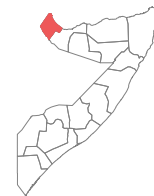


Joint Multi-Cluster Needs Assessment Awdal, Somalia

August 2019



CONTEXT

Somalia has been experiencing a multi-layered, complex, and protracted crisis over the past three decades; insecurity and conflict continue to exacerbate the effects of periodic natural shocks, such as droughts and flooding. The compound nature of the crisis influences displacement patterns and constrains the availability of resources, while the presence of armed groups severely impedes the level of access of humanitarian actors. There is an imperative for a harmonised humanitarian response plan to continue supporting drought- and displacement-focused interventions, and for continued nationally-representative needs assessments. To this end, REACH supported the Somalia Assessment Working Group and Somalia Information Management Working Group in conducting the third Joint Multi-Cluster Needs Assessment (JMCNA) in Somalia.

The JMCNA aims to facilitate a harmonised response plan at the operationally relevant district level; it relies on the coordinated efforts of partners to encourage joint planning, data collection, analysis and interpretation of results.

METHODOLOGY

Households were sampled at the district level using stratified cluster sampling with households in IDP settlements and non-IDP settlements as strata, a 90% confidence interval, a 10% margin of error, and a buffer of 15%. Data was collected between 23 June and 31 July 2019. Primary data was collected by means of a household-level survey that was co-designed with the humanitarian clusters in Somalia. Cluster leads outlined information gaps and the type of data required to inform their strategic plans. Key indicators were developed by REACH with the substantive input of participating partners, and subsequently validated by clusters. The analysis is based on an analytical approach proposed by REACH for the 2019 MSNA, which incorporates elements of the draft Joint Inter-sectoral Analysis Framework (JIAF). As part of this approach, findings for sectoral pillars (living standard gaps per sector) and cross-sectoral pillars (capacity gap, vulnerability, impact of the crisis) are generated and presented in this factsheet. Returnees and refugees were interviewed but since they were not sampled for, they are not included in the results in this factsheet.

To provide a local, context-specific overview, this factsheet presents a summary of findings of assessed settlements in Awdal region only. The nation-wide, sectoral factsheets are available [here](#).

Assessment sample

Households:	728
- IDP settlement:	72
- Non-IDP settlement:	650
- Returnee ¹ :	6
- Refugee ¹ :	0

Demographics

Female (49%)	Age	Male (51%)
1%	60+	1%
18% ■	18-59	18% ■
18% ■	6-17	21% ■
11% ■	0-5	11% ■

Households with women reportedly participating in expenditure decision-making: **82%**

Average household size: **6**

General household information

Reported proportion of number of household members engaged in paid work at the time of the data collection:

	No one	1 person	2 persons	3 persons or more
%	50%	48%	2%	0%

Proportion of households with at least one person who lost their job in the 3 months prior data collection: **2%**

Displacement

Top three reported reasons for leaving previous location^{2,3}:

- 1 Lack of food (not drought related) **52%**
- 2 Flooding **51%** →
- 3 Lack of health services **14%**

Top three reported reasons for coming to current location^{2,3}:

- 1 Presence of food distribution/food aid **41%**
- 2 Presence of education services **40%** ←
- 3 Availability of local food (market/cultivation) **20%**

Proportion of households with at least one pregnant and/or lactating woman:



Proportion of households with at least one person with chronic illness which lasted 3 months or longer at the time of the data collection:



Proportion of households who believe they can repay household debt over the next year:

Yes	27%
No	52%
Do not know	21%



Persons with disability

Proportion of households with at least one person with a disability and/or cognitive difficulties in the household⁴:



Proportion of households by category of disability⁴

%	categories
2%	No difficulty carrying out daily activities
2%	Minor difficulties carrying daily activities but does not need assistance or attention
3%	Some difficulties carrying daily activities and needs some assistance and attention
3%	A lot of difficulty carrying daily activities and needs quite a bit of assistance and attention
3%	Cannot carry out daily activities independently and needs permanent assistance and attention

⁴For e.g. mobility, hearing, sight, communicating, etc. which impacts their ability to carry out daily activities such as working, studying, walking, getting dressed, remembering.

¹While refugee and returnee households were encountered during data collection and surveyed, they were not included as strata in the sample. As a result, they were excluded from the analysis. The results in the factsheet are based on a total of 722 households interviewed (displaced and non-displaced) and no inferences may be drawn on refugee and returnee households.

²The respondents were able to select only two responses.

³Findings related to 72 IDP households.

⁴Proportion of the overall population.



WATER, SANITATION & HYGIENE (WASH) LIVING STANDARDS GAP (LSG)

JMCNA | 2019

Awdal

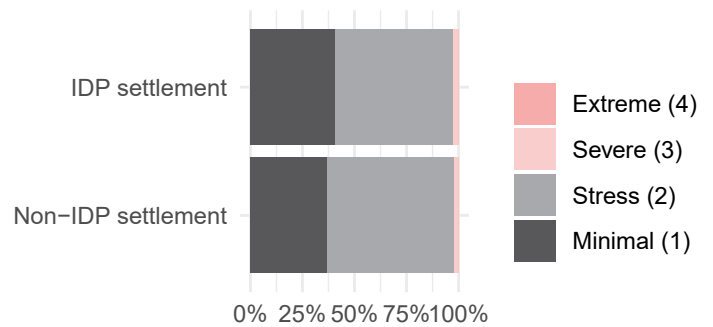
% of households per WASH LSG severity score:



% of households with a WASH LSG severity score of at least 3, per population group:



% of households per WASH LSG severity score, per population group:



The WASH severity score is comprised of the following (composite) indicators: 1) access to an improved water source, 2) access to sufficient water, 3) safe storage of water, 4) latrine use, 5) access to safe and dignified latrines, 6) access to environmental sanitation, 7) availability of hygiene products 9) access to hand-washing facilities, and 10) accountability to affected populations regarding the participations of communities in the design and implementation of WASH programming. The WASH severity score for assessed households in Awdal was primarily driven by a lack of access to an improved water source and dignified latrines.

Core findings related to WASH

Most common source of drinking water reported by households:

IDP settlement	Piped System	63%
Non-IDP settlement	Piped System	40%

IDP settlement

Non-IDP settlement

51% | Proportion of households reporting not having access to latrines: | **37%**

IDP settlement | Non-IDP settlement

20% | Proportion of households reporting lack of enough water for drinking and cooking: | **18%**

62% | Proportion of households reporting no access to soap: | **28%**

Type of latrine households have access to¹:

IDP settlement

Non-IDP settlement

29%	Flush to the open	12%
1%	Flush to a tank	28%
42%	Pit latrine with slab	18%
24%	Pit latrine without slab	41%

Proportion of households reporting a change in the amount they paid for water:

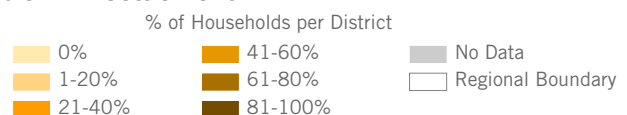
IDP settlement	Non-IDP settlement
19% Amount has increased	72%
76% No change	22%
5% Amount has decreased	4%

% of households with a WASH LSG severity score of at least 3, per district:



% of IDP settlement

% of Non-IDP settlement



IDP settlement	Monthly water expenditure, reported by households	Non-IDP settlement
68%	Less than 10\$	44%
14%	11-20\$	35%
11%	21-30\$	16%
6%	31-40\$	2%
1%	41-50\$	0%
1%	50+\$	1%
0%	Don't know	2%

¹Findings related to 344 households that reported having access to private or shared latrine



HEALTH LIVING STANDARDS GAP (LSG)

JMCNA | 2019
Awdal

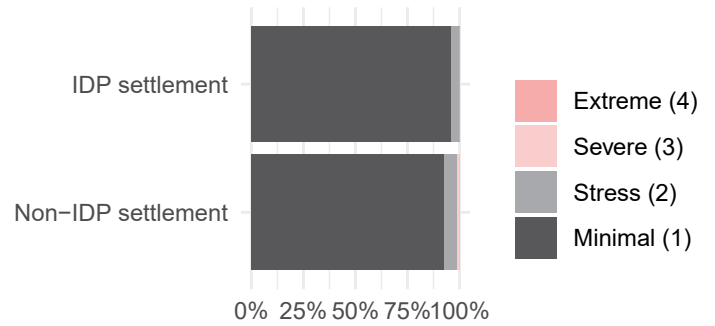
% of households per health LSG severity score:



% of households with a health LSG severity score of at least 3, per population group:

IDP settlement **0%**
Non-IDP settlement **1%**

% of households per health LSG severity score, per population group:



The health LSG severity score is comprised of the following indicators: 1) the burden of disease for children under 5, pregnant and lactating women, and adults, 2) access to treatment, 3) the prevalence of mental health issues, 4) vaccination coverage, 5) the availability of healthcare, 6) access to healthcare, and 7) the type of healthcare facilities that households visit. Findings indicate that the health LSG severity score for households in assessed communities in Awdal was primarily driven by cost of healthcare services and the limited availability of health care services.

Core findings related to healthcare:

IDP settlement	Non-IDP settlement
56%	46%
Proportion of households reporting they were not able to access a healthcare facility for children:	
48%	44%
Proportion of adults reporting no access to a healthcare facility:	

IDP settlement	Non-IDP settlement
41%	40%
Proportion of households reporting they had access to mobile health outreach:	
Proportion of pregnant or lactating women in the households who have suffered pre or post-partum complications in the six months prior to data collection ⁵ :	

Average travel time to the nearest health facility reported:

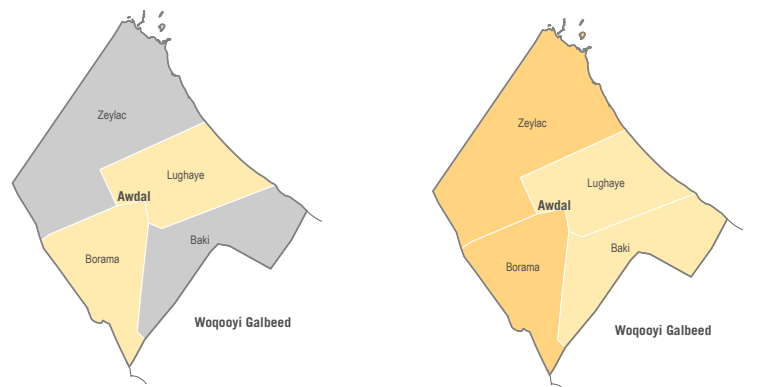
	Less than 15 minutes	15-30 minutes	30-60 minutes	1-3 hours	More than 3 hours
IDP settlement	37%	27%	25%	11%	1%
Non-IDP settlement	44%	25%	15%	6%	10%



Of the **34%** of households reporting at least one member with perceived mental health issue(s), main health profiles reported by households:

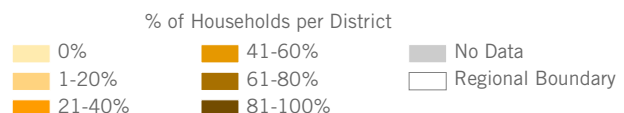
IDP settlement	Categories	Non-IDP settlement
0%	At least 5 issues relating to Depression or at least 3 issues relating to Schizophrenia	0%
0%	At least 3 issues relating to Depression or at least 2 issues related to Schizophrenia	1%
0%	At least 5 mental health stressors	0%
0%	At least 3 mental health stressors and history of chaining	0%
3%	At least 3 mental health stressors	2%
6%	At least 2 mental health stressors	4%
1%	One issue reported and history of chaining	3%
90%	One issue reported	90%

% of households with a health LSG severity score of at least 3, per district:



% of IDP settlement

% of Non-IDP settlement



⁵Findings related to 93 households with pregnant/lactating household members.



SHELTER LIVING STANDARDS GAP (LSG)

JMCNA | 2019
Awdal

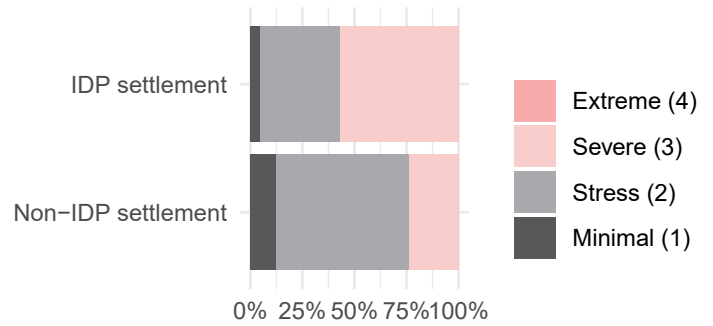
% of households per shelter LSG severity score:



% of households with a shelter LSG severity score of at least 3, per population group:

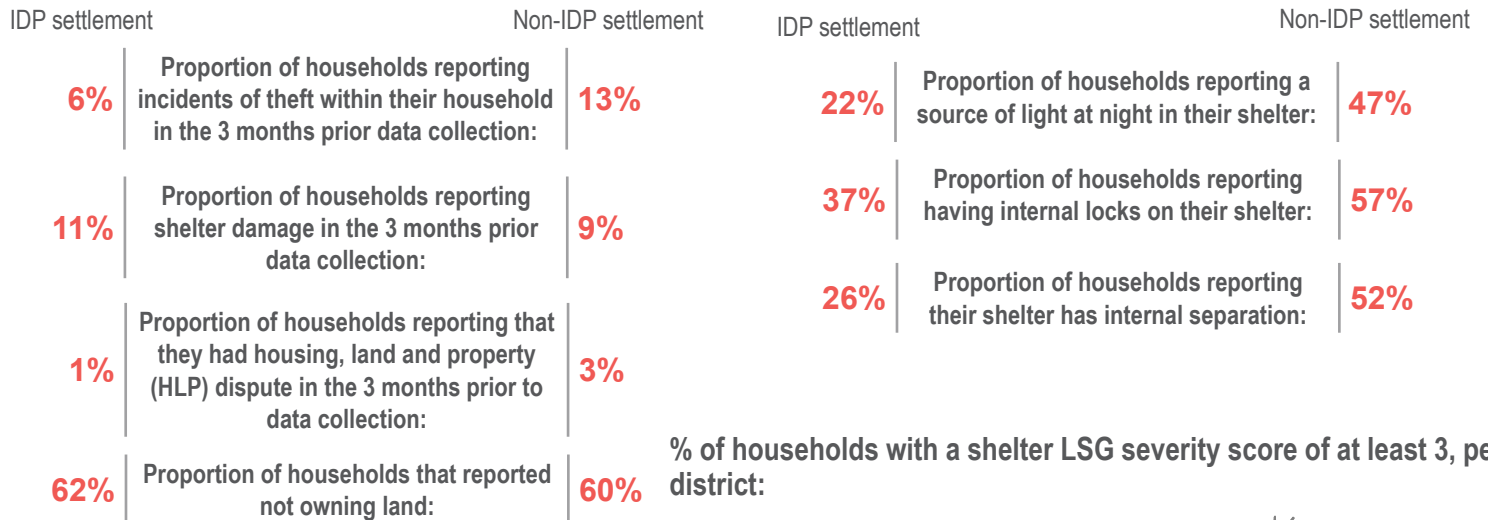


% of households per shelter LSG severity score, per population group:



The shelter and NFI severity score is composed of the following indicators: 1) shelter occupational density, 2) shelter quality measured by means of proxies such as primary construction materials for the structure, walls, roof, door, and floor, 3) security conditions within the shelter, 4) long-term shelter damage, 5) security of tenure and housing, land, and property issues, and 6) possession of basic NFIs. The shelter and NFI LSG score in assessed communities in Awdal was primarily driven by shelter damage and security of tenure indicators.

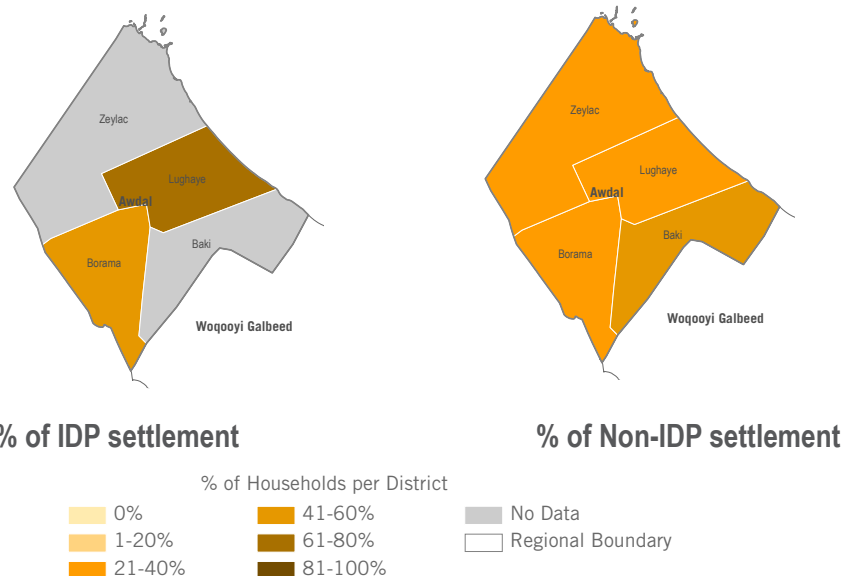
Core findings related to shelter:



Proportion of households reporting access to NFIs in usable condition:

IDP settlement	Non-IDP settlement
55%	63%
33%	54%
60%	63%
66%	67%
75%	87%
47%	59%

% of households with a shelter LSG severity score of at least 3, per district:





EDUCATION LIVING STANDARDS GAP (LSG)

JMCNA | 2019
Awdal

% of households per education LSG severity score:

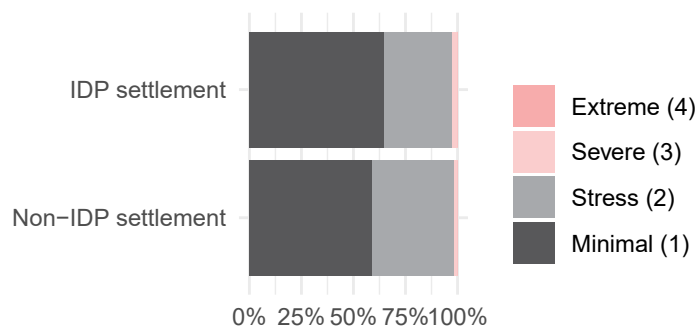


0% Extreme (severity score 4)
2% Severe (severity score 3)
39% Stress (severity score 2)
59% No or minimal (severity score 1)

% of households with an education LSG severity score of at least 3, per population group:

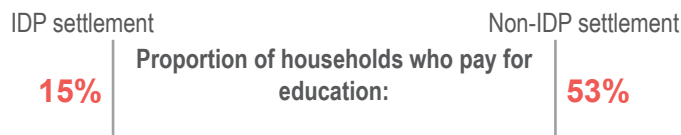
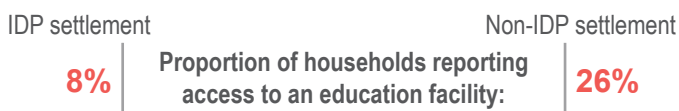


% of households per education LSG severity score, per population group:



The education LSG score is comprised of the following (composite) indicators: 1) number and type of highest educational degrees in the household (proxies the long-term effects of crisis), 2) enrolment, attendance levels and reasons for dropping out of school (proxy the short-to-mid-term disruption of education), 3) availability of education, and 4) access to education measured by the time taken to the nearest education facility and the ability to access the facility's premises. The education LSG scores in assessed communities in Awdal were primarily driven by education levels and attendance rate in the previous year indicators.

Core findings related to education



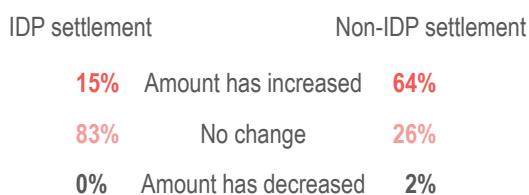
Proportion of households reporting children dropped out of school in the 12 months prior the data collection⁶:

	All	Some	None	Do not know
IDP settlement	13%	36%	50%	1%
Non-IDP settlement	21%	18%	58%	3%

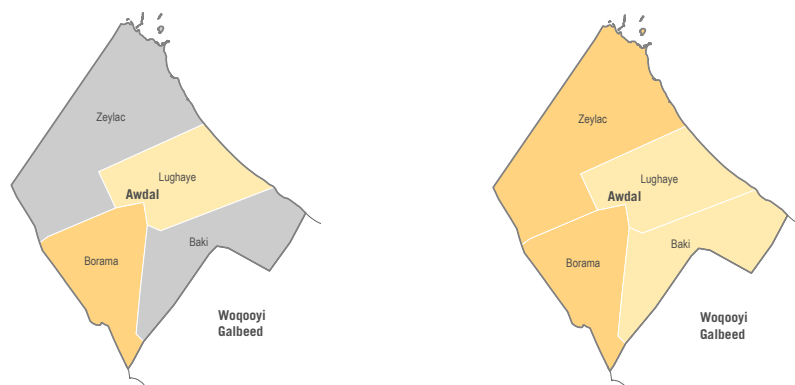
Average travel time to the nearest education facility reported:

	Less than 15 minutes	15-30 minutes	30-60 minutes	1-3 hours	More than 3 hours
IDP settlement	51%	30%	14%	4%	1%
Non-IDP settlement	62%	22%	10%	4%	2%

Proportion of households reporting a change in the amount they paid for education in the 3 months prior to data collection⁷:



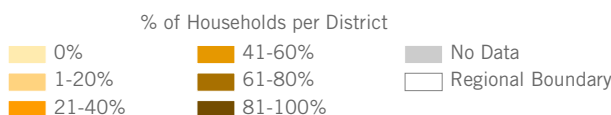
% of households with an education LSG severity score of at least 3, per district:



IDP settlement	Average money spent on education in the 3 months prior data collection ⁷ :	Non-IDP settlement
61%	Less than \$10	38%
34%	\$10-\$50	47%
5%	\$50-\$100	5%
0%	More than \$100	1%
0%	Don't know	0%

% of IDP settlement

% of Non-IDP settlement



⁶Findings related to 572 households with school-aged children

⁷Findings related to 379 households that reported paying for education



PROTECTION LIVING STANDARDS GAP (LSG)¹

JMCNA | 2019
Awdal

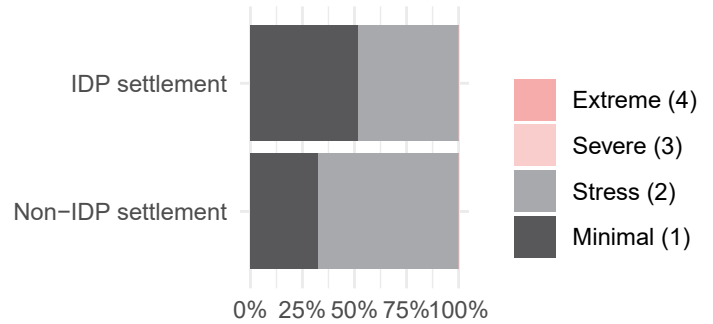
% of households per protection LSG severity score:



0% Extreme (severity score 4)
0% Severe (severity score 3)
67% Stress (severity score 2)
33% No or minimal (severity score 1)

The protection LSG score measures a household's general protection needs as well as their needs related to child protection, housing, land, and property (HLP), gender-based violence (GBV) and unexploded ordnance (UXO). The score is calculated on the basis of the following (composite) indicators: 1) freedom of movement, 2) family separation, 3) safety and security concerns, 4) hazardous or exploitative work, 5) HLP issues such as ownership, documentation, disputes, and the use of resolution mechanisms, 6) recourse for GBV and satisfaction with and use and awareness of referral pathways, 7) rule of law, 8) child protection and injuries to children, 9) exploitation, 10) representation of women, and 11) intra-communal relations. The protection LSG score for households in assessed communities in Awdal was primarily driven by HLP and sexual and economic exploitation indicators.

% of households per protection LSG severity score, per population group:



Core findings related to protection

IDP settlement

Non-IDP settlement

3% Proportion of households reporting separation of family members in the three months prior to the assessment: **4%**

8% Proportion of households reporting lack of freedom of movement in their community: **8%**

Proportion of households per degree of concern about safety and security issues in the 3 months prior the assessment:

	Always			Sometimes			Never			
	0%	3%	97%	0%	3%	97%	0%	3%	97%	
IDP settlement	Theft/harassment	0%	3%	97%	0%	2%	98%	0%	1%	99%
	Light injuries	0%	2%	98%	0%	3%	97%	0%	2%	99%
	Grave injuries	0%	1%	99%	0%	2%	98%	0%	3%	97%
	Sexual violence	0%	3%	97%	0%	2%	98%	0%	3%	97%
	UXO ¹	0%	2%	99%	0%	3%	97%	0%	1%	99%
Non-IDP settlement	Risk of death	0%	1%	99%	0%	3%	97%	0%	2%	98%
	Theft/harassment	0%	3%	97%	0%	3%	96%	0%	2%	98%
	Light injuries	0%	3%	96%	0%	2%	98%	0%	3%	97%
	Grave injuries	0%	2%	98%	0%	2%	98%	0%	3%	97%
	Sexual violence	0%	2%	98%	0%	3%	97%	0%	2%	98%

IDP settlement

Non-IDP settlement

7% Proportion of households that reported there being a women representation group at the time of data collection: **14%**

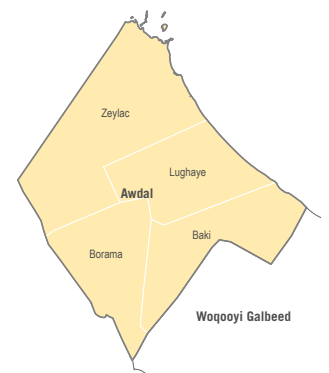
51% Proportion of households reporting they had access to judicial remedy: **42%**

28% Proportion of households reporting children having access to child friendly space: **29%**

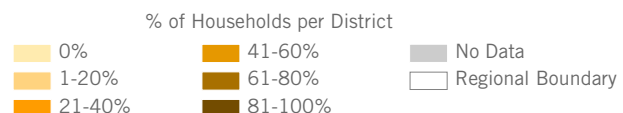
% of households with a protection LSG severity score of at least 3, per district:



% of IDP settlement



% of Non-IDP settlement



¹Due to sensitivities around asking protection questions in a household survey setting, it is highly likely that concerns are under-reported so these findings should be considered as conservative estimates.

²Unexploded ordnance (UXO) unexploded bombs or explosive remnants of war (bombs, shells, grenades and land mines) that did not explode when they were employed and still pose a risk of detonation.

% of households with a CG severity score of at least 3: 4%

see Annex for details on methodology

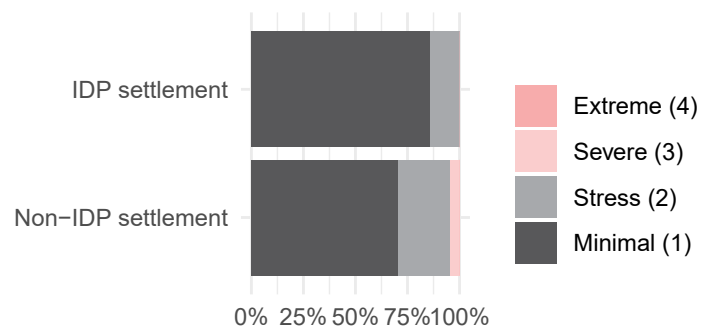
% of households per CG severity score:



% of households with a CG severity score of at least 3, per population group:

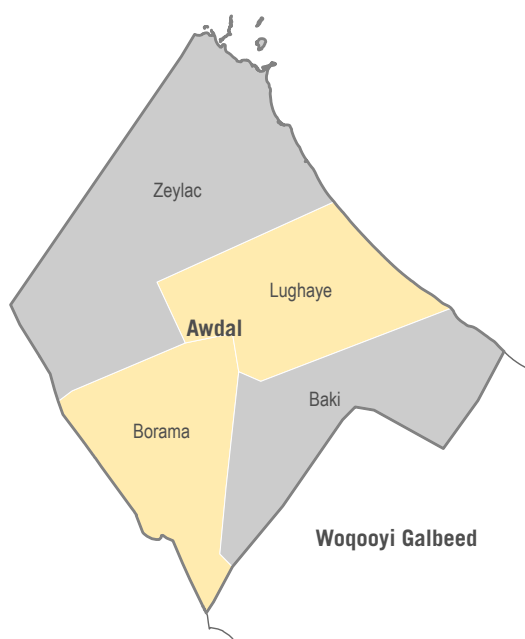


% of households per CG severity score, per population group:

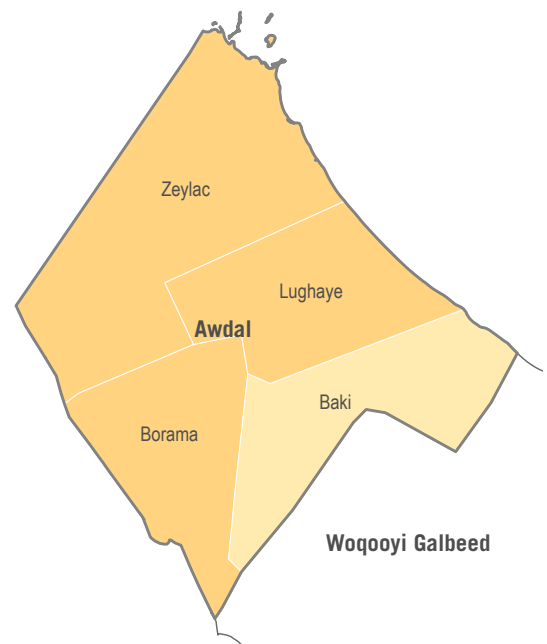


The capacity gap (CG) score measures a household's resort to negative and/or unsustainable coping strategies to meet basic needs in the 3 months prior to data collection when unable to access water, sanitation, hygiene, food, shelter, non-food items, education, and healthcare. It is essential to measure capacity gaps as households may maintain living standards precisely because of their use of negative or unsustainable coping strategies. Strategies used by households are accorded a severity score depending on their level of (ir)reversibility or sustainability, and their level of harmfulness to the well-being and dignity of individuals. The CG severity score for households in assessed communities in Awdal was primarily driven by health and sanitation related coping scores.

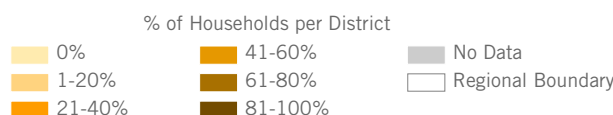
% of households with a CG severity score of at least 3, per district:



% of IDP settlement



% of Non-IDP settlement





VULNERABILITIES

% of households with a vulnerability severity score of at least 3: **16%**

see Annex for details on methodology

% of households per vulnerability severity score:

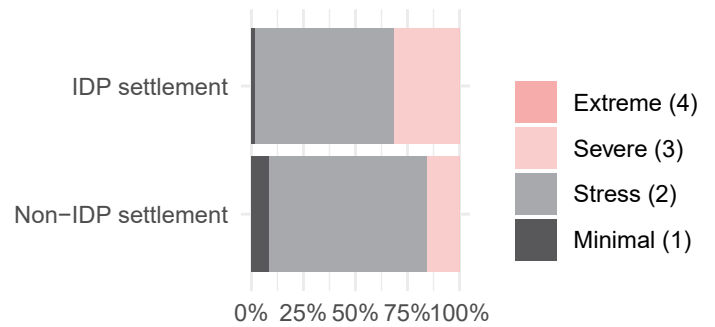


0%	Extreme	(severity score 4)
16%	Severe	(severity score 3)
76%	Stress	(severity score 2)
9%	No or minimal	(severity score 1)

% of households with a vulnerability severity score of at least 3, per population group:

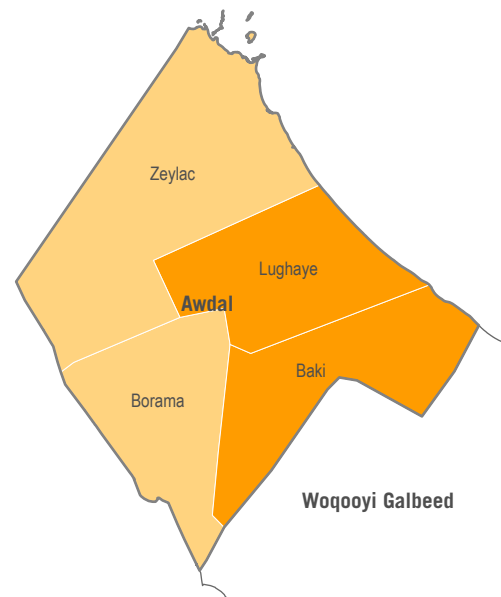
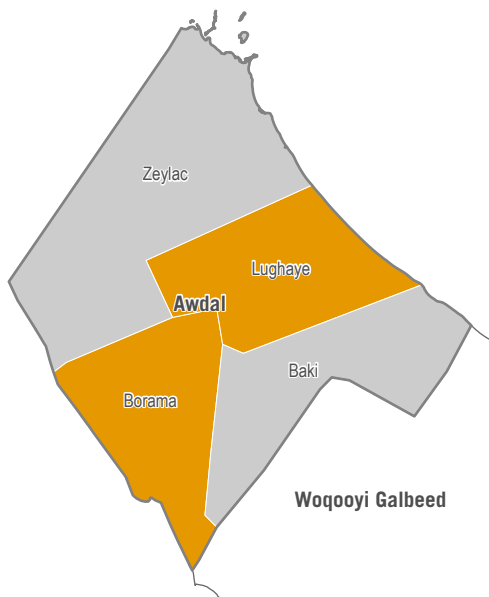
IDP settlement	31%	
Non-IDP settlement	16%	

% of households with a vulnerability severity score of at least 3, per population group:



The vulnerability score measures the exposure of households to the impact of a crisis. Indicators used to measure vulnerability include 1) household composition: vulnerable heads of households and primary income-earners, chronically-ill persons, pregnant and lactating women, and persons with disabilities, 2) possession of legal documentation, 3) dependency-levels measured by age-and work-dependency ratios as well as time spent on caregiving tasks, 4) poverty levels measured by household income per capita and debt-income ratios, 5) level of household expenditure on basic goods and services, and 6) length of displacement. The vulnerability score for households in assessed communities in Awdal was driven by vulnerable heads of households score.

% of households with a vulnerability severity score of at least 3, per district:



% of IDP settlement

	0%
	1-20%
	21-40%

% of Households per District

	41-60%
	61-80%
	81-100%

	No Data
	Regional Boundary

% of Non-IDP settlement

% of households with an impact severity score of at least 3: 0%

see Annex for details on methodology

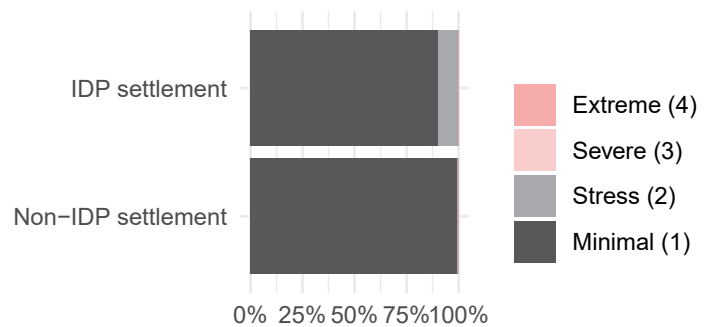
% of households per impact severity score:



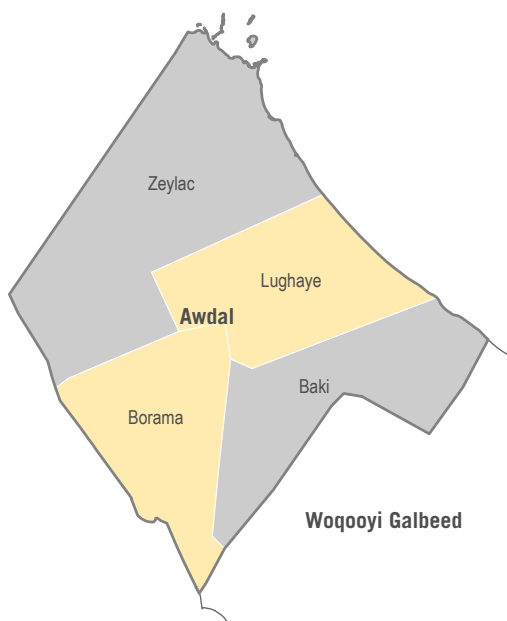
0%	Extreme	(severity score 4)
0%	Severe	(severity score 3)
1%	Stress	(severity score 2)
99%	No or minimal	(severity score 1)

The impact severity score measures the impact of the crisis. Indicators for impact on households include: 1) residing in a drought- or 2) conflict-prone environment, measured by the mean anomaly of evapotranspiration and the number of attacks within a 10km radius of households, 3) separation of family members, 4) loss of employment, 5) reasons for displacement, and 6) damage to shelters. In addition, the Integrated Phase Classification is used as a proxy for the impact on systems and services 7) and barriers to access humanitarian assistance is used as an indicator to estimate the impact on aid delivery. The impact severity score for assessed communities in Awdal was primarily driven by the impact of drought and conflict.

% of households per impact severity score, per population group:



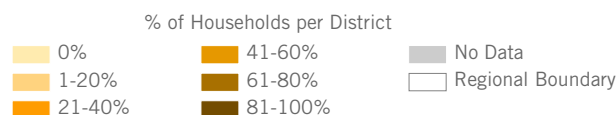
% of households with an impact severity score of at least 3, per district:



% of IDP settlement

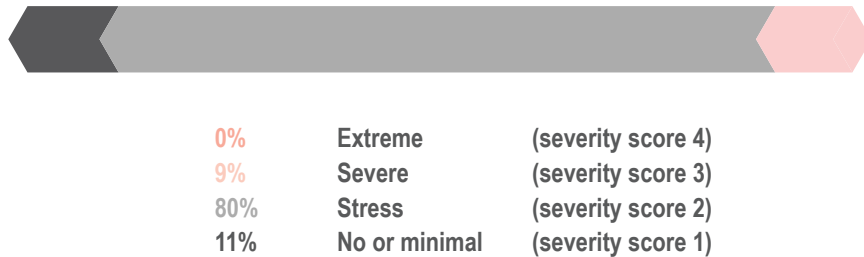


% of Non-IDP settlement



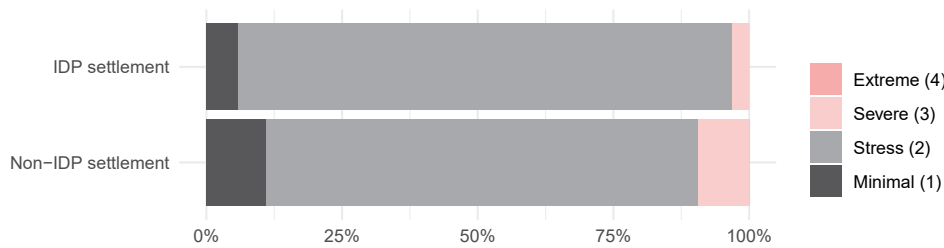
% of households with a MSNI severity score of at least 3: 9%

% of households per MSNI severity score:

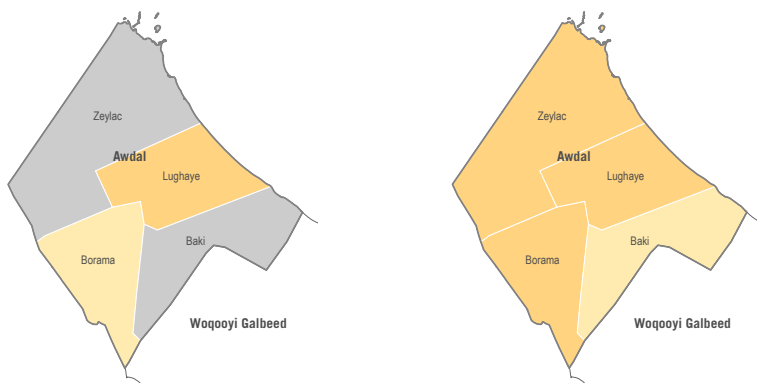


The MSNI is a measure of a household's overall severity of humanitarian needs. It is composed of the scores of three independent but inter-acting pillars: living standard gaps, capacity gaps (use of negative coping mechanisms) and impact of the crisis. It aims to estimate intensity (in terms of the severity of humanitarian needs) and magnitude (in terms of the proportion of households in each severity category) of the crisis.

% of households per MSNI severity score, per population group:



% of households with a MSNI severity score of at least 3, per district:



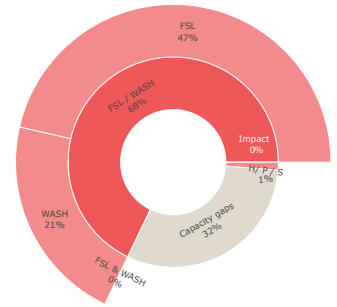
% of IDP settlement

% of Non-IDP settlement



see Annex for details on methodology

% of households with a MSNI severity score of at least 3, per primary driver of score:



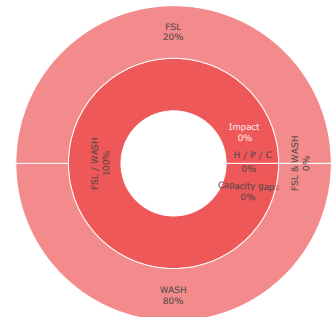
see Annex for details on how to read sunburst graphs

% of households with a MSNI severity score of at least 3, per population group:

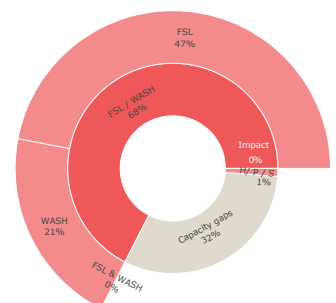
IDP settlement **3%**
Non-IDP settlement **9%**

% of households with an MSNI severity score of at least 3 per primary driver, per population group:

IDP settlement



Non-IDP settlement



see Annex for details on how to read sunburst graphs

¹The MSNI is an analytical approach proposed by REACH for the 2019 MSNAs, which incorporates some elements of the draft JIAF. The MSNI serves as an interim proposed solution for inter-sectoral analysis until the endorsed JIAF model becomes available.

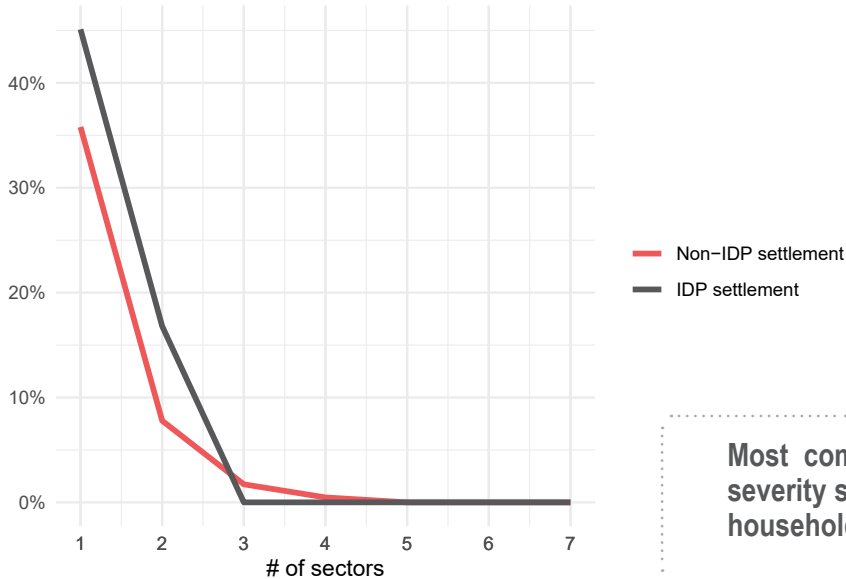


% of households with at least one LSG severity score of at least 3:

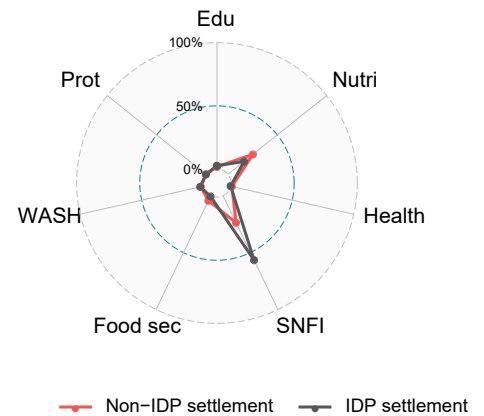
46%

see Annex for details on methodology

% of households with LSG severity scores of at least 3 in one or more sectors, per population group:

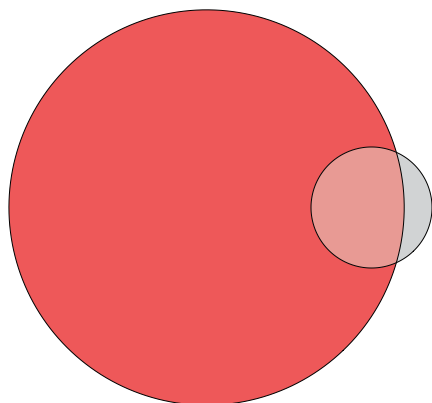


% of households with sectoral LSG severity scores of at least 3, per population group:



Most common needs profile of households with LSG severity scores of at least 3 in one or more sectors (% of households):

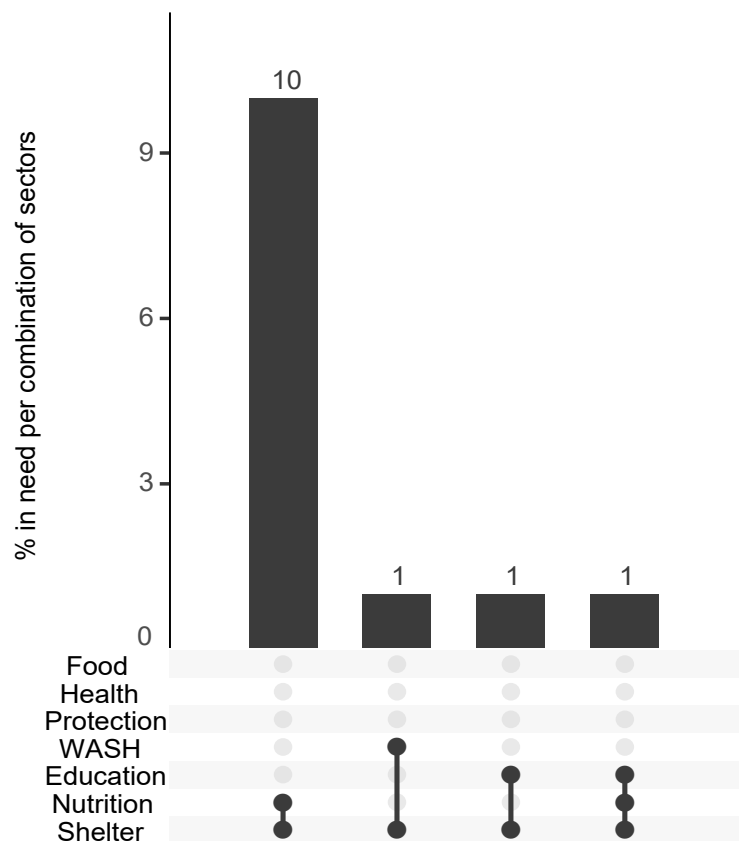
47% of households were found to have at least one LSG severity score and/or a CG severity score of at least 3:



43% of households were found to have at least one LSG severity score of at least 3 but a CG severity score lower than 3;

3% of households were found to have both at least one LSG severity score and a CG severity score of at least 3;

1% of households were found to have a CG severity score of at least 3, but no LSG severity scores higher than 3.



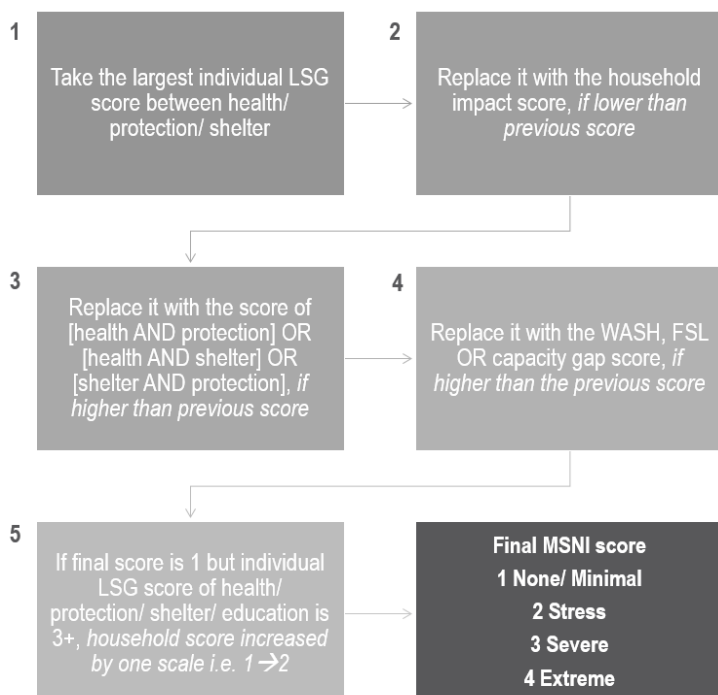


The overall JMCNA was conducted in 943 settlements, covering 17 of 18 regions, and 51 out of 74 districts. Some areas remained inaccessible due to security concerns, primarily in the South Central and South West States. Two important limitations of the assessment are the inaccessibility of certain areas and the potential bias in privileging surveys in urban areas relative to rural areas due to reasons relating to security, logistics, and access. A total of 10,487 households were surveyed. The survey results are representative for IDP settlement and Non-IDP settlement households; results are not representative for refugee and returnee households as the sampling frame was not stratified for those two population groups, therefore, refugee and returnee households were not included in this output. Households were sampled at the district level using stratified cluster sampling with probability proportional to population size, with displaced and Non-IDP settlement households as strata, a 90% confidence interval, a 10% margin of error, and a buffer of 15%. Data was collected between 23 June and 31 July 2019. In certain districts, two-stage simple random sampling was used instead of stratified cluster sampling for large urban centres as it proved to be more efficient and logistically-feasible for data collection. Primary data was collected by means of a household-level survey designed with the participation of the humanitarian clusters in Somalia. Cluster leads outlined information gaps and the type of data required to inform their strategic plans. Key indicators were developed by REACH with the substantive input of participating partners, and subsequently validated by clusters. REACH drafted the household survey through an iterative consultation process with cluster partners and OCHA.

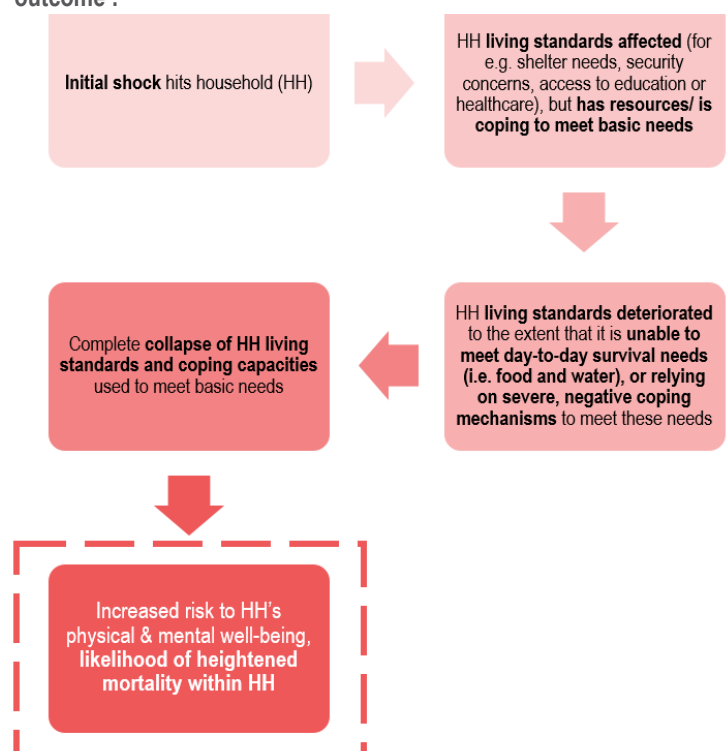
The draft Joint Inter-sectoral Analytical Framework (JIAF) was used as a basis for the analysis of multi-sectoral needs. The JIAF builds on the examination of the underlying trends, drivers and pre-existing vulnerabilities as a first step, followed by an examination of the impact of the crisis on populations, systems and services, and access to humanitarian aid, and living standard gaps and capacity gaps. Vulnerabilities are defined as the pre-existing, underlying factors i.e. the processes or conditions that influence the degree of the shock and influence exposure, vulnerability or capacity of the affected household. Impact refers to the primary and secondary effects of the event/ shock on the populations, systems and services, and humanitarian access. Living standard gaps measure the ability of a household to meet their basic needs in terms of quality, availability, access, and use of basic services, while capacity gaps measure a household's use of negative coping strategies to overcome gaps in their living standards and meet basic needs. A decision tree approach was then used to combine the cluster-specific scores of the living standard gaps and capacity gaps. The multi-sectoral needs index (MSNI) is a measure indicating the likelihood that a household will tend to have a heightened level of morbidity or mortality. The MSNI was calculated by first identifying the indicators and thresholds to measure pre-existing vulnerabilities, impact of the crisis, living standard gaps, and capacity gaps. Second, households were classified in each aforementioned pillar by using a combination of a decision-tree and a scoring approach. Finally, the overall severity was estimated using a decision-tree approach. The decision-tree approach used for estimating the MSNI is based on the assumption that food security and WASH needs are most likely to be the last to be eroded as they pertain to essential basic needs before a household starts to experience heightened morbidity or mortality as a result of the crisis. Therefore, food security and WASH needs are accorded priority within the decision-tree. However, severe needs occurring individually or jointly with health, protection, and shelter could also exacerbate the severity of needs. Finally, capacity gap scores are also factored in as a household may maintain living standards due to their recourse to negative coping strategies.

For a more detailed overview of the methodology and a comprehensive list of all the composite indicators that were used, you can access the terms of reference (ToR) [here](#). The indicators and their respective thresholds are included in the annex section of the ToR, page 107-129.

MSNI decision tree :



Rationale for MSNI decision tree - progressive deterioration of a household's situation towards the worst possible humanitarian outcome :





ANNEX 2: HOW TO READ A SUNBURST DIAGRAM

The sunburst diagram shows hierarchical data. Every level of the hierarchy is represented by one ring or circle with the innermost circle as the top of the hierarchy.

The innermost circle represents the proportion of households categorised with a MSNI severity score of at least 3 (or, in the case of groups/areas of particular concern, the proportion of households categorised with the highest MSNI severity score).

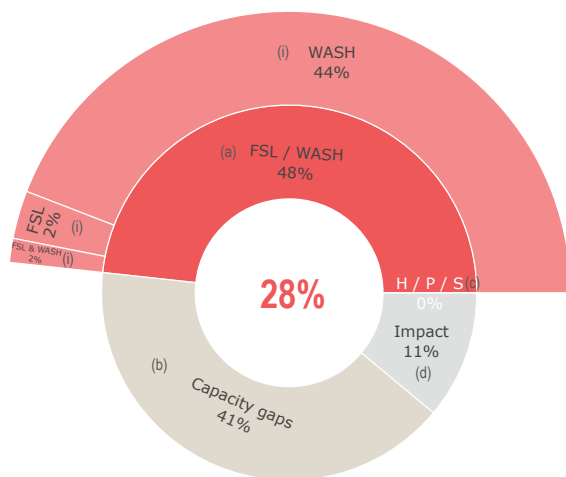
The ring immediately surrounding the innermost circle shows the proportion of households whose MSNI severity score (of at least 3) was **primarily** driven by:

- a) Living Standard Gap (LSG) in food security/ livelihoods and/or WASH; OR
- b) Capacity gap; OR
- c) Co-occurring LSGs in health and shelter, or health and protection, or shelter and protection; OR
- d) LSG in health, or shelter, or protection and have been severely impacted by the event/shock;

The outer ring breaks down the primary drivers of the MSNI severity score (above) even further, by showing the breakdown of the proportion of households:

- i. Within a) (above) whose needs were driven by an LSG in food security, or WASH, or both;
- ii. Within c) whose needs were driven by co-occurring LSGs in either health and shelter, or health and protection, or shelter and protection, or all three sectors
- iii. Within d) whose needs were driven by an LSG in health, or shelter, or protection, in addition to an impact of the event/shock on households.

Example:



“In Banadir, 28% of households were found to have severe or extreme humanitarian needs (MSNI severity score 3 or 4). For approximately half (48%) of these households, this score was driven by a living standards gap (LSG) in FSL and/or WASH, while the needs of 41% of households were driven primarily by capacity gaps, indicating high reliance on coping strategies to cover needs. 11% of households have their scores primarily driven by the impact of the shock and a LSG in health, or shelter, or protection. 44% of all households had needs in WASH while 3% had needs in FSL and 2% had co-occurring needs in WASH and FSL.”

ASSESSMENT CONDUCTED IN THE FRAMEWORK OF:

JMCNA | 2019
Awdal

Somalia Assessment Working Group
Somalia Information Management Working Group

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- | | | | |
|----|-------------------|----|-------------------|
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| 2 | ARC | 14 | SAF UK |
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| 7 | Islamic relief | 19 | Somali Aid |
| 8 | MCA network | 20 | SOS |
| 9 | Mercy corps | 21 | UNHCR |
| 10 | NCA | 22 | WOCCA |
| 11 | NRC | 23 | World vision |
| 12 | Oxfam | 24 | WRRS |

About REACH:

REACH Initiative facilitates the development of information tools and products that enhance the capacity of aid actors to make evidence-based decisions in emergency, recovery and development contexts. The methodologies used by REACH include primary data collection and in-depth analysis, and all activities are conducted through inter-agency aid coordination mechanisms. REACH is a joint initiative of IMPACT Initiatives, ACTED and the United Nations Institute for Training and Research - Operational Satellite Applications Programme (UNITAR-UNOSAT).