Joint Multi-Cluster Needs Assessment Middle Shabelle, Somalia



August 2019

CONTEXT

Somalia has been experiencing a multilayered, 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 droughtand 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.

General household information

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

%	67%	29%	2%	2%
	No one	1 person	2 persons	or more
				3 persons

Proportion of households with at least one person who lost their job in the 3 months prior data collection: 13%

Displacement

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

- Arrival of armed groups 1
- Actual conflict in community 2
- 3 Lack of livelihood opportunities/job

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

- No conflict 1
- 2 Presence of food distribution/food aid
- 3 Availability of work/ income opportunities

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 295 households interviewed (displaced and non-displaced) and no inferences may be drawn on refugee and returnee households.

49%

18%

74%

34%

22%



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 householdlevel 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.

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	36%
No	18%
Do not know	46%



To provide a local, context-specific overview, this factsheet presents a summary of findings of assessed settlements in Middle Shabelle region only. The nation-wide, sectoral factsheets are available here.

Assessment sample

Households:		300
- IDP settlement:		37
- Non-IDP settleme	nt:	258
- Returnee ¹ :		0
- Refugee ¹ :		5
I Demographics	5	
Female (47%)	Age	Male (53%)

Households w reportedly pa in expenditur maki	articipa e decis	ting		Average sehold siz 6	e:
14	%	0-5		15%	
15%		6-17		17%	
16%		18-59		18%	
	2%	60+	3%	1	
	· · ·			· /	

C Persons with disability

making:

47%

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



Proportion of households by category of disability⁴

- % categories
- No difficulty carrying out daily activities 2%
- Minor difficulties carrying daily activities but 2% does not need assistance or attention
- Some difficulties carrying daily activities and 1% needs some assistance and attention
- A lot of difficulty carrying daily activities and 2% needs quite a bit of assistance and attention
- Cannot carry out daily activities independently 1% and needs permanent assistance and attention

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

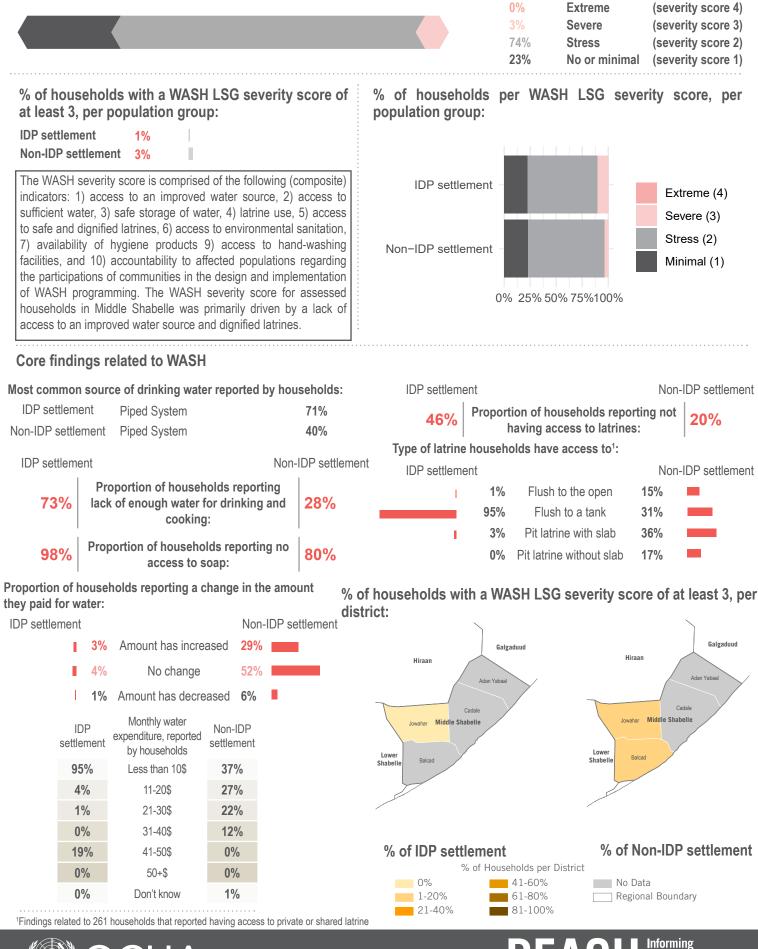
²The respondents were able to select only two responses. ³Findings related to 37 IDP households. ⁴Proportion of the overall population.

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

% of households per WASH LSG severity score:



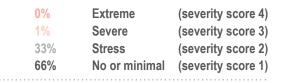
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HEALTH LIVING STANDARDS GAP

% of households per health LSG severity score:



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Middle Shabelle

% of households with a health LSG severity score of % of households per health LSG severity score, per at least 3, per population group: population group: **IDP** settlement 0% Non-IDP settlement 1% The health LSG severity score is comprised of the following **IDP** settlement Extreme (4) indicators: 1) the burden of disease for children under 5, pregnant and lactating women, and adults, 2) access to treatment, 3) the Severe (3) prevalence of mental health issues, 4) vaccination coverage, 5) the Stress (2) availability of healthcare, 6) access to healthcare, and 7) the type of Non-IDP settlement healthcare facilities that households visit. Findings indicate that the Minimal (1) health LSG severity score for households in assessed communities in Middle Shabelle was primarily driven by the burden of disease 0% 25% 50% 75% 100% and the limited availability of health care services.

Core findings related to healthcare:

IDP settlem	ent	Non-IDP settlem
37%	Proportion of households reporting were not able to access a healthca facility for children:	
52%	Proportion of adults reporting no access to a healthcare facility:	39%
	al time to the needed health facility re-	a a uta ala

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	94%	3%	3%	0%	0%
Non-IDP settlement	30%	35%	22%	13%	1%

Of the **60%** 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	2%
0%	At least 5 mental health stressors	0%
0%	At least 3 mental health stressors and history of chaining	0%
0%	At least 3 mental health stressors	0%
0%	At least 2 mental health stressors	6%
1%	One issue reported and history of chaining	1%
98%	One issue reported	91%

⁵Findings related to 104 households with pregnant/lactating household members.

nent IDP settlement

Non-IDP settlement

16%

Non-IDP settlement

2% 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 collection⁵:

Yes

Do not know

IDP settlement

3%

46%

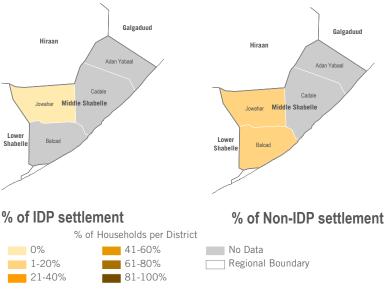
71% 23%

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6%

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



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SHELTER LIVING STANDARDS GAP (LSG)

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% of households per shelter LSG severity score:

48%

The shelter and NFI severity score is composed of the following

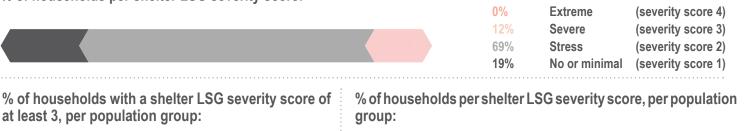
indicators: 1) shelter occupational density, 2) shelter quality measured by means of proxies such as primary construction materials for the

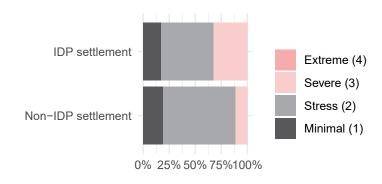
structure, walls, roof, door, and floor, 3) security conditions within

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 Middle Shabelle was primarily driven by NFI and security of tenure





Core findings related to shelter:

IDP settlement

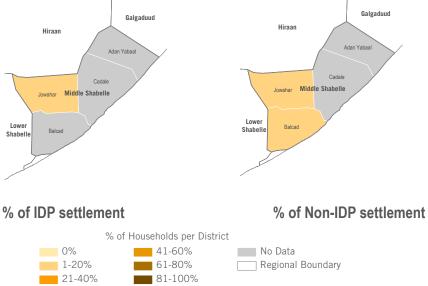
indicators.

Non-IDP settlement 11%

•••••					
IDP settleme	ent Non-I	DP settlei	ment IDP settleme	nt Non-I	DP settlement
2%	Proportion of households reporting incidents of theft within their household in the 3 months prior data collection:	18%	3%	Proportion of households reporting a source of light at night in their shelter:	53%
3%	Proportion of households reporting shelter damage in the 3 months prior data collection:	31%	4%	Proportion of households reporting having internal locks on their shelter:	74%
1%	Proportion of households reporting that they had housing, land and property (HLP) dispute in the 3 months prior to data collection:	6%	3%	Proportion of households reporting their shelter has internal separation:	51%
96%	Proportion of households that reported not owning land:	32%	% of households w district:	ith a shelter LSG severity score of	at least 3, per

Proportion of households reporting access to NFIs in usable condition:

IDP settlement		Non-IDP settlement	
55%	Cooking pot	63%	
33%	Blanket	54%	
60%	Knife	63%	
66%	Jerry can	67%	
75%	Sleeping mat	87%	
47%	Wash basin	59%	



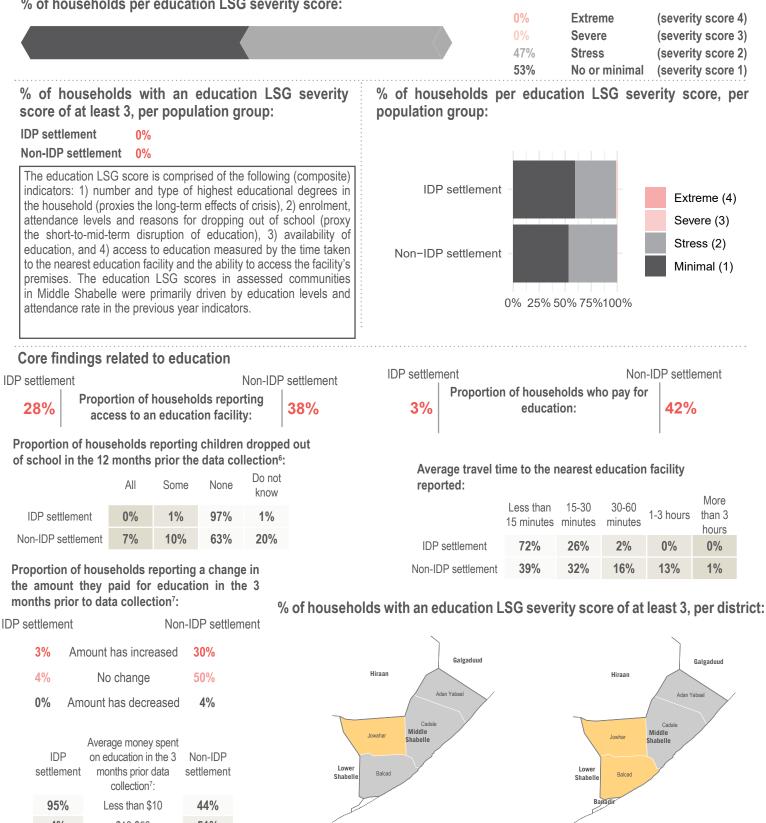
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EDUCATION LIVING STANDARDS GAP (LSG)

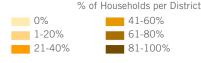
% of households per education LSG severity score:

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4% \$10-\$50 51% 1% 4% \$50-\$100 More than \$100 0% 0% 0% Don't know 0%

% of IDP settlement



% of Non-IDP settlement

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Regional Boundary

No Data

⁶Findings related to 226 households with school-aged children ⁷Findings related to 119 households that reported paying for education



PROTECTION LIVING STANDARDS GAP (LSG)¹

% of households per protection LSG severity score:

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0%	Extreme	(severity score 4)
0%	Severe	(severity score 3)
63%	Stress	(severity score 2)
37%	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) intracommunal relations. The protection LSG score for households in assessed communities in Middle Shabelle was primarily driven by rule of law and child protection indicators.

Core findings related to protection

IDP settlement

Non-IDP settlement

8%

1%

Proportion of households reporting separation of family members in the three months prior to the assessment:

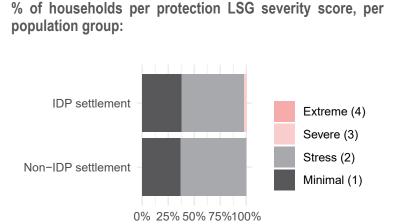
74%

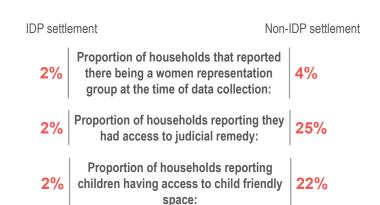
Proportion of households reporting lack of freedom of movement in their community:

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

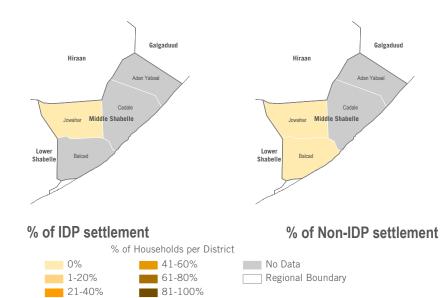
		Always	Sometimes	Never
	Theft/harassment	0%	4%	96%
	Light injuries	0%	3%	96%
IDP settlement	Grave injuries	1%	3%	96%
	Sexual violence	1%	4%	95%
	UXO ¹	1%	3%	95%
	Risk of death	1%	4%	96%
		Always	Sometimes	Never
	Theft/harassment	Always 7%	Sometimes 41%	Never 52%
Non IDP	Theft/harassment Light injuries	,		
Non-IDP settlement		7%	41%	52%
	Light injuries	7% 7%	41% 20%	52% 73%
	Light injuries Grave injuries	7% 7% 10%	41% 20% 21%	52% 73% 69%

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.





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



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.

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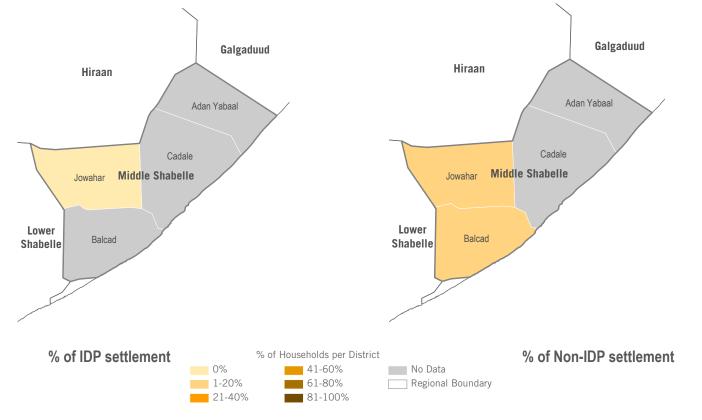


← CAPACITY GAP (CG)

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% of households with a CG severity score of at least 3:	
% of households per CG severity score:	see Annex for details on methodology 0% Extreme (severity score 4) 2% Severe (severity score 3) 41% Stress (severity score 2) 57% No or minimal (severity score 1)
% of households with a CG severity score of at least 3, per population group: IDP settlement 23% Non-IDP settlement 2% 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 Middle Shabelle was primarily driven by health and sanitation related coping scores.	% of households per CG severity score, per population group: IDP settlement Non-IDP settlement 0% 25% 50% 75%100%



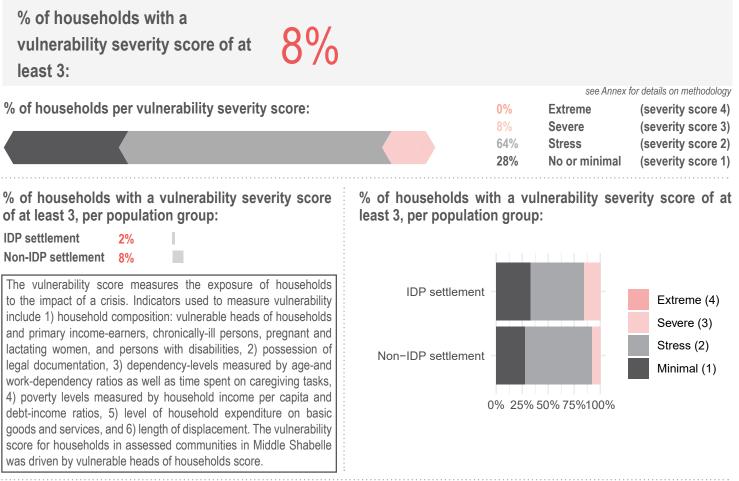


T₁ VULNERABILITIES

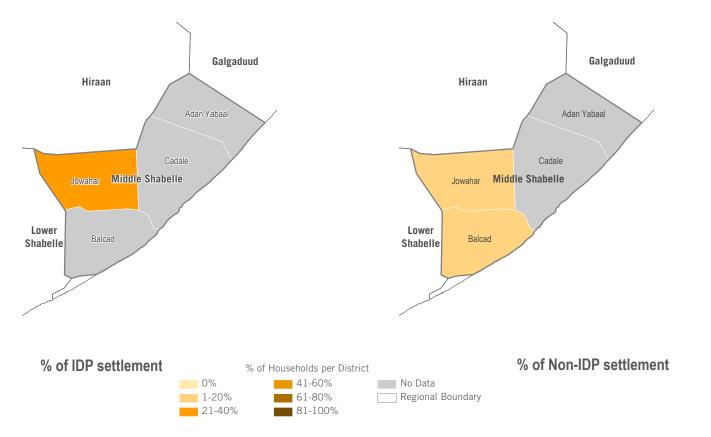
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% of households with a vulnerability severity score of at least 3, per district:



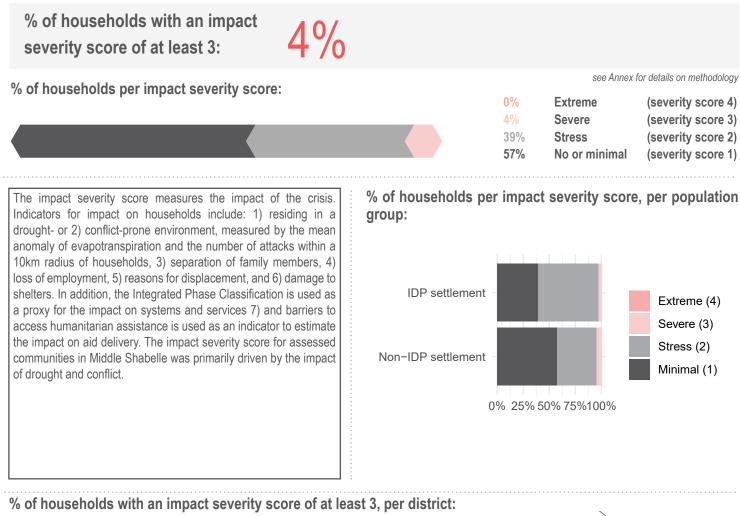


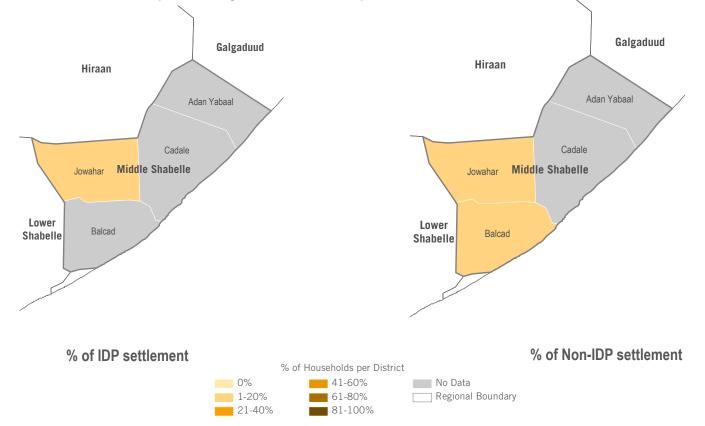


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MULTI-SECTORAL NEEDS INDEX (MSNI)¹

9%

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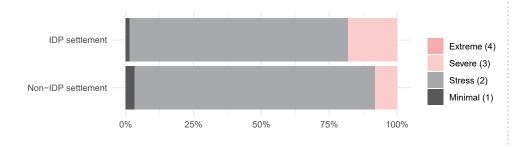
% of households with a MSNI severity score of at least 3:

% of households per MSNI severity score:

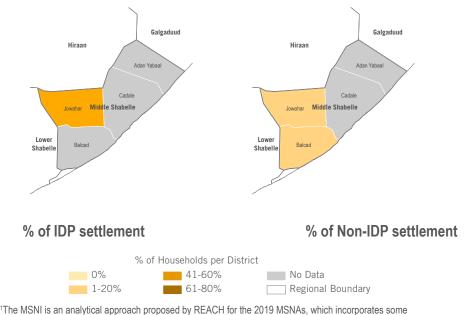
0%	Extreme	(severity score 4)
8%	Severe	(severity score 3)
88%	Stress	(severity score 2)
3%	No or minimal	(severity score 1)

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:

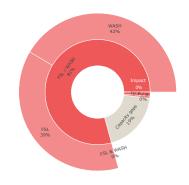


¹The MSNI is an analytical approach proposed by REACH for the 2019 MSNAs, which incorporates some elements of the draft JIAF. The MSNI serves as an interim proposed solution for inter-sectoral analysis until the endorsed JIAF model becomes available.



see Annex for details on methodology

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



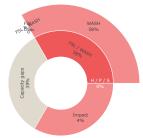
see Annex for details on how to read sunburst graphs

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

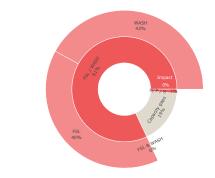
IDP settlement24%Non-IDP settlement8%

% 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

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MULTI-SECTORAL NEEDS

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

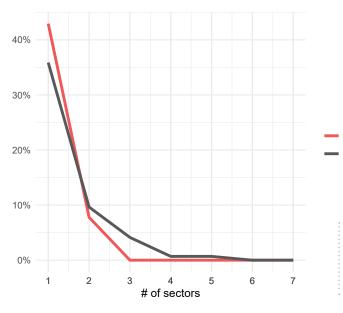
51%

Non-IDP settlement

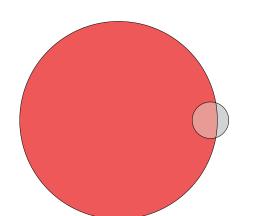
IDP settlement

see Annex for details on methodology

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



51% of households were found to have at least one LSG severity score and/or a CG severity score of at least 3:

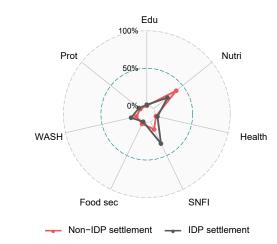


- 49% of households were found to have at least one LSG severity score of at least 3 but a CG severity score lower than 3;
- 1% of households were found to have both at least one LSG severity score and a CG severity score of at least 3;
- $_{0\%}$ of households were found to have a CG severity score of at least 3, but no LSG severity scores higher than 3.

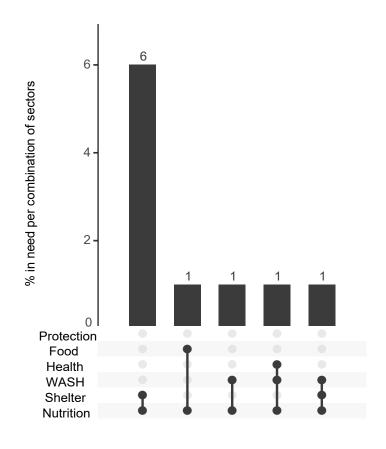
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% of households with sectoral LSG severity scores of at least 3, per population group:



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



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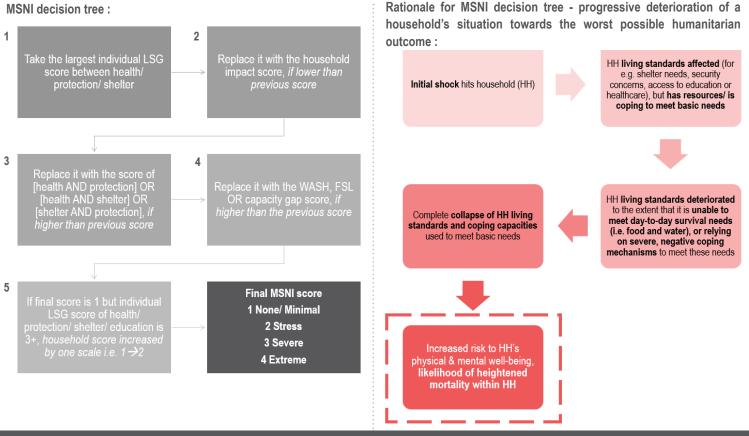
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The overall JMCNA was conducted in 943 settlements, covering 17 of 18 regions, and 51 out of 74 districts. Some areas remained inaccessible due to security concerns, primarily in the South Central and South West States. Two important limitations of 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 guality, 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.







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;

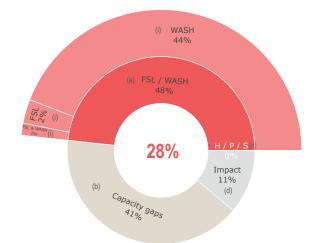
The outer ring breaks down the primary divers of the MSNI severity score (above) even further, by showing the breakdown of the proportion of households:

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-occuring needs in WASH and FSL."





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Somalia Assessment Working Group Somalia Information Management Working Group

FUNDED BY:



Funded by European Union Civil Protection and Humanitarian Aid



WITH THE SUPPORT OF:













ALT,	Data Collection partners				
1	ACF	13	PAH		
2	ARC	14	SAF UK		
3	Concern worldwide	15	Save the children		
4	DRC	16	SCC		
5	HIMILO	17	SHACDO		
6	IOM	18	SIF		
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).