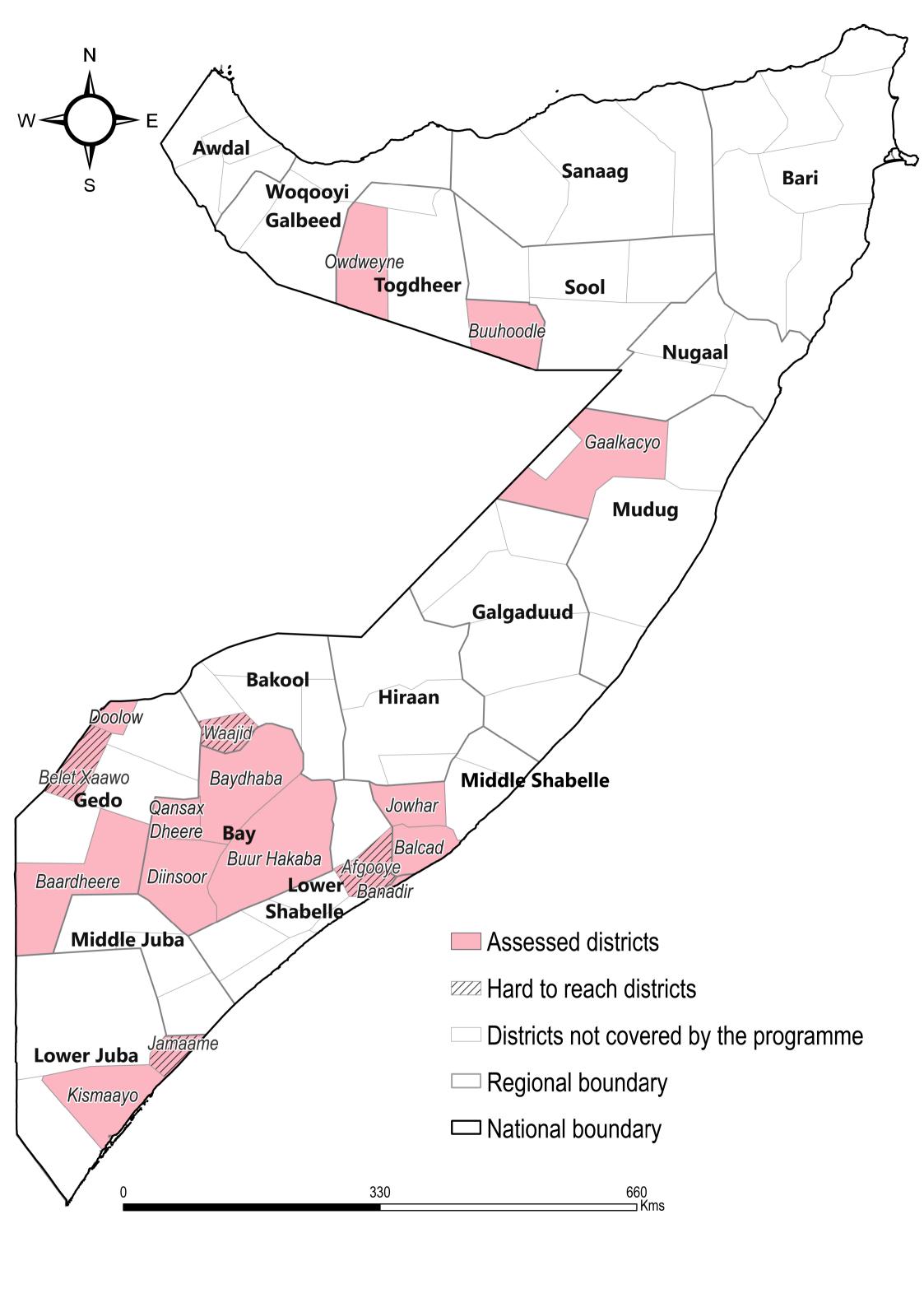
Target sample sizes compared to actual surveys completed by district can be seen in Table 2 below.

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	404	132	152	118	194
Gedo	Baardheere	2,021	179	206	212	194
Bay	Baidoa	6,287	190	219	230	80
Middle Shabelle	Balcad	1,587	175	201	181	187
Banadir	Banadir	1,494	173	199	190	191
Gedo	Belet Xaawo	267	113	130	156	158
Togdheer	Buuhoodle	1,540	174	200	194	197
Bay	Buur Hakaba	1,245	169	194	188	190
Bay	Diinsoor	1,170	168	193	199	224
Gedo	Doolow	293	118	136	143	130
Mudug	Galkacyo	1,167	168	193	180	210
Togdheer	Owdweyne	1,700	176	202	207	224
Lower Juba	Jamaame	119	74	85	42	96
Middle Shabelle	Jowhar	1,241	169	194	188	167
Lower Juba	Kismayo	1,045	165	190	166	192
Bay	Qansax Dheere	1,324	171	197	213	231
Bakool	Waajid	1,202	169	194	189	158
All assessed regions	All assessed districts	24,106	2,683	3,085	2,996	3,023

Geographical scope

Map 1: Map of assessed areas.



Data collection methods

IMPACT conducted household interviews in the beneficiary households during the baseline and the endline assessments, respectively. Household behaviours were assessed during this period. The baseline assessment was conducted between 27th April and 31st May 202215 before the first round of cash transfer to the beneficiary households, while the endline assessment was conducted between 27th July and 29th September 2022 after the third and last round of cash transfer¹⁶.

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 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.

MPACT SOM Somalia-Cash-Consortium Baseline-Factsheet July-2022.pdf
 IMPACT SOM ENDLINE-FACTSHEET SOMALIA-CASH-CONSORTIUM SEPTEMBER 2022.pdf



- **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 expenditures accurately and to such a degree of detail; hence it might have negatively impacted the accuracy of reporting on those indicators.
- **Weighting:** During the endline assessment, a part of the beneficiary households in Baidoa district (57 household surveys) were excluded from the survey and from the weighting as they received 3 cycles of cash transfers later than other districts assessed.

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,¹⁷ 6,019 respondents were surveyed. Of these surveys, 94% were conducted directly with the self-reported head of household. The remaining 6% of surveys were conducted with a different member of the household who answered the questions on behalf of the head of household.¹⁸ 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	91%	9%
Endline	93%	7%

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

At the endline assessments, over half (59%) of households were reportedly female-headed, while 41% of households were male-headed households.

During the endline, more than two-thirds (65%) of the interviews were conducted with female respondents and the average age of all heads of households was 39.5 years, with male heads of

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

18 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.



¹⁷ Hereafter, when "all assessments" are mentioned, this refers to the baseline and endline assessments conducted in 2022 under the scope of the main caseload, Round 1 (R1) project cycle. Averages have been weighted according to the number of surveys collected during each assessment phase.

household being on average 41.4 years old and female heads of household averaging at a slightly younger age – 38.1 years old.¹⁹

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 arrived. Based on this approach, among the interviewed SCC beneficiary households, nearly all (97%) households were found to be members of the host community, and only 3% 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 Buurhakaba, Diinsor, Jamaame, Jowhar, Owdweyne, Qaansax dhere and Waajid districts, more than 90% of the beneficiary households were categorised as members of the host community.

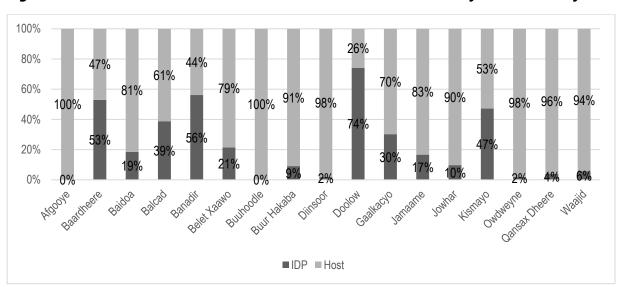


Figure 1: % of IDPs and the host communities of the SCC beneficiary households by district.

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, 47% were categorised as urban households, 32% as agro-pastoral and 21% as pastoral, based on household self-reporting.

¹⁹ No data was collected for heads of households younger than 18, and surveys were only conducted with respondents over the age of 18.



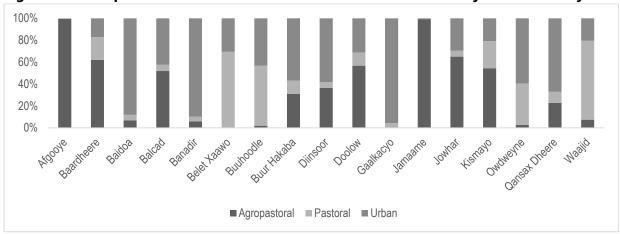


Figure 2: Self-reported livelihood zone breakdown of SCC beneficiary households by district.

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. Responsibility within the household over spending decisions does not appear to have changed much following the reception of UCT. The spending decisions seemed to be similar between the baseline and the endline assessments. In about half of households (48% and 47% during the baseline and the endline, respectively), spending decisions were jointly made with female and male household members.

All households reported no conflicts in and between the household members on how to spend cash received.

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

	Baseline	Endline
Male	26%	31%
Female	26%	22%
Joint Decisions	48%	47%

Perceived well-being Indicators

Households were asked the following series of subjective questions²⁰ 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?

²⁰ This series of perceived well-being indicators was developed jointly by the Cash Consortium and an external consultant working on a previous grant.



5. How would a crisis or shock, such as flooding, drought, locusts, hailstorms affect your household's well-being?

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-month worth 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 Figure 3 & 4, the percentage of households reporting that they "never" or "rarely" had a sufficient quantity 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. 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.

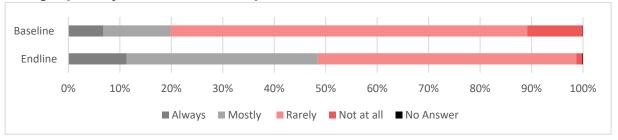
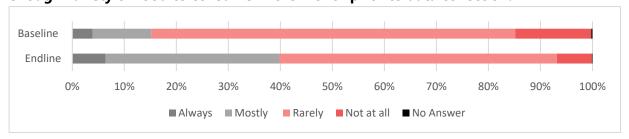


Figure 4: Percentage of households reporting always, mostly, rarely, or never having had enough variety of food to consume in the month prior to data collection.



As demonstrated in Figure 5 below, at the time of the baseline only 14% 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 (35%), while the proportion of households reporting not having been able to do so decreased from 17% to 10%.

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.

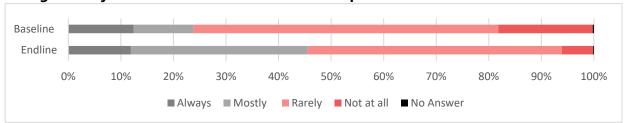
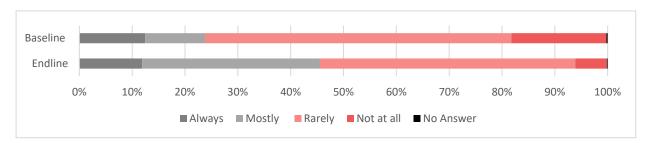


Figure 6: Percentage of households reporting always, mostly, rarely, or never being able to meet their basic needs in the month prior to data collection.



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 24% 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 **nearly half (46%) 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; 89% of households reporting that the cash assistance was appropriate to their household's needs. Only 11% 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**. Reflective of the vulnerability conditions²¹, a majority 85% of households felt that the programme duration should be increased, while 56% of households felt the amounts disbursed should be increased.

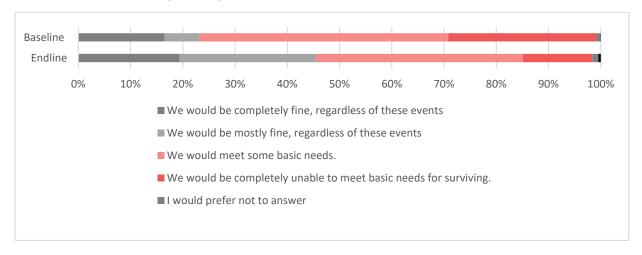
As demonstrated in Figure 7 below, the households' perception of their ability to withstand a crisis or shock was considerably higher during the endline compared to the midline. The proportion of households believing that they would be completely unable to meet basic needs for surviving a crisis such as a drought, flooding, locust invasions or hailstorms decreased from 28% at the baseline to 13% at the endline.

²¹ Integrated Food Security Phase Classification (September 2022). Somalia



Reflecting the general trend of the other subjective well-being indicators, the proportion of households reporting positive perceptions of their well-being²² appears to have increased between the 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

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

Meals Consumed in the 24 Hours Prior to Data Collection

At the endline, after the three-month worth of UCT, the average number of meals consumed by households in the 24 hours prior to data collection was 2.2, 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 Afgooye, Belet Xaawo, Jowhar, Kismayo and Waajid districts.

²² 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.



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

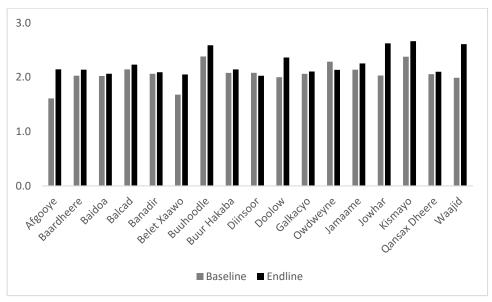


Table 5: Proportion of households by reported # of meals consumed in the 24 hours prior to data collection.

# of Meals Eaten in the 24	% of	% of
hours prior to data	households	households
collection	Baseline	Endline
0	0%	0%
1	6%	2%
2	82%	73%
3	12%	23%
>3	0%	2%

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 less than two meals slightly decreased from 6% at the baseline to 2% during the endline, while the proportion of households reporting consumption of two or more meals increased from 94% to 98% during the same period.

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.

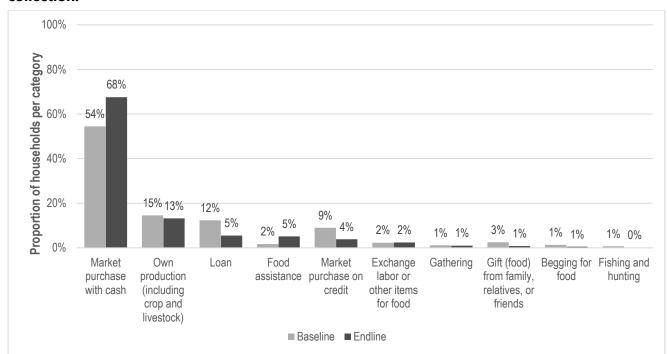


Figure 9: Main food source reportedly used by households in the 7 days prior to data collection.

Market purchases made with cash²³ 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 68% at the endline, indicating that households' purchasing power increased, in turn decreasing their reliance on less sustainable or more insecure sources. Indeed, while loans and market credit²⁴ 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 (5%). However, it is likely that households' vulnerability to shocks might increase again due to the end of the cash transfers.

Findings suggest that the three cycles of cash transfers enabled more households to purchase food commodities from the market. However, it should be noted that reliance on markets to access food, particularly among households who have no other sources of food, could indicate high vulnerability to price increases or other economic shocks, particularly if households may have less money at their disposal after the programme.

The Economic Capacity to Meet Essential Needs (ECMEN)^{25,26}

The economic capacity to meet essential needs (ECMEN) is a measure of the economic vulnerability of a population. It is defined as the percentage of households whose economic capacity is sufficient

²⁶ 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



 $^{^{\}rm 23}$ Also including purchases made through mobile money applications.

²⁴ 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.

²⁵ World Food Programme (WFP) essential Needs Assessment (December 2020)

to meet their essential needs, as measured through the minimum expenditure basket (MEB). Households are considered to have the economic capacity to meet their essential needs if their consumption expenditures exceed the minimum expenditure basket (MEB).

April and September minimum expenditure basket (MEB)²⁷ cost was used to calculate the ECMEN value during the baseline and endline assessment. The proportion of households whose spendings were equal to or above the MEB increased slightly from 14% at the baseline to 38% during the endline. As demonstrated in table 6 below, Baardheere, Belet Xaawo, Doolow and Galkacyo districts were found to have the highest percentage increase in the ECMEN values. A considerable decrease was found in Afgooye and Banadir districts while Balcad, Buur Hakaba, Diinsoor, Jamaaame, Jowhar, Owdweyne, Qansax Dheere and Waajid recorded ECMEN values lower than the endline aggregated value of 38%.

Table 6: Proportion of households whose spendings were equal to or above the MEB cost per assessed district.

District	Baseline	Endline
Afgooye	4%	1%
Baardheere	7%	80%
Baidoa	8%	16%
Balcad	6%	31%
Banadir	6%	3%
Belet Xaawo	5%	100%
Buuhoodle	6%	40%
Buur Hakaba	6%	16%
Diinsoor	7%	24%
Doolow	5%	100%
Gaalkacyo	6%	66%
Jamaame	1%	24%
Jowhar	6%	22%
Kismayo	6%	48%
Owdweyne	7%	35%
Qansax Dheere	7%	31%
Waajid	6%	13%
Weighted Total	14%	38%

Reduced Coping Strategies Index (rCSI)^{28,29}

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.³⁰

³⁰ Calculated according to the standards of the CWG M&E Workstream Recommended Indicators document.



²⁷ Somalia cash and markets quarterly dashboard (July-September 2022).

²⁸ 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 behaviors 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.

²⁹ 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.

As seen in Table 7 Afgooye, Baidoa, Banadir, Gaalkacyo Jaamame and Waajiid recorded the highest levels of average rCSI during the baseline. A considerable improvement in average rCSI was found in Baidoa, Buuhoodle, Doolow, Jowhar and Waajid 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 13.2 still indicates a relatively frequent use of severe coping strategies.

The rCSI includes the following coping strategies:³¹

- 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).

Table 7: Average rCSI score, based on reported coping strategies used over the 7 days prior to data collection by district.³²

	Average	Average rCSI
	rCSI Baseline	Endline
Afgooye	17.2	22.3
Baardheere	13.4	14.5
Baidoa	18.4	13.5
Balcad	13.9	12.1
Banadir	16.2	13.8
Belet Xaawo	10.9	21.6
Buuhoodle	12.2	8.1
Buur Hakaba	15.6	15.3
Diinsoor	15.5	14.7
Doolow	14.8	10.5
Gaalkacyo	18.3	15.8
Jamaame	16.3	14.1
Jowhar	15.7	10.4
Kismayo	12.7	10.9
Owdweyne	11.0	9.8
Qansax Dheere	14.9	15.9
Waajid	18.9	12.9
Weighted Total	15.6	13.2

³² 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.



³¹ The strategies are weighted, with the highest weight given to the most "severe" categories. The categories ranges between 1 and 3. The weighted frequency scores are summed up into one final score (rCSI) with a minimum value of 0 and maximum value of 56.

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.

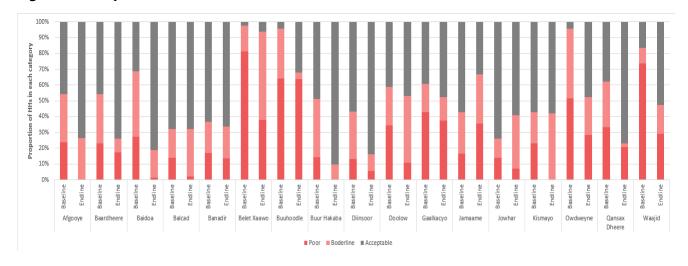
Table 8: Proportion of households in each FCS classification, based on reported food consumed in the 7 days prior to data collection.

	Baseline	Endline
Poor	31%	15%
Borderline	30%	18%
Acceptable	39%	67%

The proportion of households with a poor FCS decreased from 31% at the baseline to 15% at the endline. However, despite overall decrease in households with poor and borderline scores, in Belet Xaawo, Buuhoodle, Galkacyo, Jaamame, Owdweyne, Qansax Dheere and Waajid, the proportion of households with a poor FCS remained comparatively high (20% and above), which is above the overall endline score of 15%. 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 all the districts. A large increase was found in Baidoa (31% at the baseline and 81% at the endline), Owdweyne (4% at the baseline and 48% at the endline) and Buurhakaba (49% at the baseline and 90% at the endline)

Figure 10: 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 5.6, placing the overall HDDS in the medium dietary diversity threshold. Since the baseline, findings suggest that dietary diversity slightly increased among beneficiary households, with an average HDDS of 6 at the endline. Average HDDs increased greatly in Afgooye, Balcad and Wajid districts. On the other hand, a decrease in average HDDs was reported in Doolow and Kismayo districts.

Table 9: Average HDDS by district.33

District	Average HDDS	Average HDDS
	Baseline	Endline
Afgooye	5.8	6.6
Baardheere	6.3	6.5
Baidoa	6.4	6.5
Balcad	6.0	6.8
Banadir	5.8	6.5
Belet Xaawo	3.7	4.4
Buuhoodle	3.2	3.5
Buur Hakaba	6.4	6.5
Diinsoor	6.5	6.5
Doolow	5.9	5.6
Gaalkacyo	5.3	5.4
Jamaame	6.3	6.4
Jowhar	5.9	6.5
Kismayo	6.5	6.1
Owdweyne	3.3	3.7
Qansax Dheere	6.1	6.7
Waajid	3.8	5.3
Weighted Average	5.6	6.0

Table 10: Proportion of households per HDDS category.

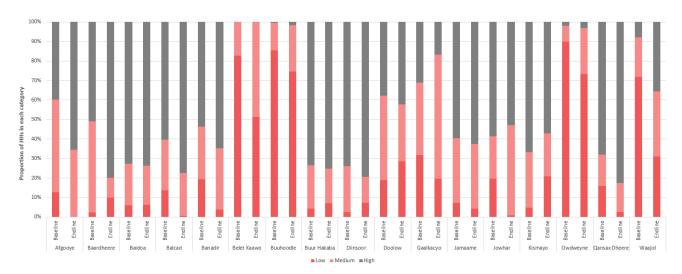
	Baseline	Endline
Low	25%	18%
Medium	24%	25%
High	51%	57%

 $^{^{33}}$ The average HDDS is classified as: ≤ 4 "low", $\geq 5 \leq 6$ "medium" and >6 "high".



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 slightly decreased from 25% at the baseline to 18% at the endline and the proportion of housholds with a high HDDS increased from 51% to 57% 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 11: Proportion of households per 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 11 above) it becomes apparent that there are 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 40% at the baseline to 65% at the endline), Waajid (where it increased from 8% at the baseline to 35% at the endline) and Baardheere district (where it increased from 51% at the baseline to 80% at the endline). Findings suggest that, while dietary diversity has generally improved, it remained considerably low in the districts of Belet Xaawo, Buuhoodle and Owdweyne. However, low HDDS increased in Baardheere (where it increased from 2% at the baseline to 10% at the endline), Buur Hakaba (where it increased from 4% at the baseline to 7% at the endline), Diinsoor (where it increased from 3% at the baseline to 7% at the endline) and Kismayo districts (where it increased from 5% at the baseline to 21% at the endline).

Livelihood Coping Strategies Index (LCSI)

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.³⁴

Table 11: Coping strategies included in the LCSI.³⁵

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 plan 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 plan to migrate to the new area within the next 6 months [agropastoral and pastoral]



³⁴ World Food Programme (January 2009). Emergency food security assessment handbook.

³⁵ 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.

Table 12: 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	13%	10%
Stress	41%	34%
Crisis	13%	27%
Emergency	33%	29%

Table 12 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 collection decreased from 13% of households at the baseline to 10% at the endline. In addition, the proportion of households in the "crisis" category increased from 13% at the baseline to 27% 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 household. Extreme drought has been experienced in the north leading to large movements of drought-displaced people to sites of internally displaced people (IDPs) in Daynile and Kahda districts of Banadir, Baidoa. Other districts affected include Lower Juba, Gedo and Bakool. 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. ³⁶

At the time of the baseline assessment, the three most commonly reported livelihood coping strategies were:

- 1. Purchased food on credit or borrowed food;
- 2. Borrowed money to buy food;
- 3. Spending savings.

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

- 1. Purchased food on credit or borrowed food;
- 2. Borrowed money to buy food;
- 3. Spending savings.

³⁶ Food and Agriculture Organization (October, 2022). Somalia Drought Update.



It should also be noted that the use of livelihood-based coping strategies reported by households varied greatly by district (see Figure 13 below). Baardhere (42%), Banadir (35%), Belet Xaawo (35%) and Diinsoor (39%) districts were found to have emergency level coping strategies higher than the overall average (29%) during the endline assessment. Households adopting stress level strategies reportedly decreased in Baidoa, Buhoodle and Owdweyne districts. The LCSI is an indicator used to understand 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. **A majority of the households (90%) reported having engaged in emergency, crisis or stress level coping strategies** in the 30 days prior to data collection. These households are likely to have eroded their overall resilience, hence increasing the likelihood exhausting their limited resources to afford the basic needs. Food access (92%) and healthcare (60%) were the top cited reasons for engaging in these coping strategies during the endline.

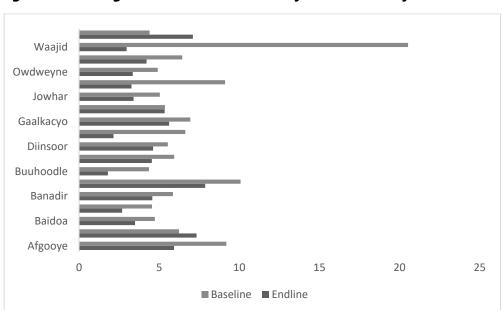
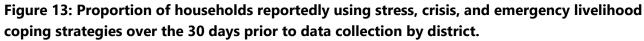
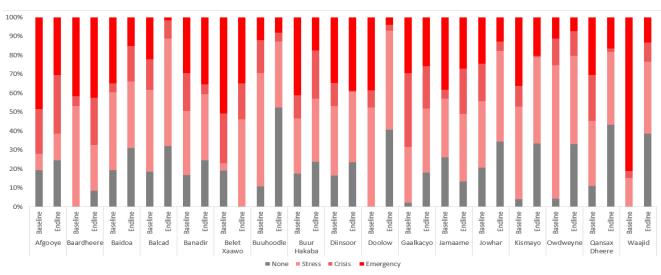


Figure 12: Average LCSI score of beneficiary households, by district.





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 decrease in the proportion of household expenditure on food items following reception of UCT, food purchases still accounted for nearly half (49%) of all monthly household expenditure at the endline. At the time of the baseline, average household spending on food was reportedly higher, accounting for 53% of all household expenditures. However, the spending proportion on food slightly decreased to 49% during the endline. During the endline, clothing formed part of the top-four reported expenditure categories. This is likely due 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.³⁷ At the same time, the average reported monthly household income increased from USD 99.6 at the baseline to USD 137.5 at the endline.³⁸

Table 13: Change in average amount spent by households on categories of items in the 30 days prior to data collection.³⁹

Expenditure Category	Baseline Average (USD)	Endline Average (USD)	Expenditure Change (USD): Baseline to Endline
Food	53.4	62.2	8.8
Debt repayment	11.3	21.7	10.4
Clothing	7.4	12.5	5.1
Medical services	6.2	14.0	7.8
Water, sanitation, and hygiene (WASH)	7.2	5.9	-1.3
Education	4.6	8.1	3.5
Fuel	3.2	4.0	0.8
Shelter	3.3	4.3	1.0
Rent	1.4	3.1	1.7
Khat	0.0	0.0	0.0
Other	1.8	2.9	1.1

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 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 13 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 reception of

³⁹ Please note that for clarity in visualization, 'other' in Figure 14 and Table 13 differ. In Figure 14, '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 13, "other" includes unspecified expenses and money spent on khat.



³⁷ Islamic Hijri calendar.

³⁸ The average monthly income included all sources of income, including cash received from aid organizations, agriculture, livestock, private business, casual labour, petty trade, wage labour, loans, gifts, remittances etc..

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, 14% of the interviewed households reportedly had some savings, which represents a 6% increase from the baseline. The proportion of households with debts during this period decreased slightly from 83% at the baseline to 77% at the endline. However, despite this decrease, households' average debt amounts seems to have slightly increased from USD 8.8 at the baseline to USD 11.4 during the endline assessment.

households' top reported reasons for taking debts at the time of data collection were:

- To acquire clothes;
- To access healthcare services;
- To improve livelihoods;
- 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.

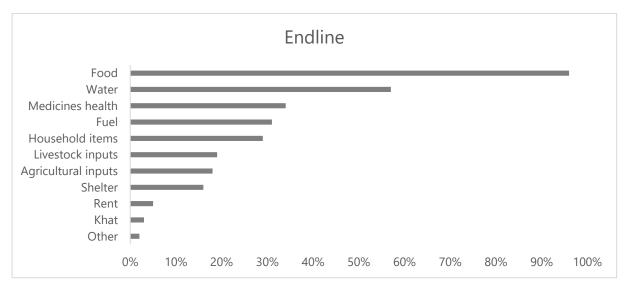
To capture any potential unintended negative effects of cash assistance on the SCC beneficiary households and their communities, households were asked several questions on the market price inflation during the endline assessment.^{40, 41} Overall, at endline, 28% of households reported perceiving that their household had been overcharged by vendors due to their beneficiary status, and 31% reported perceiving vendors more generally had increased their prices since the start of the transfers. Reports of vendors increasing their prices, either for the entire community or specifically overcharging beneficiary households, increased at the endline. Households who answered positively to either question were asked which goods they felt had increased in price. Their responses are provided in Figure 14 below.

⁴¹ 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.



⁴⁰ 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?

Figure 14: Items for which vendors reportedly increased prices since the transfers started, by %of households who reported perceiving vendors had increased their prices. (n=908 at the endline).42



For nearly all items assessed, the proportion of households perceiving vendors had raised prices increased at the endline compared to the baseline. Nearly all households (98% at the endline) who answered positively to either question, or both, reported an increase in the price of food. Additional market analysis and price monitoring would be needed to make any conclusive changes on price inflation in the locations included in the SCC programming.

Protection Index Score

The Protection Index Score⁴³ serves as a proxy indicator for the percentage of beneficiaries (disaggregated by sex, age, and livelihood zone) reporting that humanitarian assistance is delivered in a safe, accessible, accountable, and participatory manner". 44 The percentage of households responding positively to the relevant questions included in this score was 82% at the baseline and at 75% 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, nearly all (98%) assessed households reported believing that selection of beneficiaries was fair. Similarly, nearly all (99%) 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 (99%) assessed households reported not being aware of someone

^{&#}x27;Yes' is considered a positive response to all questions, except for question 5, for which a positive response would be a 'no' answer.



⁴² 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 do not add up 100.0%.

⁴³ The Protection Index Score is calculated according to the DG ECHO Protection Mainstreaming Guidance document provided by the Somali Cash Consortium. ⁴⁴ 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?

in the community being pressured or coerced to exchange non-monetary favours to get on the beneficiary list.

Some (19%) assessed households reported having raised any concerns on the assistance received to the NGO using any of the complaint response mechanisms available. Of the 19% who raised concerns, more than two-thirds (70%) of 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 CRM to voice concerns appears low, findings suggest that most households had not felt a need to use CRM in the first place (see Table 14).

Table 14: Most commonly reported reasons for not using CRM by % of households who reported not using CRM. (n=2366 at the baseline and n=2590 at the endline, respectively)

	Baseline (n=2,366)	Endline (n=2,590)
Fear of Negative Consequences	1%	0%
Lack of CRM knowledge	33%	21%
No concerns	67%	79%

Table 15: Aggregated Protection Index Score by district. 45

District	Baseline Score	Endline Score
Afgooye	79%	61%
Baardheere	68%	82%
Baidoa	79%	82%
Balcad	64%	75%
Banadir	68%	79%
Belet Xaawo	100%	96%
Buuhoodle	64%	68%
Buur Hakaba	82%	82%
Diinsoor	82%	79%
Doolow	71%	64%
Gaalkacyo	86%	86%
Jamaame	82%	82%
Jowhar	75%	57%
Kismayo	82%	75%
Owdweyne	68%	75%
Qansax Dheere	86%	79%

⁴⁵ 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)



Waajid	93%	79%
Weighted Average	82%	75%

As can be seen in the table above, the baseline average is slightly above the target while the endline average is below the target. At the baseline assessment, Baardheere, Balcad, Banadir, Buuhoodle and Owdweyne districts scored below the target value. At the endline assessment, Afgooye, Buuhoodle, Doolow and Jowhar districts scored below the target.

At the endline, households were given the opportunity to make comments or suggestions on how to improve the SCC programming. More than half (55%) 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:

Table 16: Among those households who provided comments on how to improve SCC programming (60% at the baseline and 55% at the endline) reported suggestions provided.⁴⁶

	Baseline (n=1,793)	Endline (n=1,776)
Flood relief	9%	14%
Medical infrastructure	39%	36%
Increase filed visits	27%	40%
Shelter support	40%	45%
In-kind food aid	67%	63%
In-kind NFI aid	12%	29%
Education infrastructure	52%	48%
Livelihood support	38%	40%
WASH support	32%	32%
Soap distribution	8%	7%
Additional assistance	21%	29%
Long term support	21%	16%
Disability support	6%	5%
Drought relief	8%	10%

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 (55% at the endline) to improve the programme. These households commonly suggested complementing the programming with medical infrastructure, increased field visits, in-kind aid, etc. (Table 16).

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

⁴⁶ 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 100.0%.



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.

Accountability

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 further asked to list all criteria they were aware of. If households were unable to list any of the selection criteria in this follow-up question, their initial answer was changed to 'no'.

Overall, at the baseline, about 33% of households were able to list at least one selection criteria, while 67% were unable to list any. Beneficiary households were most aware of the following five selection criteria: ⁴⁷

- Lack of income (83%);
- Lack of assets (54%);
- Disability of a household member (32%);
- Illness of a household member (28%);
- Older household members (21%).

Perception on Representation by Village Relief Council (VCR)

Regarding community representation, households were asked to score their perception of how well the Village Relief Committee (VRC) advocates for them or represents their belief. Almost all (97%) households answered that they felt that the VRC represents their interests and advocates on their behalf either 'well' or 'very well', while 3% of households reported feeling that they are represented 'poorly' or 'very poorly' and the remainder (1%) preferred not to answer this question.

Complain Response Mechanism (CRM) awareness

A slight increase was reported in the proportion of households who reportedly utilized the CRM platforms. This increased from 25% at the baseline to 31% during the endline. A majority (71%) of households reported being were aware of the existence of a dedicated NGO hotline, while another 43% reported that they knew they could directly talk to NGO staff during field visits or at their offices.

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 think that other members of their community are jealous of their household



⁴⁷ 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.

because they had received the cash transfer. Findings on reported community jealousy followed a similar trend as those on reported pressure to share UCT.

At the endline, of the 2% of households who reported experiencing community jealousy, demands constituted the primary consequence with 20% of households facing this consequence. They also reported facing insults (19%), violence (1%) and tensions (4%).

Non-monetary Pressure or Coercion

Table 17: Proportion of households reporting non-monetary pressure or coercion related to beneficiary status.

Are you aware of anyone in the community being pressured or coerced to exchange non-monetary favors in order to get on the beneficiary list, get registered, or receive the cash transfer?		
	Baseline	Endline
Prefer not to answer	2%	1%
Yes	0%	0%
No	98%	99%

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, 98% of households answered 'no' and 2% of households "preferred not to say". Due to the sensitive nature of this question, for the endline PDM assessments, the wording of this question was changed slightly to be more general to limit potential feelings of feeling uncomfortable among households and to capture any such event that may have taken place during a later phase of the programme. At the endline, none of the interviewed households confirmed this.

Other Negative Consequences

Table 18: Proportion of households reporting other negative consequences because of their beneficiary status.

Did you or any member of your household experience any other negative consequences as a result of your beneficiary status?		
	Baseline	Endline
No	99%	99%
Yes	0%	0%
Prefer not to answer	1%	1%

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 answer'. 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.

CONCLUSION

Against the backdrop of the **deep poverty, drought, and rising displacement,** there is a need for a holistic and up-to-date overview of the main humanitarian needs faced by communities in Somalia. Therefore, IMPACT Initiatives conducted a baseline and endline assessment among SCC beneficiary households to assess food security situation, income, and expenditure patterns before and after their receipt of three rounds of UCTs.

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 as short-term in nature. Potential long-term impact was not assessed through the scope of this assessment.

In addition, subjective indicators also suggested households were generally content with the programme. At the endline, almost all (98%) of the beneficiary households reported that the cash assistance enabled them to meet their basic needs. Nearly all households (89%) reported that cash was appropriate given the needs of their households, and all households preferred cash as a modality.

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 suggestion 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.

Despite the observed positive outcomes at the endline, findings need to be considered in line with the indications that humanitarian conditions might generally deteriorate in the upcoming months, due to the cumulative impact of the consecutive failed rainy seasons and an expected⁴⁸ fifth season of consecutive below-average rainfall from October to December (Deyr season),⁴⁹ particularly considering that the interviewed households rely, at least partially, on income from livestock and crop production, which have been hit hard by the compounding shocks, for instance through low crop yields coupled with the reduced access to surface water for livestock and human needs. ⁵⁰

⁴⁸ Famine Early Warning System Network (September, 2022).Somalia

 $[\]overline{}^{49}$ Deyr is the secondary rain season, from mid-September to November.

⁵⁰ REACH HoA Regional Drought and Remote Sensing Analysis (Feb 2023)