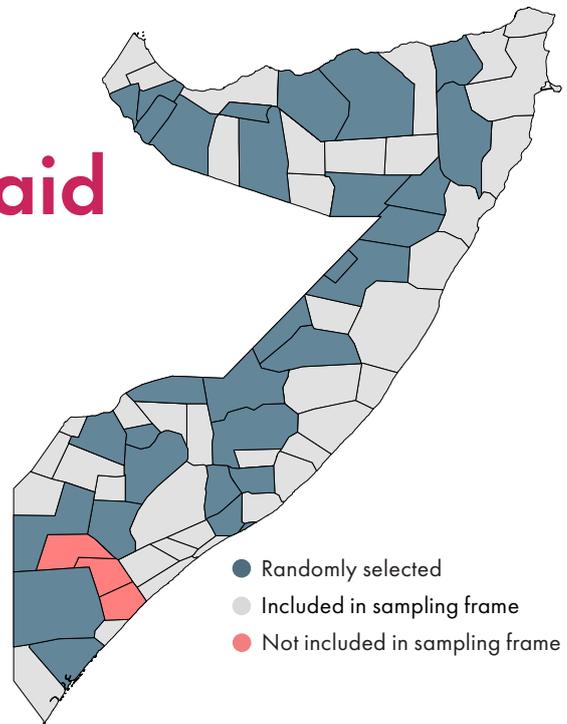


Perception survey of aid recipients in Somalia

December 2020

Executive summary



Before the first case of COVID-19 was officially confirmed on 16 March 2020, Somalia was in a state of emergency resulting from the worst locust infestation in 25 years. With food supplies already under threat, the infestation was exacerbated by heavy floods, which not only displaced half a million people, but also provided ideal conditions for the locusts to flourish.¹

Since then, Somalia has confirmed 4,301 cases and 107 deaths as a result of COVID-19.² Ranked 194th of 195 countries on the Global Health Security Index, Somalia is among the countries least equipped to detect and respond to epidemics.³ The ratio of health workers per 100,000 people is just 2, far below the global standard of 25, and there are only 15 ICU beds available for a population of over 15 million people.

The cumulative impact of previous climate- and conflict-related shocks, as well as the more recent socio-economic impact of the pandemic have left 5.2 million people in need of humanitarian assistance across Somalia.⁴ Between July and September 2020, 1.3 million people were facing high levels of acute food insecurity – a number which is expected to increase to 2.1 million by the end of the year, in the absence of humanitarian assistance.⁵

To better understand affected people's perceptions of the pandemic and to inform the rapidly evolving humanitarian response, Ground Truth Solutions surveyed 1,533 aid recipients across 17 of the 18 Somali regions from 7 to 22 September 2020. Survey respondents told us:

- 1. They need more information on available aid and how to access it.** Aid recipients also identified understanding how to access healthcare as an information gap, along with information on symptoms, testing, and treatment for

This bulletin presents an overview of the findings from Ground Truth Solutions' survey of internally displaced people (IDPs) and residents affected by crisis in Somalia, who have received aid in the last 12 months.

With generous support from the German Federal Foreign Office (GFFO), the survey was carried out in September 2020 in regions across Puntland, South-Central Somalia, and Somaliland.

The [Cash Barometer](#) is an independent accountability mechanism that combines standardised face-to-face surveys with user-centred approaches to enable cash recipients to provide feedback on CVA, and ultimately to participate in decision-making.

¹ WHO. June 2020. COVID-19, locusts, flooding: WHO and triple threat in Somalia. [online]. Available from: <https://www.who.int/news-room/feature-stories/detail/covid-19-locusts-flooding-who-and-triple-threat-in-somalia> [Accessed 7 October 2020].

² WHO. October 2020. WHO Coronavirus Disease (COVID-19) Dashboard. [online]. Available from: <https://covid19.who.int/> [Accessed 17 November 2020].

³ Johns Hopkins Centre for Health Security. October 2019. Global Health Security Index. [online]. Available from: <https://www.ghsindex.org/wp-content/uploads/2020/04/2019-Global-Health-Security-Index.pdf> [Accessed 7 October 2020].

⁴ UN OCHA. July 2020. Humanitarian Response Plan Somalia – HRP Revision – COVID-19. [online]. Available from: <https://reliefweb.int/report/somalia/somalia-humanitarian-response-plan-2020-hrp-revision-covid-19-july-2020> [Accessed 8 October 2020].

⁵ IPC. September 2020. Somalia: Acute Food Insecurity Situation July – September 2020 and Projection for October – December 2020. [online]. Available from: <http://www.ipcinfo.org/ipc-country-analysis/details-map/en/c/1152883/?iso3=SOM> [Accessed 7 October 2020].

Supported by:



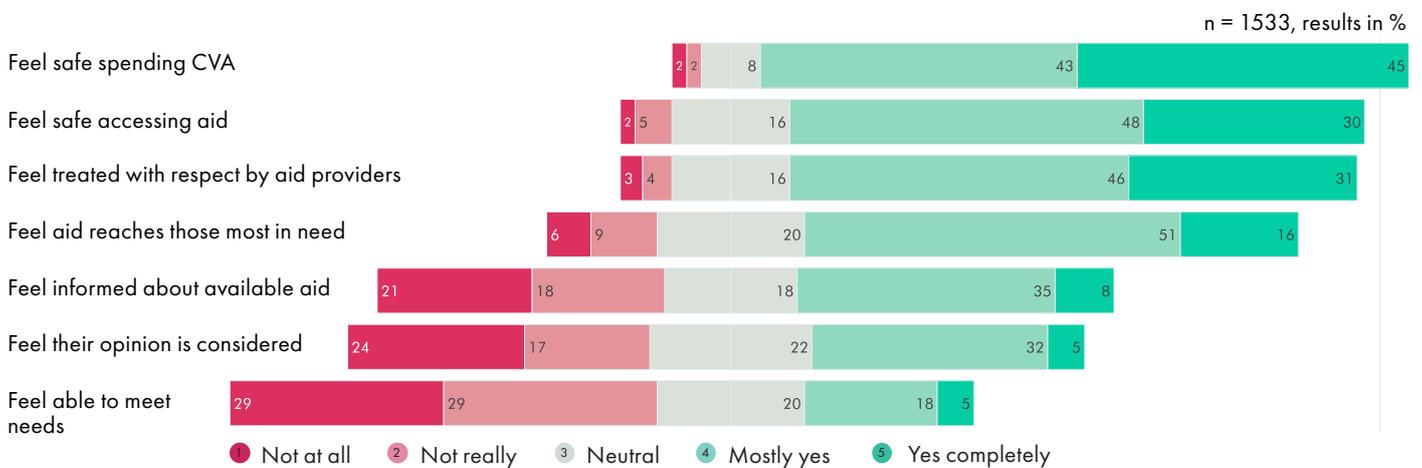
COVID-19. As the response grapples with competing needs, less than half of the respondents feel informed about available aid and services.

2. **Respondents’ ability to meet their most important needs has worsened over the last six months.** Cash and voucher assistance (CVA) and remittances have declined for most people and stopped completely for others. The majority of respondents say they are unable to meet their most important needs with the aid they receive. They identified better access to CVA, food, and healthcare as solutions.
3. **They are divided over whether aid providers take their opinions into account.** Despite this division, the majority of respondents still say aid providers treat them with respect and feel able to report instances of abuse and mistreatment.
4. **They feel that aid largely goes to those who need it most,** but they do not understand how aid agencies decide who receives aid.

There is a positive correlation between respondents feeling informed, being able to meet their most important needs, and believing that aid agencies take their opinions into account. However, respondents in Puntland and Somaliland are less positive on a number of questions than those in South-Central Somalia. Respondents’ status and the type of assistance they receive also shows slight but consistent effects: displaced respondents and those who receive only in-kind aid are less positive than residents affected by crisis and CVA recipients.

This is the fourth survey Ground Truth Solutions has carried out in Somalia since 2017 – data collection took place in [2017](#), the second in [2018](#), and the third in [2019](#). In line with previous efforts, these findings will be used to inform humanitarian programming and provide metrics for monitoring objectives in the Humanitarian Response Plan (HRP).

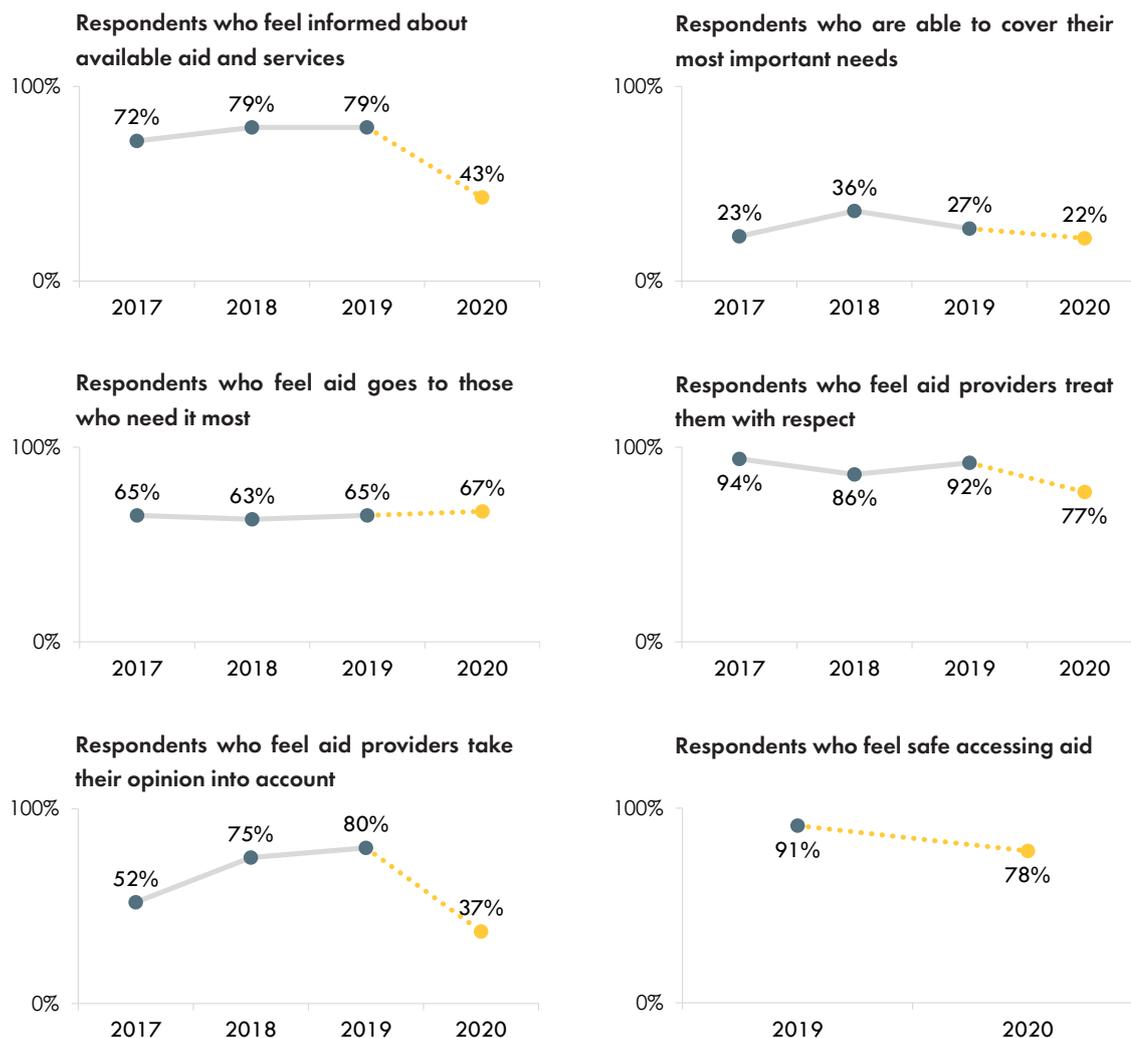
Overview of perceptions



Time series data

Since the first Ground Truth Solutions survey in Somalia, aid recipients have provided feedback on several recurring metrics. The time series graphs below represent the proportion of respondents who provided a positive response (“mostly yes” or “yes completely”) to the questions asked across four years. However, it is important to note that the methodology has changed over time. Most notably, the mode of data collection shifted from telephone-based interviews between 2017 and 2019 to face-to-face interviews in 2020. This pivot to face-to-face interviews may potentially have an impact on responses. On the one hand, telephone-based surveys can be more prone to satisficing, where respondents are unwilling or unable to expend the cognitive effort required to respond to questions, resulting in less thoughtful or careful responses.⁶ In contexts like Somalia, where mobile phone subscriptions are low, coverage errors are also more likely to occur. On the other hand, face-to-face data collection is more prone to social desirability bias, given the more immediate presence of an enumerator. The severity of these mode effects is difficult to gauge based solely on the data collected. As such, the time series data presented below should be interpreted with caution.

● Telephone-based interviews
● Face-to-face interviews



⁶ Holbrook; et al. 2003. Telephone versus face-to-face interviewing of national probability samples with long questionnaires: Comparisons of respondent satisficing and social desirability response bias. [online]. Accessed from: <https://www.jstor.org/stable/3521667> [Accessed 15 October 2020].

Information

Ensuring that aid recipients are aware of available support is necessary but not sufficient for a humanitarian response that is accountable to the people it sets out to serve. However, only 43 percent of aid recipients surveyed across Somalia feel informed (“mostly yes” and “yes completely”) about the kinds of aid and services available to them:

Do you feel informed about the kinds of aid and services available to you?



In Puntland, only 16 percent of respondents feel mostly or completely informed about available aid, compared to 34 percent in Somaliland and 56 percent in South-Central.

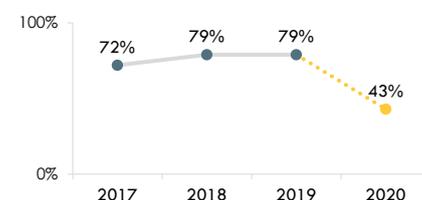
This finding constitutes a considerable reduction in awareness from previous Ground Truth Solutions surveys. Such a reduction may be the result of how the humanitarian response in Somalia has adapted, suspended, and reprioritised activities in compliance with measures to slow the spread of COVID-19, though the effects of the shift to a face-to-face survey – compared to the telephone surveys in previous rounds – are difficult to factor in.

Almost half of the respondents report that information provision has changed over the last six months. This change is most pronounced in Somaliland (71 percent), compared to Puntland (32 percent) and South-Central Somalia (40 percent). Of the respondents who experienced a change, most say they now receive less information than they did before the pandemic, most often because aid has been reduced and fewer aid providers are present. Some respondents identify restrictions in place to slow the spread of COVID-19 as the cause of these reductions. However, almost 20 percent, of respondents say information on COVID-19 has increased, especially in Galgaduud, Hiran, Banadir, and Lower Juba.

Respondents most often report needing more information about the types of humanitarian aid and services available (84 percent) and how to access them (74 percent). Aid recipients also expressed a need for more information on accessing healthcare (63 percent) as well as on symptoms, testing, and treatment for COVID-19 (36 percent).*

A recent Risk Communication and Community Engagement report published by the CCCM Cluster and DTM in Somalia found that internally displaced persons (IDPs) most often receive information about COVID-19 via phone calls (65 percent), humanitarian workers (59 percent), radio broadcasts (53 percent), and community leaders (25 percent).⁷ Respondents’ preferred sources of information are mostly local. When asked who they would prefer to receive information from, most identified local non-governmental organisations (59 percent), community leaders (48 percent), and

Respondents over time who feel informed about available aid and services



How has the way in which you receive information from humanitarian aid providers changed over the past six months?* (n=623)

- 42% Information flows have decreased or stopped
- 24% Aid flows have decreased or stopped
- 23% Covid-19 measures have decreased information flows
- 19% Information on Covid-19 has increased

⁷ IOM. September 2020. COVID-19 Response – RCCE Feedback Assessment in IDP Sites – Round 2. [online]. Available from: https://reliefweb.int/sites/reliefweb.int/files/resources/RCCE%20Feedback%20Assessment%20-%20DTM_CCCM%20Somalia_Round2_Sep%202020.pdf [Accessed 8 October 2020].

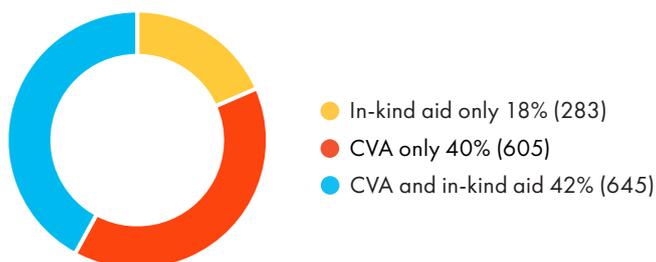
* Percentages do not total 100 because respondents could choose multiple options.

health providers (46 percent). Where respondents have questions about receiving aid, most ask aid providers or community leaders and committees, though a significant minority (9 percent) report not knowing who to turn to. Despite the need for social distancing and other containment measures, the preferred means of communication remains face-to-face.

Cash and voucher assistance (CVA)

CVA has become the default aid modality across Somalia.⁸ More than 80 percent of the respondents included in this survey have received some form of CVA, most often in tandem with in-kind aid, over the past 12 months. In most cases, the CVA provided is restricted in the form of vouchers (61 percent), followed by unrestricted cash (38 percent) and cash for work (30 percent).*

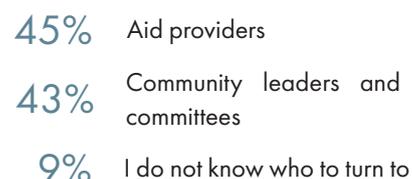
Types of aid received



Despite the proliferation of CVA in Somalia, 80 percent of respondents have seen their transfers either decrease or stop entirely since the onset of the pandemic. According to OCHA's COVID-19 HRP revision, published in July, some programmes "needed to be modified or suspended due to COVID-19, such as cash for work and vocational trainings, due to the gatherings involved with such activities."⁹ The HRP revision goes on to note that some partners were able to adopt mobile money and e-vouchers to avoid contact, while others have begun frontloading CVA.¹⁰

Remittances appear to be similarly affected. Of the 21 percent of respondents who report having received remittances from friends and family living abroad, 52 percent report a decrease in remittances received, while 27 percent no longer receive any. A joint statement published by Oxfam and over 100 NGOs, activists, and academics warned of the severe consequences of declining remittances in Somalia. By April 2020, money transfer operators had already reported a substantial decline in

If you have questions about receiving aid, who do you ask?* (n=1533)



How would you prefer to receive information?* (n=1533)



⁸ UN OCHA. January 2020. *Humanitarian Response Plan Somalia*. [online]. Available from: <https://reliefweb.int/report/somalia/somalia-humanitarian-response-plan-2020-january-2020> [Accessed 8 October 2020].

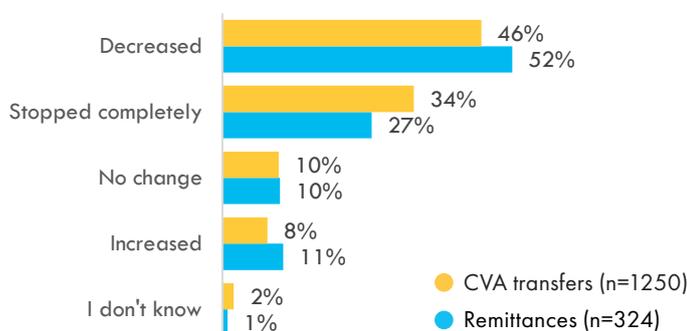
* Percentages do not total 100 because respondents could choose multiple options.

⁹ UN OCHA. July 2020. *Humanitarian Response Plan Somalia – HRP Revision – COVID-19*. [online]. Available from: <https://reliefweb.int/report/somalia/somalia-humanitarian-response-plan-2020-hrp-revision-covid-19-july-2020> [Accessed 8 October 2020].

¹⁰ Frontloading entails providing multiple tranches of CVA to recipients, instead of staggering them on a monthly basis.

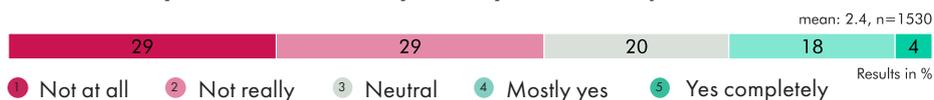
remittances due to economic pressures faced by the Somali diaspora since the onset of COVID-19.¹¹ The World Bank projected a 20 percent decline in global remittances by the end of 2020, as measures to stop the spread of the pandemic disproportionately affect migrant workers who support family and friends in their countries of origin.¹² This decline will likely have a significant effect on Somalia, where roughly half of all households depend on remittances, which together make up 20 to 40 percent of Somalia’s gross domestic product.¹³ Females may be particularly affected by this decline, as remittances constitute a “vital tool for women’s economic empowerment,” according to Oxfam’s joint brief.¹⁴ The brief goes on to argue that remittances are often the only lifeline accessible to female caregivers who stay at home with sick family members or children no longer in school.

Effect of the pandemic on CVA transfers and remittances



With humanitarian CVA and remittances in decline, only 22 percent of respondents report being able to meet their most important needs with the aid they currently receive:

Does the aid you receive currently cover your most important needs?



Respondents in South-Central Somalia feel better able to meet their most important needs with the aid they receive, compared to Puntland and Somaliland. Respondents’ status and their awareness of targeting approaches also impact the extent to which they feel this is the case: internally displaced respondents and respondents who do not feel they understand how aid agencies decide who receives aid are less confident in their ability to cover their needs. Unsurprisingly, those who continue to receive remittances feel better equipped to do meet their needs than those who do not.

¹¹ Oxfam et al. April 2020. *Somali communities face dropping remittances and wider economic impact amid COVID-19 crisis*. [online]. Available from: http://nexusom.org/wp-content/uploads/2020/04/Warning-Remittances-Lifeline_final.pdf [Accessed 19 November 2020].

¹² World Bank Group. April 2020. *World Bank Predicts Sharpest Decline in Remittances in Recent History*. [online]. Available from: <https://www.worldbank.org/en/news/press-release/2020/04/22/world-bank-predicts-sharpest-decline-of-remittances-in-recent-history> [Accessed 8 October 2020].

¹³ Shella Biallas. No date. *2019 Investment Climate Statements: Somalia*. [online]. Available from: <https://www.state.gov/reports/2019-investment-climate-statements/somalia/> [Accessed 8 October 2020].

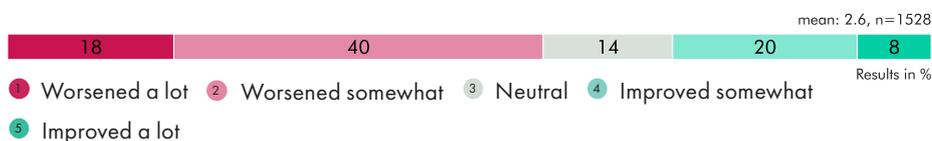
¹⁴ Oxfam. April 2020. *Oxfam Raises Alarm Over Somali Remittance Lifeline*. [online]. Available from: <https://www.oxfam.org/en/press-releases/oxfam-raises-alarm-over-somali-remittance-lifeline> [Accessed 8 October 2020].

Cash and voucher assistance as well as food are the most common unmet needs respondents identify. Most respondents also mention health services, though they consider personal protective equipment against COVID-19 – such as soap (15 percent), disinfectant (14 percent), and masks (10 percent) – less of a priority.

The proportion of respondents who felt able to meet their priority needs with the aid they received peaked in 2018 but has since dropped to similar levels as those recorded in 2017.

Over the past six months, most respondents' ability to meet their needs has worsened. Almost 60 percent say this ability has either "worsened a lot" (18 percent) or "worsened somewhat" (40 percent) since the onset of the pandemic:

How has your ability to cover your most important needs changed in the last six months?



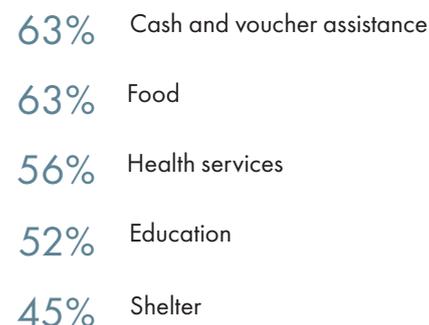
Respondents' ability to meet their needs has declined most in Puntland and Somaliland, as well as among internally displaced aid recipients. Limited livelihoods assets and coping mechanisms make IDPs more dependent on humanitarian assistance compared to residents affected by crisis.¹⁵ COVID-19 is an additional aggravating factor, as less aid and fewer remittances are combined with increased food prices and declining employment in urban areas, where the majority of IDPs live.

A number of other characteristics correlate with a change in respondents' ability to cover their priority needs. Interestingly, the ability to meet their needs has worsened less severely among respondents living with disabilities. Receiving remittances and knowing how aid agencies decide who receives aid correlates positively with changes in respondents' ability to cover their most important needs. Gender also contributes: not only are male-headed households slightly more positive than female-headed households, but households with a higher number of working-age males (18 to 59 years) are more positive in their assessment of the change in their ability to meet their needs over the past six months.

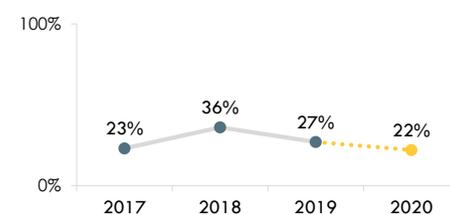
Respondents most often identify three reasons why their ability to meet their needs has worsened: First, 70 percent say they lost a job or source of income over the past six months. Second, 63 percent say access to aid and the amount of aid received are declining. Finally, another 45 percent of respondents have lost other sources of income, such as remittances.

Looking to the future, 54 percent cite an imminent economic crisis and a resulting lack of employment opportunities as their family's main concern regarding the financial impact of the pandemic. Respondents also worry about a further decline in the availability of humanitarian aid (16 percent), no longer being able to cover their basic needs (12 percent), and food insecurity (10 percent).*

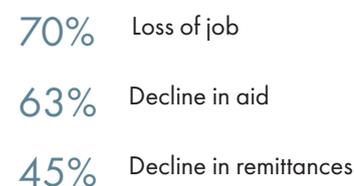
Top 5 unmet needs (n=1533)*



Respondents over time who are able to cover their most important needs



Top 3 reasons for reduced ability to meet needs (n=899)*



* Percentages do not total 100 because respondents could choose multiple options.

¹⁵ Food Security and Nutrition Analysis Unit. September 2020. FSNAU 2020 Post Gu Technical Release. [online]. Available from: [https://www.fsnau.org/downloads/FSNAU-FEWS%20NET-2020-Post-Gu-Technical-Release-30-September-2020-\(English-Version\).pdf](https://www.fsnau.org/downloads/FSNAU-FEWS%20NET-2020-Post-Gu-Technical-Release-30-September-2020-(English-Version).pdf) [Accessed 8 October 2020].

The decline in aid recipients' ability to cover their most important needs is accompanied by an increase in the reported sale of aid items. Since our last survey in Somalia carried out in July 2019, the proportion of respondents who state that people in their community are selling aid items has more than doubled, from 8 to 17 percent. Among those 17 percent, blankets, soap, and buckets are most often sold to buy food, clothing and medicine.

Do people in your community sell aid items to meet their needs in cash?

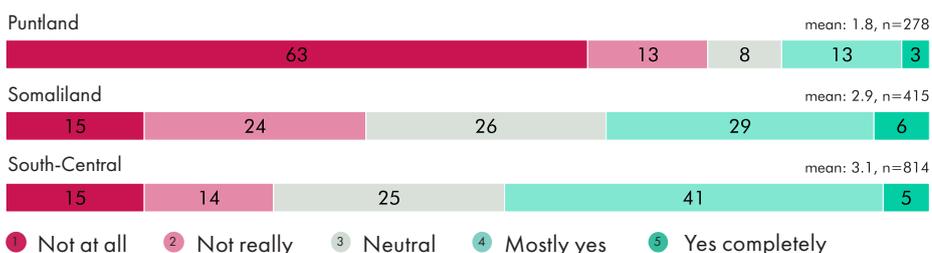


In line with findings from last year's survey, unrestricted cash remains the preferred modality for aid recipients in Somalia. However, COVID-19 containment measures that restrict movement across Somalia, disruptions to imports and domestic supply chains, as well as widespread flooding have reduced the availability of basic commodities and also increased prices.¹⁶ As such, there is a considerable increase in the number of respondents who express a preference for in-kind aid items compared to last year, from just 2 to 40 percent.

Participation and reporting abuse

Respondents are divided over whether aid providers take their opinions into account. Just over two-thirds of respondents (76 percent) in Puntland do not feel aid providers take their opinions into account, while those in Somaliland (39 percent) and South-Central Somalia (29 percent) are less negative. This same regional divide in terms of respondents' perceived participation was also present in data collected in 2019 and is consistent across this survey. Respondents in Puntland are less able to meet their needs, have seen this ability decline more severely, and feel less informed about available aid than respondents in Somaliland and South-Central Somalia. In line with previous findings, internally displaced aid recipients and respondents who do not understand how aid providers target aid are also less convinced that their opinions are considered.

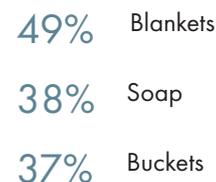
Do you feel aid providers take your opinion into account when providing support and aid to your community?



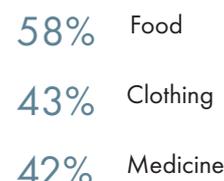
* Percentages do not total 100 because respondents could choose multiple options.

¹⁶ UN OCHA. July 2020. *Humanitarian Response Plan Somalia – HRP Revision – COVID-19*. [online]. Available from: <https://reliefweb.int/report/somalia/somalia-humanitarian-response-plan-2020-hrp-revision-covid-19-july-2020> [Accessed 8 October 2020].

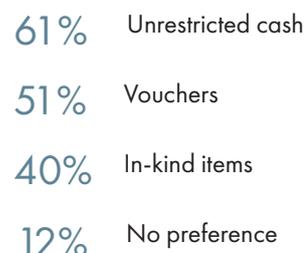
Top 3 items most often sold (n=254)*



Top 3 items most often bought (n=254)*



Preferred aid modality (n=1533)*



Following steady progress between 2017 and 2019, the proportion of respondents who feel their opinions are taken into account by aid providers appears to be at an all-time low in 2020. Only 37 percent now believe their opinions influence aid provision, compared to the 80 percent who said so during the last phone survey in 2019.

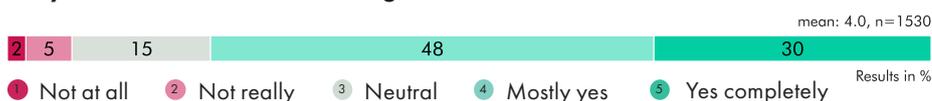
As aid recipients' sense of participation decreases, they also become less convinced that aid providers treat them with respect. In 2019, 92 percent of respondents felt they were treated with respect by aid providers. In 2020, this has decreased to 77 percent – the lowest proportion across all Ground Truth Solutions surveys in the past four years.

Despite the decrease in perceptions around participation and respect, 76 percent of respondents still perceive that people in their community can report instances of abuse or mistreatment by aid providers. When asked to whom they would feel comfortable reporting instances of abuse and mistreatment, the majority (80 percent) cite the police, while others cite local authorities (27 percent) and religious leaders (21 percent).*

Safety and fairness

Across aid modalities, 78 percent report feeling mostly or completely safe when accessing aid. Among CVA recipients 88 percent of voucher, unrestricted cash, and cash for work recipients feel safe when spending their assistance. Respondents who report not feeling safe accessing aid worry about contracting COVID-19 (63 percent), overcrowding at distribution points (60 percent), and a lack of social and physical distancing (54 percent).*

Do you feel safe when accessing aid?

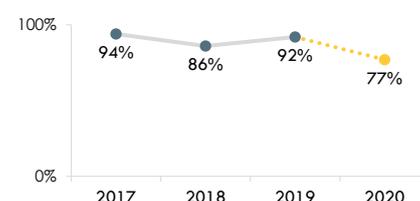


This is in line with previous Ground Truth Solutions surveys, which found that aid recipients across Somalia report feeling safe in their places of residence and in their day-to-day lives. However, as the 2020 HRP recognised, “people with disabilities face additional barriers and have been largely left out of humanitarian assistance in Somalia in previous years.”¹⁷ As a result of this omission, CVA recipients living with disabilities report feeling less safe than those without.¹⁸ Respondents who do not feel safe accessing aid are worried about the risk of contracting COVID-19 (63 percent), overcrowding at distribution points (60 percent), a lack of social distancing (54 percent), and a lack of personal protective equipment (53 percent).*

Respondents over time who feel aid providers take their opinion into account



Respondents over time who feel aid providers treat them with respect

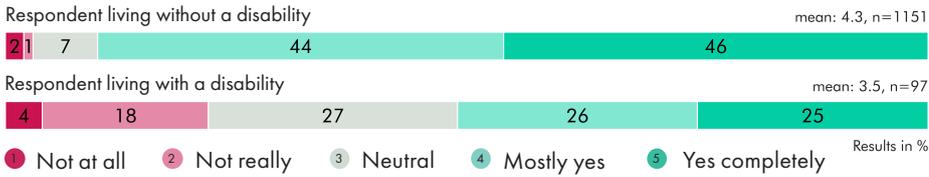


* Percentages do not total 100 because respondents could choose multiple options.

¹⁷ UN OCHA. January 2020. *Humanitarian Response Plan Somalia*. [online]. Available from: <https://relief-web.int/report/somalia/somalia-humanitarian-response-plan-2020-january-2020> [Accessed 8 October 2020].

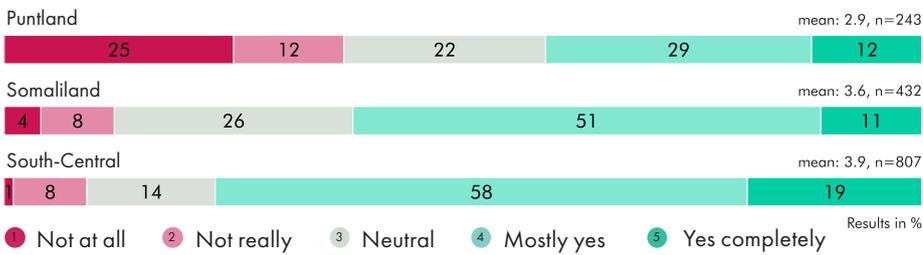
¹⁸ Given the relatively small subset of respondents living with disabilities (7 percent), these findings should be considered indicative.

Do you feel safe when spending your cash or voucher assistance?



Perceptions around the fairness of aid provision have remained consistent across Somalia: the proportion of respondents who feel aid goes to those who need it most has fluctuated between 63 and 67 percent over the past four years. However, compared to Somaliland and South-Central Somalia, respondents in Puntland are less convinced that aid flows reach those most in need:

Does aid go to those who need it most?



In line with findings throughout this survey, people living with disabilities are most often identified as those who are excluded from aid provision. Of the 14 percent who do not feel aid is provided to those who need it most, almost two-thirds feel that people living with disabilities are excluded. Other groups identified as being left out of aid provision are the poor, orphans, and minorities.

Even though most recipients feel that aid provision is fair, most do not know how aid agencies decide who receives humanitarian assistance:

Do you know how agencies decide who receives humanitarian assistance and who does not?



Notably, 57 percent of respondents living with disabilities say they know how aid is targeted, compared to just 26 percent of those without. Males and residents affected by crisis are also more confident in their awareness of the targeting approaches used, compared to females and IDPs, respectively.

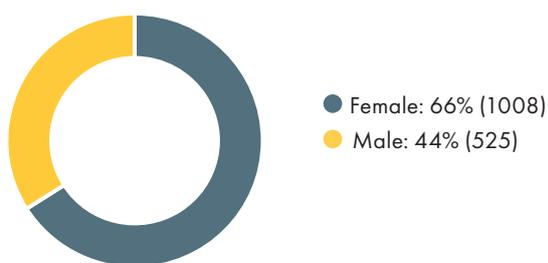
A final, open-ended question asked respondents to reflect on what aid providers should consider when providing CVA. Responses were largely clustered around the criteria aid providers should use to target CVA and typically referenced individual vulnerabilities and needs as the most important criteria. Respondents also called on CVA providers to consider people living with disabilities, as well as households caring for children and orphans. They also referenced displaced people, those without access

to income or the means to generate livelihoods, and the elderly. While most interpreted this question in terms of who should be targeted, a few focused on how CVA should be targeted and consistently called for greater involvement of community leaders in the selection of CVA recipients.

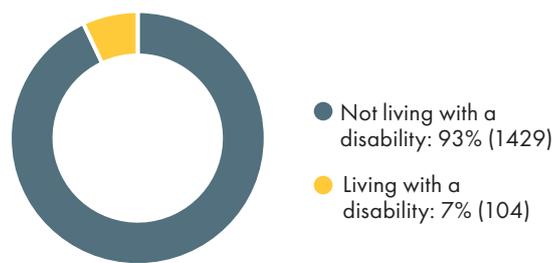
Demographics

A total of n=1533 respondents were surveyed between 7 and 22 September 2020 in the following regions: Awdal, Bakool, Banadir, Bari, Bay, Galgaduud, Gedo, Hiraan, Lower Juba, Lower Shabelle, Middle Shabelle, Mudug, Nugaal, Sanaag, Sool, Togdheer, Woqooyi Galbeed.

Gender



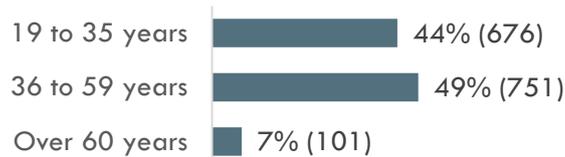
Respondents living with a disability



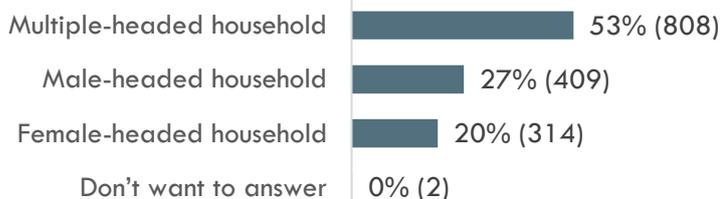
Type of assistance received



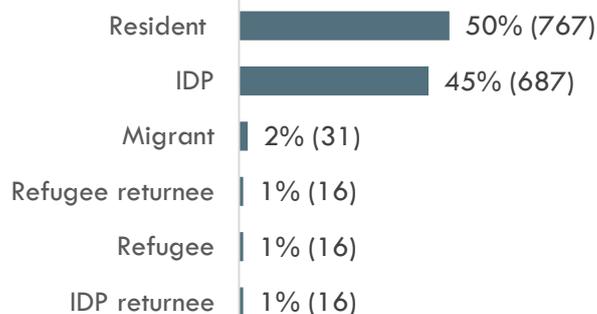
Age



Head of household



Status



Methodology

Sampling strategy

The sampling strategy was designed using people-in-need calculations from the 2020 Humanitarian Needs Overview dataset published by UN OCHA in April 2020.¹⁹ This was compared with the 2020 HRP figures on the number of IDPs and residents affected by crisis targeted to receive humanitarian aid in 2020. Two separate districts were randomly selected for each of the 17 Somali regions included in this survey. Quotas for IDPs and residents affected by crisis were determined at the regional level, based on the breakdown of people in need in the HNO data set. Of the 34 randomly selected districts, 4 were changed due to access constraints and security concerns. The sub-district level data collection site per district was determined by enumerators in the field, with the support of local community leaders and aid providers.

The table below provides an overview of the regions sampled in each state and the population groups surveyed.

	Region	IDPs	Residents	Other	Total
South-Central	Bakool	44	40		84
	Banadir	85			85
	Bay	65	38	1	104
	Lower Shabelle	22	64	4	90
	Middle Shabelle	10	81	1	92
	Gedo	15	72	4	91
	Lower Juba	36	49	6	91
	Hiran	29	54	5	88
	Galgaduug	13	72	6	91
Puntland	Bari	32	47	2	81
	Mudug	42	30	18	90
	Nugal	80	27	2	109
Somaliland	Awdal	21	65	2	88
	Sanaag	61	25	1	87
	Sool	65	17	9	91
	Togdheer	47	40	1	88
	Woqooyi Galbeed	20	46	17	83
Total		687	767	79	1533

Data collection

The survey questions were translated into Somali, programmed into ONA, and reviewed by experienced enumerators working for Researchcare Africa. The survey was then piloted to ensure that the questions were comprehensible and that translations were accurate and easy to understand. Data was collected by Researchcare Africa from 7 to 22 September 2020 via face-to-face interviews using tablets and mobile phones. Due to travel restrictions, Ground Truth Solutions monitored the ongoing data collection remotely and provided feedback to enumerators on a daily basis.

¹⁹ HDX. 2020. *Somalia: Humanitarian Needs Overview*. [online]. Available from: <https://data.humdata.org/dataset/somalia-humanitarian-needs-overview> [Accessed 15 October 2020].

Enumerators employed a random selection process, according to which each subsequent respondent was selected after the enumerator had passed five houses, tents, or other types of accommodation following their interview with the previous respondent. As a result, the proportions of the various types of respondents deviated slightly from the initial target.

Demographic breakdown

The sample selected consenting adults over the age of 18 who had received humanitarian assistance in the last 12 months and was constructed to achieve a 50:50 gender split (male/female). However, due to the time during which interviews could be carried out, male respondents are likely underrepresented, as they were often not at home when enumerators were conducting interviews.

A 15 percent representation of people with disabilities across the whole sample was targeted based on IASC's guidelines on including people with disabilities in humanitarian action.²⁰ To identify groups of persons with disabilities within the sample, respondents were asked a condensed series of questions developed by the Washington Group. Due to practical constraints on the ground, people with disabilities are likely underrepresented in our sample, with only 7 percent of respondents being classified as disabled according to Washington Group criteria. Efforts will be made in future qualitative research to include the views of more people with disabilities.

Survey weights and statistical analysis

The means presented in this reported are based on unweighted data. If data is weighted according to the size of the people in need populations in each region, means would differ by less than 0.13.

Multivariate non-parametric tests were conducted to examine the relationship between cash and voucher recipients across a range of Likert scale questions. Relative effects were then examined to see, e.g., if a randomly chosen cash recipient was more likely to give a higher score on a Likert scale than a randomly selected voucher recipient. A significance level of $\alpha < 0.05$ was set in advance. Mann-Whitney-Wilcoxon U tests were then conducted to identify those questions which showed a significant difference between cash and voucher recipients. P values were adjusted for false-discovery rate.

Challenges, limitations, and avenues for future research

This round of data collection has been characterised by access constraints caused by insecurity, COVID-19, and flooding across Somalia. Despite this, in-person data collection was able to go ahead under social distancing measures. While data collection was not significantly impacted, the voices of individuals in hard-to-reach areas naturally constitute a significant missing perspective. Furthermore, given the focus on aid recipients, this round of data collection cannot speak to the widespread issue of exclusion, as it includes only those who have received aid across Somalia.

This round of data collection and analysis will be complemented by qualitative interviews that were carried out with CVA recipients in Ainabo, Beletweyne, and Mogadishu in October 2020 and shed light on individuals' experiences of mobile money-enabled CVA. A perception-mapping exercise is also underway to assess how CVA recipients' perceptions are being integrated into the humanitarian response. Through a series of key informant interviews, this exercise will map how CVA recipients can communicate with aid providers and how programming can better respond to their priorities.



**GROUND TRUTH
SOLUTIONS**

For more information about our work in Somalia, please contact Max Seilern (max@groundtruthsolutions.org).

²⁰ Inter-Agency Standing Committee. November 2019. *Guidelines: Inclusion of Persons with Disabilities in Humanitarian Action*. [online]. Available from: <https://interagencystandingcommittee.org/iasc-task-team-inclusion-persons-disabilities-humanitarian-action/documents/iasc-guidelines> [Accessed 16 November 2020].