

**FEASIBILITY STUDY**

**ON CASH AND VOUCHER ASSISTANCE IN  
BORENA ZONE, OROMIA AND GAMBELA  
REGIONS, ETHIOPIA**

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# **FEASIBILITY STUDY ON CASH AND VOUCHER ASSISTANCE PROGRAMMING IN GAMBELA REGIONS IN ETHIOPIA**

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# BACKGROUND

## BORENA ZONE

One of the hardest hit by ongoing drought crisis is the Borena Zone in Oromia. The absence of rain over the past 4 seasons resulted to the loss of livelihoods and widespread food insecurity of the population especially the pastoralist communities in the region. Over 3.5 million livestock have died in the first 2 quarters of 2022 and nearly 10 million people are urgently in need of food assistance.

Humanitarian organizations are trying their best to support the affected population. IOM provided water trucking of around 40,000 litres of water per day to Dubuluk IDP areas hosting around 5,300 individuals. This number, however, is a drop of water in the ocean compared to the needs of the communities affected by drought. Besides water, the communities were in dire needs of food assistance to survive. Report for June to September showed that Oromia was already in the crisis point (IPC-3) and predicted to be one phase worse without current humanitarian assistance.

Plan International responded and conducted a rapid market assessment to understand the suitability of using cash and voucher assistance to meet the basic needs of households. The 3 major markets were assessed including Dubuluk, Moyale, and Dire.

## GAMBELA

The Gambela Peoples National Regional State (GPNRS) is one of the eleven (11) federal regions of Ethiopia. The State has a total land area of 29,783 km<sup>2</sup> with a population of about 409,000 (2015 population projection). The region borders South Sudan on its western side and has five (5) official border crossings. Gambela region hosts the largest refugee population in Ethiopia: 376,922 as of 31 December 2022. The composition of the refugees in Gambela is 87 % Children & Women, 63% under 18, 20% youth, 50% school age, 3,892 Unaccompanied Children, and 17,623 Separated Children.

Most refugees are from South Sudan and live in seven (7) refugee camps – with a few thousand in local settlements in the region. As the region is generally not self-sufficient in cereals, alternative income sources, such as fishing, are important sources of nutrition.

Similarly Plan International Ethiopia conducted FGD in the refugee camp and the Market assessments in Terfam and Gambela, Gambela region of Ethiopia.

# KEY FINDINGS

## GENERAL CASH AND VOUCHER ASSISTANCE ENVIRONMENT IN THE COUNTRY

The CVA environment in Ethiopia is generally favourable as many humanitarian agencies including the UN are already pursuing this approach. There is an active CWG at national (Addis Ababa) and /sub-national (regional) CWGs- in Amhara, SNPPR, Somali, Afar, Oromia, Benishangul. The national level CWG is co-chaired by UNICEF and PIE. Plan Ethiopia CVA Specialist has been elected as co-chair of the CWG in November 2022 which in itself is a great achievement and recognition. CWG meet every month/ at regular intervals to discuss the technical issues and to harmonize good practices. The CWG has developed some tools including Market Assessment, FGD, KII and MEB which are being used by different agencies and CWG jointly. ECWG has developed MEB for Tigray in March 2021 and it remains to be endorsed by the key stakeholders. Interactions with key stakeholders including ECWG, peer agencies, communities in the IDP camps indicate a strong appetite for CVA intervention as a modality to achieve food security, protection, education, livelihood and other sectoral outcomes.

The following key determinants, were used to arrive at a conclusion if the CVA modality will be feasible to achieve the set outcomes to provide integrated humanitarian assistance to the conflict affected communities in the project area.

- ◆ General CVA environment in the country and acceptance of cash and voucher by the government and the communities.
- ◆ Functional market with adequate stock to absorb increased demand, robust supply chain, relatively stable price of the commodities.
- ◆ Willingness of the traders to participate in the CVA intervention
- ◆ Availability of FSPs and their willingness to collaborate with the program.
- ◆ Coordination with peer agencies to harmonize CVA approaches and avoid potential duplication.
- ◆ Project implementation capacity of the Plan International and the implementing partners.
- ◆ Favourable security situation in the project areas with appropriate risk assessment in place.

## METHODOLOGY FOR BORENA ZONE

The study in Borena zone of Oromia region used a mixed modality to gather information. Market survey tool was used to gather information from the 3 market centres including Dubuluk, Dire and Moyale to update the previous study conducted in the first quarter of 2022. Traders were interviewed using the tool to understand availability of supplies, prices including current inflation rates, and the supply chain.

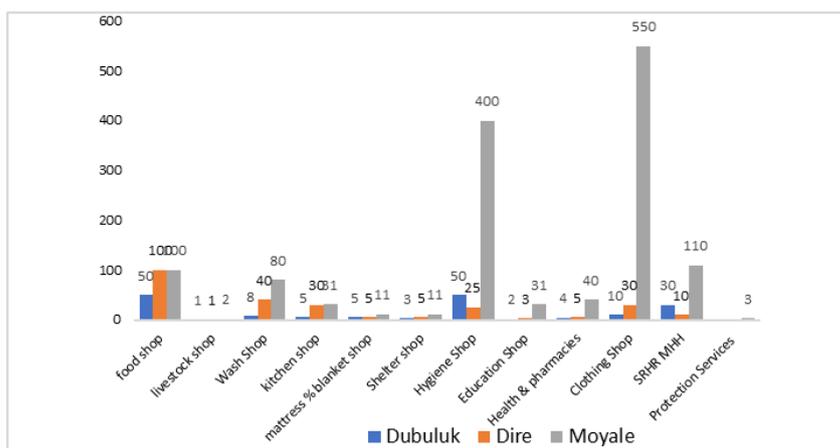
Focus group discussion were conducted to women and men in DIP sites of Mega kebele, Dire Woreda, and with Dubuluk IDP center at Dubuluk Woreda. A total of 24 women and 20 men attended the group discussion. The FGD aims to gather the situation of the households affected by drought including their basic needs and priorities.



## RESULTS OF MARKET ASSESSMENT

### NUMBER OF SHOPS BY SECTOR

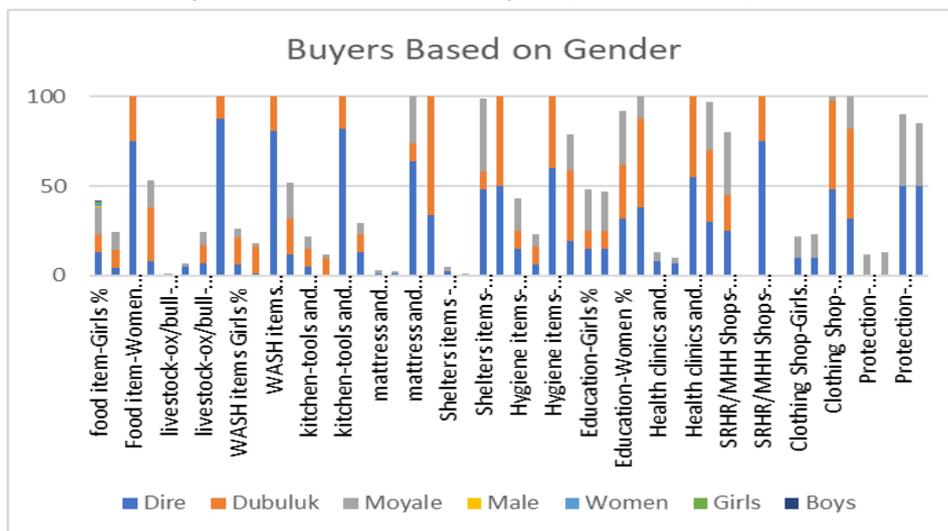
Of the 3 markets assessed in Borena Zone Moyale was by far the largest market compared to Dire and Dubluk. Shops with Clothing has the highest number of shops with more than 550 stalls/shops followed by non-food items such as hygiene ranging between 50-100, MHH 10-110, and food 50-100 respectively. Dire is a primary market and operates on a daily basis through market structures that are mostly permanent. Dubluk market opens only once a week



with most of its goods coming from Moyale except for food and shelter materials which were coming from Dali, Sashamane, and Addis Ababa.

## BUYERS BASED ON GENDER AND PRIORITIES

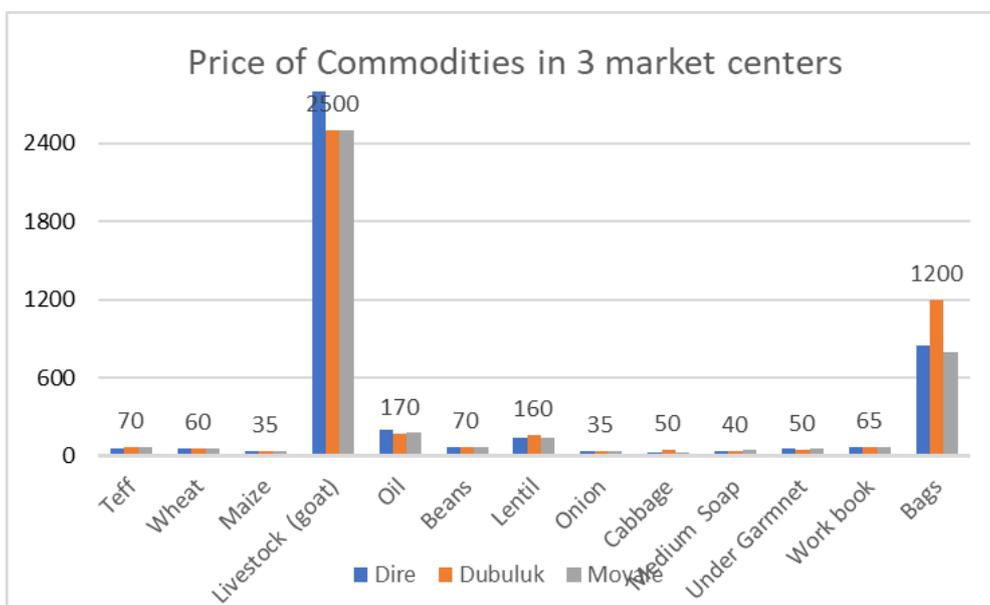
Based on the assessments conducted, buyers in the 3 markets assessed were largely women followed by adolescent girls and boys and girls. Their priorities were predominantly kitchen tools, food, WASH, hygiene, and MHH products. Around 73 percent of MHH (Menstrual Health and Hygiene) products in the market were purchased by women followed by an adolescent with only 27 percent. The priorities for men on the other hand were Live-stock and shelter materials and equally prioritize materials such as clothing, protection, and Education with women. Boys' participation in the market was quite low and only share 11 percent in the market traffic. However, in terms of education materials, boys and girls were actively engaged in the market particularly from July to September due to the school opening session.



## PRICES OF COMMODITIES IN THE 3 MARKET CENTRES

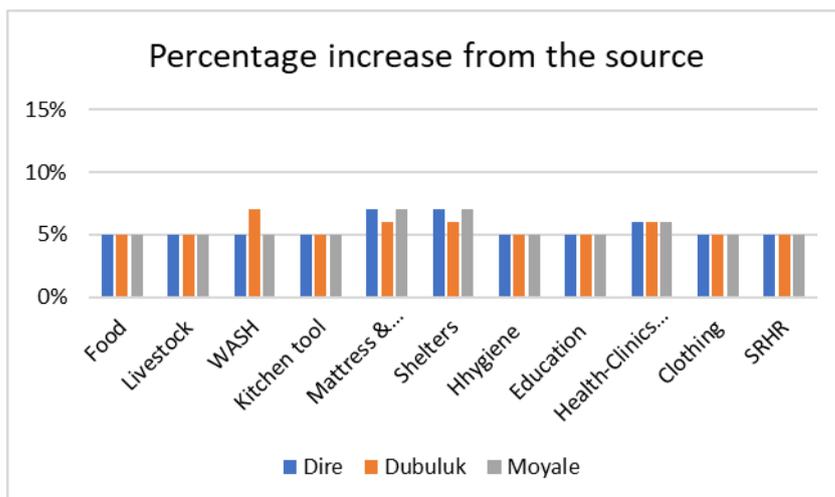
The price of most commodities is varied in the three markets and there is very little variation in food prices such as rice and wheat between 60-65, maize with price of 37, beans at 65, onion around 40, soap 40, and under-garments around 55 Birr respectively. The noticeable difference was observed in scholastic supplies, especially on bags and it was largely attributed to the quality, different options, and categories available in the market while workbooks had a similar range of price in the three markets i.e, around 65 Birr. The other price difference noticeable was for Cabbage with 50 Birr in Dubuluk, 30 in Moyale, and 23 birr in Dire, Oil is more expensive at 200 birrs in Dire compared to 170 birr in Dubuluk and 180 in Moyale while Teff is expensive in Dubuluk at the price of 70 birr compared to Dire with the price of 55 birr and Moyale at the price of 65 birr.

Lentil is more expensive in Dubuluk at the price of 160 birr compared to Moyale and Dire at the same price of 140 birr. The livestock (goat) is a bit expensive in the Dire market at the price of 2800 compared to Moyle and Dubuluk at the same price of 2500 Birr.



## PERCENTAGE INCREASE FROM THE SOURCE

There was minimal increase in price in between 5%-7% in the three markets compared to the source. Under the WASH items in Dubuluk, there was a 7% difference from the source while 5% was in Moyale and Dire. Mattress Blankets and Shelter items were different in Moyale and Dire but 5% in Dubuluk. The other items have a similar difference in the three markets. Generally, in all three markets, the price is set by the owners and regulated by the government through trade and industry offices, especially in food items.



## SOURCE OF PRODUCT

Sector/Items	Moyale	Dire	Dubuluk
Food	Kenya and Shashamane	Dila and Shashamane	Sashamane
WASH	Addis Ababa and kenya	Addis Ababa and Moyale	Addis Ababa
Kitchen equipment and tools	Addis Ababa and Kenya	Addis Ababa and Moyale	Addis Ababa
Mattress and blanket	Addis Ababa	Addis Ababa and Moyale	Addis Ababa
Shelters	Addis Ababa	Addis Ababa	Addis Ababa
Hygiene	Addis /kenya	Addis /Kenya	Addis Ababa/ Moyale
Education	Addis Ababa	Addis Ababa	Addis Ababa
Health clinics and pharmacies	Addis Ababa	Negele	Yabello
Clothing	Addis Ababa /Kenya	Kenya and Addis Ababa	Moyale & Addis Ababa
Protection services	No information	No information	No information
SRHR/MHH	Addis Ababa /kenya	Addis Ababa /kenya	Addis Ababa / Moyale
Livestock	Local	Local	Local

Moyale and Dire markets had their products sourced mostly from Addis Ababa and Kenya. Food products were sourced from Kenya and Sashamane in Moyale, Dila and Shashamane in Dire and Sashamane in Dubuluk market centers. While Dubuluk sources most of its products from Moyale and Addis Ababa and food materials from Dila and Sashamane. Some of its MHH products were also sourced out from Addis Ababa on top of the products from Moyale market. For Moyale Health clinics and Pharmacies, it was source out from Addis Ababa, while Dire from Negele and for Dubuluk from Yabello. Livestock such as ox, goat, sheep and camel were sourced locally for all the three market centers.

## STORAGE FACILITIES

Moyale has storage facilities for Hygiene materials and health products while Dubuluk and Dire have storage facilities for shelter materials and Health products

When asked about their capacity to re-stock in case of an increase in demand due to cash/voucher distribution, most of them said “yes”. In addition, they can also access credit in case they decide to increase the volume to anticipate demand due to cash transfers.

Sector/Items	Moyale	Dire	Dubuluk
Food	No	No	No
WASH	No	No	No
Kitchen equipment and tools	No	No	No
Mattress and blanket	No	No	No
Shelters	No	Yes	Yes
Hygiene	Yes	No	No
Education	No	No	No
Health clinics and pharmacies	Yes	Yes	Yes
Clothing	No	No	No
Protection services	No	No	No
SRHR/MHH	No	No	No

## WHO SETS THE PRICE?

All the items in the three markets Moyale, Dire, and Dubuluk set their own prices but the food item’s price is regulated by the trade and industry offices, government of Ethiopia in the three markets. Protection services are provided for free while medical services, as well as medicines, are largely regulated by the government.

Sector/items	Moyale	Dire	Dubuluk
Food	Owner but follow up by the government	Owner but follow up by the government	Owner but follow up by the government
WASH	Owner	Owner	Owner
Kitchen equipment and tools	Owner	Owner	Owner
Mattress and blanket	Owner	Owner	Owner
Shelters	Owner	Owner	Owner
Hygiene	Owner	Owner	Owner
Education	Owner	Owner	Owner
Health clinics and pharmacies	Owner	Owner	Owner
Clothing	Owner	Owner	Owner
Protection services	Free	Free	No information
SRHR/MHH	Owner	Owner	Owner
Livestock	Owner	Owner	Owner

## DISPLAY OF PRICES/LABELS

All the traders in the three markets don't display the prices of the items. Some of the traders mentioned the price fluctuation as a reason for not displaying.

## SAFETY AND SECURITY

Based on the result of the market assessment, all the markets were accessible to the affected population and no issues or barriers were noted in terms of access, security, and safety for the population including young adolescent girls, boys, women, and men of the households

## WILLINGNESS TO PARTICIPATE

All traders and shop owners are willing to participate in the cash and voucher assistance. Some of them have information about the cash and voucher programs in the area. However, All the traders in the three markets are happy to participate in cash and voucher programming for all the items mentioned in the survey.

Display prices?	Moyale	Dire	Dubuluk
Food	No	No	No
WASH	No	No	No
Kitchen equipment and tools	No	No	No
Mattress and blanket	No	No	No
Shelters	No	No	no
Hygiene	No	No	No
Education	No	No	No
Health clinics and pharmacies	No	No	No
Clothing	No	No	No
Protection services	N/A	N/A	N/A
SRHR/MHH	No	No	No

## EXISTING CVA PROGRAMS IN THE LOCALITY AND CAPACITY TO RESPOND TO INCREASED DEMAND

There are organizations implementing cash programming by the different organization's including PIE, AHA, and CARE in the program areas.

Almost all of the traders mentioned, they have the capacity to re-stock with the anticipated increase in demand. An average of 15 days is required to re-stock Health materials and Shelter items but for the other items, the average response time would be 5-7 days.

## FINANCIAL SERVICE PROVIDER'S

## AVAILABILITY

CBE (Commercial bank of Ethiopia), owned and operated by the government and Oromia bank have presence and operate in all the 3 markets assessed. The 3 market sites have good coverage by mobile phone network operating in the program areas and are willing to participate in the CVA program. There are also other commercial banks that expressed their interest to participate but most of them are located in Moyale.

Program Areas	Service provider	Type	Requirements	Challenges
<b>Bank</b>				
Moyale, Dire and Dubuluk	CBE	Commercial government bank		
Moyale, Dire and Dubuluk	Oromia	Private bank		
Moyale and Dire	Oromia cooperative	Private bank		
Moyale and Dubuluk	Sinqe	Private Bank		
Moyale	Awash, Hibret, Absiniya Dashen and Buna	Private bank		
<b>Mobile network</b>				
Moyale, Dire and Dubuluk	Ethio Telecom	Mobile money	ID card	

# FOCUS GROUP DISCUSSION, BORENA ZONE

FGDs were undertaken with adult women and men in Did Mega kebele, Dire Woreda, and with Dubuluk IDP center at Dubuluk Woreda to understand their priority needs in Borena zone of Oromia region.

## KEY FINDINGS:

- ◆ The acute problem was food shortage due to the recurrent drought and there is a high food gap and food insecurity for the entire household members and community. All community members were highly affected while children, PLWs (Pregnant and Lactating women), and PwD (Persons with Disabilities) were the most vulnerable and highly affected
- ◆ They have been facing a severe drought and almost lost all of their livestock due to a lack of fodder and Water.
- ◆ Food intake by the community was reduced to one time and the second meal consists of Tea/coffee.
- ◆ Social Safety programs have been stopped long back and now Government helped the community through Shock Responsive Social Protection (SRSP) to 20-30% of the beneficiaries
- ◆ Menstrual Health and Hygiene conditions are miserable due to a lack of access to clean water, sanitary pads, and detergents.
- ◆ There is cash programming implemented by PIE, Islamic Relief, Help Age, and food support by CARE/JEOP for around half of the population in the Zone for the coming six months starting from November 2022.
- ◆ People had no access to cash except the cash programming provided by a few NGOs due to the non-availability of work opportunities either on their own farms or on other farms.
- ◆ There were reports of adolescent girls and boys trafficking, and child labour issues pertaining to adolescent girls and boys who move to nearby cities and were involved in physical labour to complement food insecurity.
- ◆ Child protection issues were overall observed and Child labour was prominent in the community. Culturally child marriage was generally acceptable by the community while there was limited sensitization observed about the practice.
- ◆ For MHH (Menstrual Health Hygiene), they have the awareness and used sanitary pads before but they had no access to cash to buy sanitary disposable pads.
- ◆ There is one ECD centre and one primary school at a distance of 2-3 kilometres and the children go to school without scholastic materials and drop out because of lack of scholastic materials. There is no school feeding and also a lack of cash to afford scholastic materials.
- ◆ Though the food was provided by the CARE /JEOP, the beneficiaries were selling out the items to get cash and buy other basic needs. This was witnessed during FGD when a distribution was happening and the food was being transported directly to local market from the distribution centre. This raises the issue of “why not Cash” approach. Beneficiaries on receiving cash will have the choice and flexibility to meet their basic needs in the marketplace.

# KEY INFORMANT INTERVIEWS, OROMIA

The team interviewed government officials in the Dire and Dubuluk Woredas, Borena zone, and the following are the key points:

- ◆ The whole zone and the region were severely affected by the recent drought due to the failure of four consecutive rainfall and thus affected severely the production and productivity of livestock and agriculture.
- ◆ Almost 85% of the livestock was lost in Borena Zone and now Government helped the community through Shock Responsive Social Protection (SRSP) to 20-30% of the beneficiaries thereby leaving a gap of 55-65% of people in need.
- ◆ There is cash programming implemented by PIE, Islamic Relief, Help Age, and food support by CARE/JEOP for around half of the population in the Zone for the upcoming six months starting from November 2022.



# METHODOLOGY FOR GAMBELA REGION

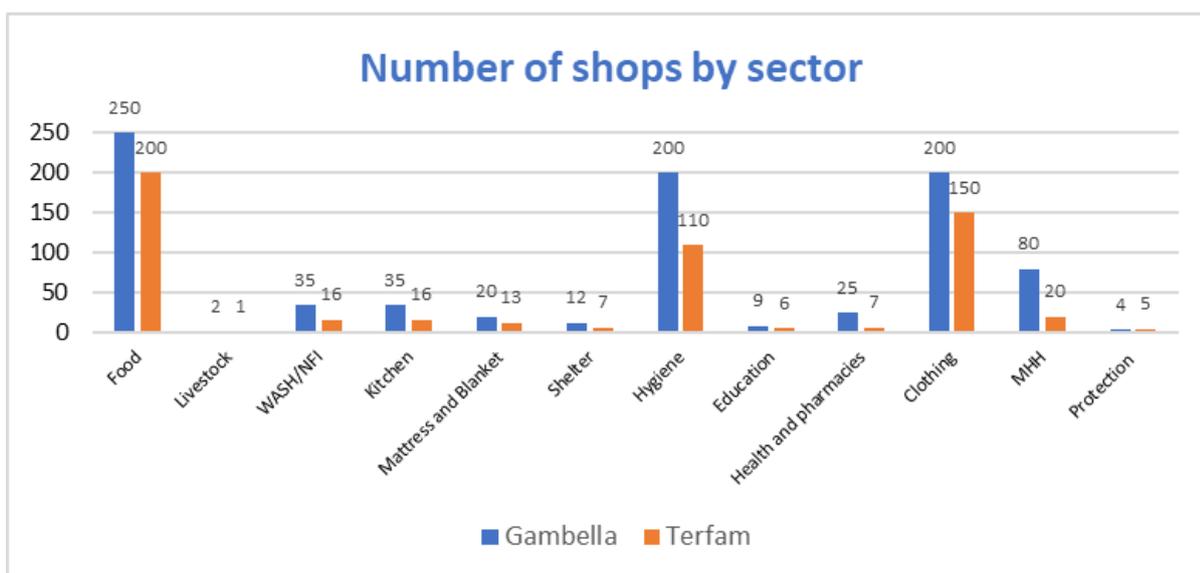
The study in Gambela region used a mixed modality to gather information. Market survey tool was used to gather information from the 2 market centres including Terfam and Gambela town to update the previous study conducted in the first quarter of 2022. Traders were interviewed using the tool to understand availability of supplies, prices including current inflation rates, and the supply chain.

Focus group discussion were conducted with women, men, adolescent girls and boys in Nguenyyiel Refugee Camp with people from South Sudan. A total of 20 women and 14 men attended the group discussion. The FGD aims to gather the situation of the households affected by food insecurity due to cutting of rations and the prevailing situation in the camp their basic needs and priorities

## RESULTS OF MARKET ASSESSMENT

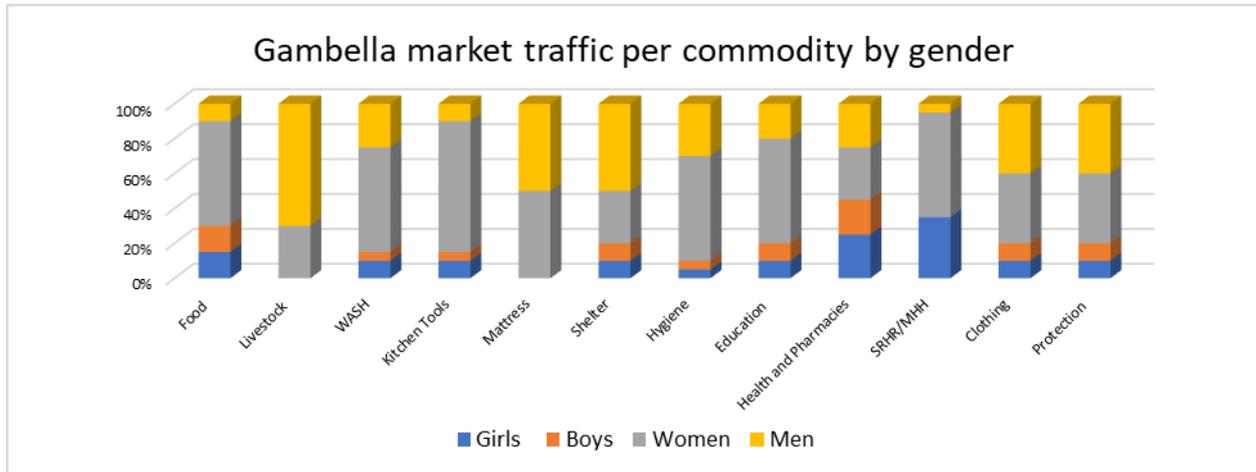
### NUMBER OF SHOPS BY SECTOR

Of the two markets assessed in the Gambela Region, the Gambela town market was by far the largest market compared to Terfam which was relatively small in size. Most of the shops in both markets sold food, hygiene items, and clothing which accounts for more than 90 percent of the available commodities in the market. These were followed by menstrual health and hygiene (especially in Gambela) WASH and kitchen materials. There were 2 marketplaces for livestock trading in Gambela and only one in Terfam. Both markets are primary markets and operate on a daily basis through market structures that are mostly permanent in the Gambela town market but most of the Terfam market structure is not permanent. The road from Gambela to Terfam is good, is 42 km from the program area and approximately an hour drive by car. The refugees largely access Terfam market which is closer to the camps while they seldom access Gambela market since it is bit far and officially, they are not permitted due to their status of being “refugees”.

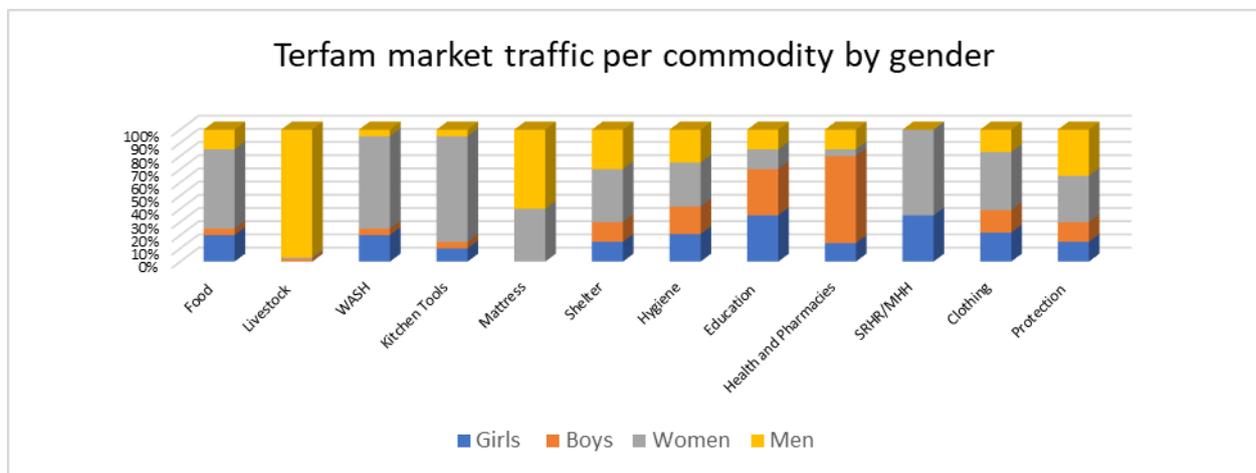


## BUYERS BASED ON GENDER AND PRIORITIES

Based on the assessments conducted, buyers in the two markets assessed were largely women followed by men. In Gambela, women were responsible for buying items such as food, kitchen tools, WASH items, Hygiene/MHH, and education materials. Priority of men, on the other hand, were livestock, shelter, and mattresses including clothing and protection equally shared with women. Around 60 percent of MHH (Menstrual Health and Hygiene) products purchased in the market were by women followed by adolescent girls with only 35 percent. Priority of boys were the same as girls such as food, education, clothing and protection except for SRHR/MHH items.



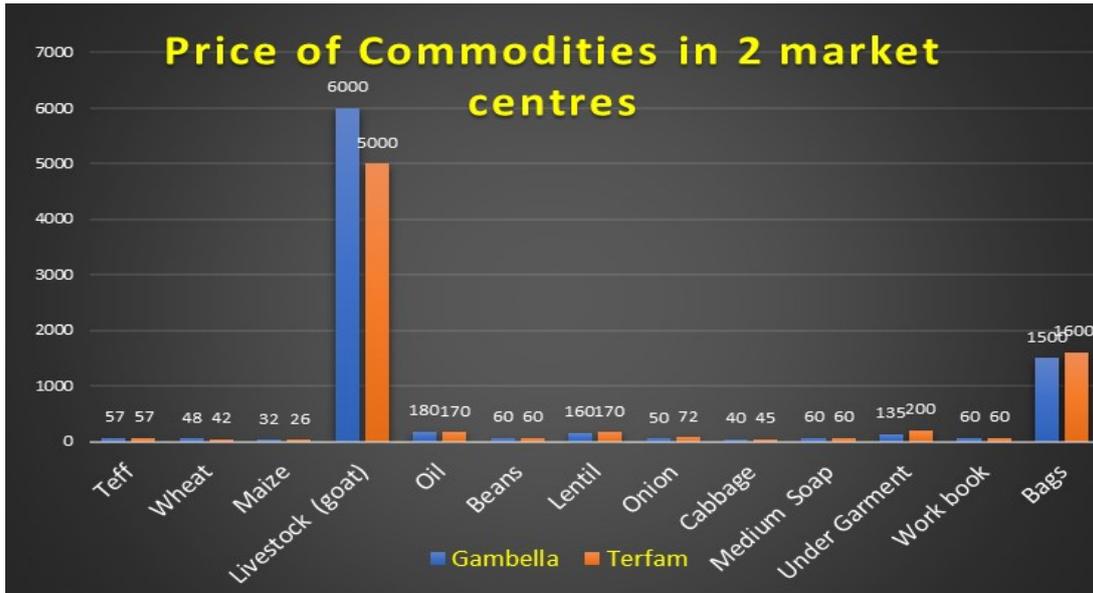
In Terfam, women, priorities were predominantly, kitchen tools, WASH, Hygiene, MHH, and Education products. The priorities for men, on the other hand, were Livestock, mattress and shelter materials while they also shared their priorities with women on materials such as clothing and protection. Boys' participation in the market was relatively low and prioritized health and pharmaceutical items followed by education, hygiene items, clothing, and protection. Girls shared the similar priority with boys except in buying SRHR / MHH items.



## PRICES OF COMMODITIES IN THE TWO MARKET CENTRES

In general, the price of commodities was a bit expensive in Terfam than Gambela market centres since the majority of the commodities were transported from Gambela and Addis Ababa. Prices of commodities between the two markets varied slightly, as observed in the food items such as wheat between 42-48, maize 26-32, Oil 170-180, lentil 160-170 cabbage and 40-45 Birr respectively. The noticeable difference was observed in livestock (goats) which is expensive by 1,000 birrs in Gambela at 6,000 birrs compared to Terfam with an average price of 5,000 birrs. Another noticeable price difference was the prices of onions and undergarments, it was more expensive in Terfam. The onions were 50 birrs in Gambela Town compared to 72 birrs in Terfam while undergarments were 135 birr in Gambela town compared 200 birr in Terfam markets. Teff, beans, medium laundry soap, and workbook were available at the same price in the

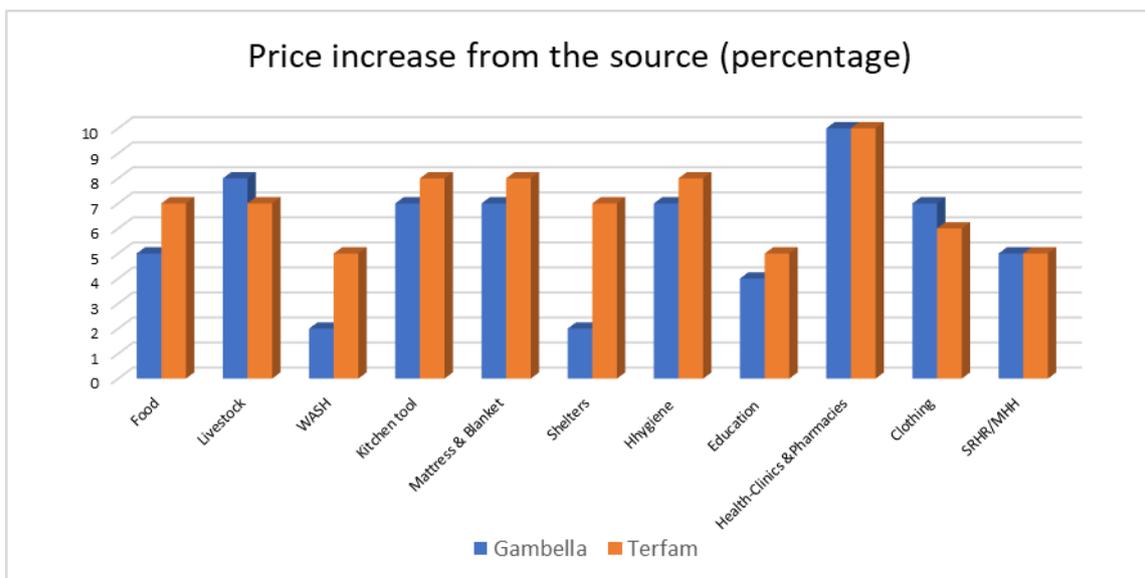
two markets. The school bags were more expensive in Terfam than in Gambela town markets i.e.1600 and 1500 birrs respectively.



## PERCENTAGE INCREASE FROM THE SOURCE

Generally, there were slight differences between the two markets in terms of price markup or price increase from the source except for WASH and shelter materials. For WASH items the price increase in Terfam was 5 percent compared to 2 percent only for Gambela. For shelter, the price markup in Terfam was 7 percent with only 2 percent in Gambela. For the food items, price markup in Gambela was only 5 percent compared to Terfam with 7 percent. The MHH items have a similar price markup in both markets.

Generally, in the two markets assessed, it was the traders or owners who set the price of commodities while some items were regulated by the government through the trade and industry offices, especially food and shelter items.



## SOURCE OF PRODUCT

Most of the traders source-out their products from Addis Ababa while some of the traders in Terfam got their supplies from Gambela as it is much cheaper than travelling all the way to Addis Ababa. Food products were generally sourced from Addis Ababa while some traders from Terfam were buying supplies from Metu in Gambela town. The health and pharmaceutical products were generally source out from

Jimma and Addis Ababa in Gambela town market while Terfam source out their supplies from Adama in addition to Jimma and Addis Ababa. The Livestock such as ox, goat and sheep were sourced locally and from Metu, Gambela.

Sector/Items	Gambela	Terfam
Food	Addis Ababa & Metu	Gambela town & Addis Ababa
WASH	Addis Ababa	Gambela town & Addis Ababa
Kitchen equipment and tools	Addis Ababa	Gambela town & Addai Ababa
Mattress and blanket	Addis Ababa	Addis Ababa
Shelters	Addis Ababa	Addis Ababa
Hygiene	Addis Ababa	Gambela town & Addis Ababa
Education	Addis Ababa	Gambela town & Addis Ababa
Health clinics and pharmacies	Jimma and Addis Ababa	Jimma, Adama, and Addis Ababa
Clothing	Addis Ababa	Addis Ababa
SRHR/MHH	Addis Ababa	Gambela town and Addis Ababa
Livestock	Local and Metu	Local and Metu

## STORAGE FACILITIES

All traders in Gambela had storage facilities for all the basic commodities commonly bought by project participants. Traders in Terfam have storage facilities for most of the basic items except for clothing and MHH. When asked about their capacity to re-stock in case of an increase in demand due to cash/voucher distribution, most of them said “yes”. In addition, they also had access to credit in case they decided to increase the volume to anticipate demand due to cash transfers. The presence of storage facility was a strong indicator of the trader’s capacity to supply the basic needs of project participants swiftly.

Sector/Items	Gambela	Terfam
Food	Yes	Yes
WASH	Yes	Yes
Kitchen equipment and tools	Yes	Yes
Mattress and blanket	Yes	Yes
Shelters	Yes	Yes
Hygiene	Yes	Yes
Education	Yes	Yes
Health clinics and pharmacies	Yes	Yes
Clothing	Yes	No
SRHR/MHH	Yes	No

## WHO SETS THE PRICE?

The owners set the price for all the items in both Gambela and Terfam markets, except for food and shelter prices which were regulated by the trade and industry offices in both markets.

Sector/items	Gambela	Terfam
Food	Owner but follow up by	Owner but follow up by
WASH	Owner	Owner
Kitchen equipment and tools	Owner	Owner
Mattress and blanket	Owner	Owner
Shelters	Owner but follow up by	Owner but follow up by
Hygiene	Owner	Owner
Education	Owner	Owner
Health clinics and pharmacies	Owner	Owner
Clothing	Owner	Owner
Protection services	Free	Free
SRHR/MHH	Owner	Owner
Livestock	Owner	Owner

## DISPLAY OF PRICES/LABELS

All the traders in both markets do not display the prices of the items. Some of the traders mentioned the consistent price fluctuation as a reason for not displaying.

Display prices?	Gambela	Terfam
Food	No	No
WASH	No	No
Kitchen equipment and tools	No	No
Mattress and blanket	No	No
Shelters	No	No
Hygiene	No	No
Education	No	No
Health clinics and pharmacies	No	No
Clothing	No	No
SRHR/MHH	No	No

## SAFETY AND SECURITY

Based on the result of the market assessment, all the markets were accessible to the affected population and no issues or barriers were noted in terms of access, security, and safety for the population including young adolescent girls, boys, women, and men of the households

## WILLINGNESS TO PARTICIPATE

All traders and shop owners are willing to participate in the cash and voucher assistance. Some of them have information about the cash and voucher programs in the area. However, All the traders in the two markets were happy to participate in cash and voucher programming for all the items mentioned in the survey.

## EXISTING CVA PROGRAMS IN THE LOCALITY AND CAPACITY TO RESPOND TO INCREASED DEMAND

DCA and ACF are the only organization implementing Vouchers for fresh food in almost all of the traders mentioned that they have the capacity to re-stock with the anticipated increase in demand. An average of 7 days is required to re-stock all the items.

## FINANCIAL SERVICE PROVIDER'S AVAILABILITY

Wegagen, Dashen and Hibret banks were present in both markets. These banks are privately operated. Aside from banks, both areas have strong mobile phone network coverage. Ethio and other Telecoms operating in the program areas are willing to participate in the CVA program. There are also other commercial banks like Awash, Abyssinia, Cooperative, and Oromia Nib operating in the project sites that expressed their interest to participate but most of them are located in Gambela Town.

Program Areas	Service provider	Type	Requirements	Challenges
<b>Bank</b>				
Gambela and Terfam	Wegagen, Dashen, and Hibret,	Commercial Private Bank		
Gambela Town	Awash, Abyssinia, Cooprtarive, Oromia, Nib	Private Bank		
Gambela Town	Commercial Bank of Ethiopia	Commercial Government Bank		
<b>Mobile network</b>				
Gambela and Terfam	Ethio Telecom	Mobile money	ID card	

## FGD IN NGUENYYIEL REFUGEE CAMP, GAMBELA REGION

FGDs were undertaken with adult women, men, and adolescent girls and boys in the Nguenyyiel South Sudanese refugee camp in Gambela Region to understand their priority needs.

### KEY FINDINGS:

- ◆ One of the key problems identified was food shortage due to the cutting of rations as the number of resources generated from food aid was declining as emergencies happening in different parts of the world were competing for the same source of assistance. UNHCR decided to cut food rations by the 45% since November 2021. i.e. from 15 kg to 7 kg per person per month. This resulted in high food gap and food insecurity for the entire household members and the refugee communities. All community members were highly affected while children, PLWs (Pregnant and Lactating women) and PWD (Persons with Disabilities) bore the brunt of the food shortage being the most vulnerable among the refugee population.



- ◆ With the cutting of ration the food items which were normally planned for a month now lasts for 5-10 days. This would mean that the community goes to bed without food for 20 days a month until the next distribution following month and should it happen on time which is not the case. The refugees during interaction confirmed distribution of food once in 2-3 months. This was a big challenge for the refugees, especially for girls, boys, and women. This team had visited the camps in November 2021 and then in November 2022. There was a huge difference in the behaviour of adolescent girls and boys. For ex. the adolescent boys were seen asking for basic and desirable items such as sun glasses while this was not the case in November 2021. The sexual abuse of girls and women had increased drastically and this was attributed to the severe shortage of food items in the camp. There were also reports of stealing the materials of Child Friendly Spaces run by Plan International. This is largely due to the adolescents were without any food or livelihood and they steal and sell materials to meet their basic needs.
- ◆ Earlier they had food 3 times a day but with the cutting of rations they only take 1 meal a day to cope with food shortage. The rest of the day, households survive through coffee/tea. This coping mechanism is commonly practiced by households in the refugee camps to stretch available food until the next assistance. As refugees, they are not legally entitled to work and livelihood opportunities for them are minimal. Access to cash assistance is also not possible due of their status of being a “refugee”.
- ◆ There was no source of income, and they only depend on humanitarian aid support and even if they manage to find work the average daily wage rate is only 20 birr per day which is again discriminatory and under paid compared to more than 200 Birr per day of wage in other regions.
- ◆ The distance of the nearest waterpoint from their settlement is about 30 minutes and it would take at least maximum of 1-hour to fetch water. It's the women, who normally task to do this as fetching water is treated as demeaning for men to do. Generally, going out during the day posed no risks for women and adolescent girls but not in the evening.
- ◆ Menstrual Health and Hygiene conditions were miserable due to a lack of access to sanitary pads and detergents. This is also due to lack of access to cash. They were struggling with food needs and access to sanitary pads and other MHH needs was a distant dream.
- ◆ Ongoing voucher program by DCA was observed for the Pregnant and lactating women (PLW) but not enough to address the basic needs of all PLWs.
- ◆ The refugees had no means of livelihood for the few Households engaged in selling firewood to augment household income. The limited opportunity resorted some households to cut trees and sell the firewood for additional income. Though this little income was a temporary relief for some families, but this comes with environmental degradation through cutting for trees.
- ◆ Child protection issues were observed including child labour as a commonly practice in the community. Another protection issue was about child marriage. Culturally, child marriage is tolerated in the community, but the number of cases soared to the highest level due to food insecurity. Parents forced their children to marriage in exchange for the dowry or gits and to reduce the number of head count and to feed because of the shortage of food in the households.
- ◆ Parents were unable to provide basic needs of children especially the needs of adolescent girls. Adolescent girls who stay with their parents feel unsafe due to the increasing violence against girls and women such as beating and sexual violence.



# FEASIBILITY OF CASH/VOUCHER PROGRAMMING

Understanding whether or not CVA is feasible and an appropriate means by which to respond to needs in each context relies on several critical factors.

For example, if cash transfers are to be an effective way of meeting the needs of people affected by crisis:

- ◆ It is critical that markets can supply the goods and services that people need, that people can afford them, and people are able to access those markets. In this scenario, markets are fully functional and integrated.
- ◆ To ensure that programmes are efficient, safe and accountable, it is important that an appropriate means of delivery can be identified. Here there are multiple options such as Mobile, Banks, Post Office and Micro Finance delivery mechanism. The best possible option to be considered based on the context and situation.
- ◆ Given the increasing use of CVA globally and multiple benefits cash can provide over commodity-based transfers (under the appropriate conditions), this study sought to consider the feasibility and appropriateness of cash/voucher transfers in emergencies due to hunger and food insecurity crisis in Borena, Oromia and Gambela regions of Ethiopia. The study considered contextual factors, including the levels of acceptance by stakeholders, and pre-existing or crisis-related socio-economic vulnerability.
- ◆ To understand concerns about feasibility in the region, markets and financial services were explored in some depth.
- ◆ Thorough discussions with adolescent girls, boys, women and men from IDP camps and host communities indicate the strong preference for cash/voucher programming as the modality of response.
- ◆ Discussion with humanitarian agencies including CWG, FSPs, WCD, Government agencies and key humanitarian agencies are of the strong opinion to go ahead with CVA as the preferred modality of response.

## CONCLUSION

- ◆ The feasibility study found cash and/or voucher or even mix modality to be highly feasible in the areas.
- ◆ Humanitarian agencies have been undertaking CVA covering multiple needs of the affected population.
- ◆ There is a strong appetite for CVA by all stakeholders including communities, humanitarian agencies, donors, FSPs and authorities.
- ◆ The extent to which CVA has already been used in past and current humanitarian response is a strong indicator of the feasibility of using the modality in future emergencies.
- ◆ The approach to using cash in humanitarian response in Ethiopia is now enroute a “reference” modality of response. However, there are rooms for improvement where the approach can be uniform through larger coordination among the humanitarian agencies or a cash coordination mechanism.

## RECOMMENDATIONS

Based on the findings of the study, Plan International Ethiopia is recommended to implement the project with CVA modality in the proposed locations. Here below are some specific recommendations.

## RECOMMENDATIONS ON CASH AND VOUCHER ASSISTANCE (CVA) MODALITIES

- ◆ It is recommended Plan International Ethiopia (PIE) aligns its cash transfer value for MPCGs to 4500 Birr /HH (€ 79) maximum per HH until the revised MEB is established. Also, PIE should put a contingency plan in place for increasing the cash/voucher transfer value in accordance with the foreseen revised MEB value and keep donors informed in the respective proposals. Should the MEB be not revised during the implementation phase of a programme then the same amount can be used to reach out to more beneficiaries or top-up cash transfer to the same beneficiaries.
- ◆ Cash for livelihoods- Projects should prioritise providing cash as start-up grants to establish enterprise, workshop and to purchase the livelihood kits.
- ◆ Commodity voucher- Commodity voucher is recommended for activities when the cash transfer doesn't work or not permitted by authorities or there is a speculation that the deliverable will not be achieved with cash transfer. This could be undertaken where cash transfer is not permitted such as Gambela refugee camps.
- ◆ Traders on vouchers have been identified and PIE should start delivering the activities through vouchers which is both cost efficient and cost effective.
- ◆ Cash for Work CFW: should be undertaken for rehabilitation of public assets such as in schools for cleaning and levelling the ground, the classrooms and toilets, construction of Child Friendly Space and Education Centres.
- ◆ Post Distribution Monitoring (PDM) should be conducted within two weeks of cash or voucher distribution.

## RECOMMENDATIONS ON PROTECTION, MHH AND EDUCATION OBJECTIVES

- ◆ Plan International Ethiopia is highly encouraged and recommended to undertake CVA modality for activities under Protection, MHH and Education objectives. There are several avenues such as the project can provide cash/voucher support instead of "material support" to help beneficiaries meet the quality requirements associated with caring for survivors of GBV (Gender Based Violence) and child protection cases; providing cash to teachers, providing scholastic materials through vouchers in the camp settings (Gambela and IDP camps), providing MHH materials such as under garments, sanitary pads, hygiene materials through CVA and many more. The team has been briefed on this and they are most welcome to consult Global Hub CVA team for any technical support.

## RECOMMENDATION ON LIVELIHOOD ACTIVITIES

- ◆ On farm activities if promoted well will not only be a source of income for the poor people but will also help to address food insecurity and under nutrition issues. Thus, on-farm activities should be encouraged.
- ◆ There will be different types of potential livelihood activities with corresponding training duration, costs and start-up grants. Identified potential trainings for on/off farm livelihoods should follow the prescribed training modules of corresponding ministry or other authorised institutes. Also courses should be adapted and contextualised in consultation with the potential beneficiaries. The trade/vocation selected should fit with the available value chain to ensure consistent income.
- ◆ There are capable suppliers for the livelihood kits (as start-up support) in most of the markets assessed in Oromia and Gambela. The wholesalers/suppliers have sufficient capacity and commitment to supply at any location in the assessed areas to the beneficiaries through cash or vouchers. The project team should coordinate with them well in advance for their necessary preparation.
- ◆ Communities in the drought areas have lost their cattle. It was observed the drought survivors were goat, sheep and camels. Communities should be encouraged to opt for sheep and goats (shots) and if possible, camels (who can manage). Grants should be planned for such restocking of livestock on priority.
- ◆ Improved quality seeds (such as vegetable seeds) are not available in all markets. When there is an interest in vegetable production, seeds should be distributed in-kind or through voucher modality to ensure quality. This can be good source of nutrition especially in the camp settings where people have access to one meal a day.
- ◆ Usually there are savings group in all communities and these groups can be sensitised and capacitated as per the principles VSLA and some projects can be designed to implement different activities through community level VSLAs. The livelihood beneficiaries should be linked with the existing VSLAs to promote saving credit activities to further promote their enterprises.

## RECOMMENDATIONS FOR GENDER / CROSS-CUTTING ISSUES

- ◆ In some contexts, women reported cases of domestic violence when they resist to the attempt of their male relatives to control the cash given to them. To mitigate such risks and ensure we “Do No Harm” through our intervention.

PIE should:

- ◆ Conduct gender and risk analysis to understand the power dynamics potential risks of GBV induced by the cash/voucher programming. Engaging the affected communities’ males and females in the identification of the beneficiaries, pre-distribution sensitization of all genders will hence be necessary as also setting up of robust feedback response mechanism for addressing safeguarding, protection and quality concerns
- ◆ Ensure CVA distribution mechanisms take gender considerations on location, time and safety issues, ease of access and minimise overburdening beneficiaries.
- ◆ Establish safeguarding and accountability mechanisms including complaints procedures. Ensure that both women and men staff represent the complaints/grievance section so that different members of the community feel comfortable in reporting.
- ◆ Ensure women beneficiaries as much as possible but not less than 50% of the total participants
- ◆ The CVA Specialist of PIE should remain in close coordination with the Global CVA team and request for technical support as and when required.

# ANNEXES



## PLAN INTERNATIONAL RAPID ASSESSMENT Focus Group Discussion (FGD) GUIDE ADULTS

COUNTY	VILLAGE	SETTLEMENT	GENDER OF GROUP	NUMBER OF PARTICIPANTS	NAME OF FACILITATOR
<b>Instructions</b>					
<p>Convene a group of between 8-12 adult people for ease of managing the group and effective participation. Adult people to participate in this group discussion will be grouped according to the following age groups: 18-24 years, 25-45 years, 46-60 years and Above 60 years. A male moderator and male note taker should facilitate male FGDs while Female moderator and female note taker talks to female participants. Introduce yourselves and explain the purpose of the group discussions. Encourage all participants to freely participate. Moderator to ensure active participation of all people by encouraging the quiet ones while respectfully controlling the dominating ones. Capture what they are saying verbatim or correct summary. Leave your views outside the discussion, just facilitate and capture their responses. Reassure people on confidentiality and know how to handle sensitive information.</p>					
<b>GENERAL QUESTIONS</b>					
1	What are the main problems currently facing your community? What are the specific problems facing by female, male, old people and people with disabilities?				
2	Out of these problems you raised, which one is the biggest problem that concerns you most? (Only 1)?				
3	What are you doing to address this problem as a community?				
4	Who is helping you to address this main problem (Someone outside your community e.g. NGOs).				
<b>SECTION A: FOOD SECURITY AND LIVELIHOODS</b>					
A1	What are the main types foods normally consumed by households in this community? Rank in order of importance, with 1 being the most important				
Name of food			Importance (1 being the most important)		
<input type="checkbox"/>	Sorghum				
<input type="checkbox"/>	Maize				
<input type="checkbox"/>	Millet				
<input type="checkbox"/>	Rice				
<input type="checkbox"/>	Cassava				
<input type="checkbox"/>	Sweet potato				
<input type="checkbox"/>	Potato				

<input type="checkbox"/> Beans	
<input type="checkbox"/> Fish	
<input type="checkbox"/> Meat	
<input type="checkbox"/> Oil	
<input type="checkbox"/> Vegetable and fruits	
<input type="checkbox"/> Other (please specify)	

A2: On average what are the households' main source of each of the following food items? –Select only one main source used by most households.

Food	Own production	Market	Gathering / collecting / hunting / fishing	No Access
Sorghum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maize	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Millet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cassava	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sweet potato	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Potato	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Beans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Meat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vegetable and fruits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A3	Has the main food sources changed between November last year and now? • If Yes How?	
A4	On average how much cereal food stock do you have in your households for consumption? Who has access and who controls the food stock in your household?	
A5	On average how long will the current food stocks in your households going to last? Probe for average time in months.	
A6	Has the amount of food that people in your households are eating since November last year changed? If Yes, how has the amounts changed?	<input type="checkbox"/> Amount consumed has decreased <input type="checkbox"/> Amount consumed has increased <input type="checkbox"/> Amount consumed is about the same
A7	Why has the amounts changed?	



A8		If you do not have enough food or money to buy food in your households, how do you cope with the situation?	
Type of coping mechanism		Frequency (Number of days practiced per week)	
<input type="checkbox"/>	Rely on less preferred and less expensive food		
<input type="checkbox"/>	Borrow food, or rely on help from friends or relatives		
<input type="checkbox"/>	Limit portion size at meals		
<input type="checkbox"/>	Restrict consumption by adults in order for small children to eat		
<input type="checkbox"/>	Reduce number of meals eaten per day		
<input type="checkbox"/>	Do not eat the whole day		
<input type="checkbox"/>	Collect more wild foods than usual for the season		
<input type="checkbox"/>	Sell more animals than usual		
<input type="checkbox"/>	Consume seed stocks held for the next season		
<input type="checkbox"/>	Other (Specify)		
A9		Currently what are the main sources of income or other means that support your household's daily living?	
<input type="checkbox"/>	Agriculture		
<input type="checkbox"/>	Livestock		
<input type="checkbox"/>	Fishery		
<input type="checkbox"/>	Petty Trade		
<input type="checkbox"/>	Remittance		
<input type="checkbox"/>	Regular salaried employment		
<input type="checkbox"/>	Small business		
<input type="checkbox"/>	Casual wage labour		
<input type="checkbox"/>	Selling of natural resources (charcoal, grass, firewood.)		
<input type="checkbox"/>	Bee keeping		
<input type="checkbox"/>	Others		
A10	Has there been any change in these main sources of income or means of living between November last year and now? • If Yes, what changed?		
A2	What is the average cost of casual wage labour per day per person?		
<b>SECTION B: WASH</b>			
B1	What is the current water source for drinking for people in this location		
B2	What is the current source of water for bathing, washing clothes and other domestic use?		

B3	How much water is available per person per day in households generally?					
B4	What is the distance of the water point from your house? Who is responsible for the water supply? What are the safety and security issues linked to the water supply?					
B5	Do households have water containers with lid available for water storage?					
B6	Has there been any change to water access in this community now compared to November last year?					
B7	If Yes, How has this changed?					
B8	Where are you currently defecating? Separated for female and male? Adapted to people with disabilities?	<input type="checkbox"/> Pit latrine (with concrete slab) <input type="checkbox"/> Open defecation <input type="checkbox"/> Emergency/temporary latrine <sup>1</sup> <input type="checkbox"/> Other (Specify)				
B9	Are you comfortable to use the latrine or designated defecation area at night? • If NO Why?					
B10	Ask participants using different methods as selected above to raise their hands and count the number of participants using each methods.	Number using pit latrine _____ Number using Open defecation _____ Number using Temporary latrines _____ Number using dig & bury method _____ Other (Specify) _____				
B11	What type of support do people here need to maintain clean environments and excreta disposal?					
B12	When do you wash your hands at your house?					
<b>SECTION C: CHILD PROTECTION</b>						
C1	How are boys and girls affected by the current food insecurity/drought situation?	Boys				
		Girls				
C2	Are there children in your community who have been separated from their parents or usual caregivers during the period from November Last year to date?					
C3	If Yes. What were the main causes of these separations?					
C4	If Yes, How many girls and boys have been separated from their usual caregivers in this community?	<table border="1" style="width: 100%; text-align: center;"> <tr> <th style="width: 50%;">Boys</th> <th style="width: 50%;">Girls</th> </tr> <tr> <td> </td> <td> </td> </tr> </table>	Boys	Girls		
Boys	Girls					

<sup>1</sup> Temporary latrines with temporary structure and plastic/wooden/thatched floor.

C5	How are separated/ unaccompanied girls and boys cared for in your community?		
C6	Has there been any change in your ability to provide basic services (Food, education, clothes etc) to your girls and boy now compared to last November? What about adolescent girls?		
C7	IF Yes, How has it changed?	<input type="checkbox"/> More able to provide children's basic needs <input type="checkbox"/> Less able to provide children's basic needs	
C8	What are the reasons for such changes?		
C9	Are there specific groups of girls and boys who have less access to basic services like food, play, clothes than others in this community?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
C10	IF Yes, Which groups of children are these? <ul style="list-style-type: none"> <li>• WHICH services are they not accessing</li> <li>• WHY are they not accessing services?</li> </ul>		
C11	Have there been any noticeable changes in children's behaviour since last November? What about adolescent girls?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
C12	IF Yes, What kind of behavior changes have you noticed in girls and boys? What about adolescent girls?	Girls Boys	
C13	IF Yes, What do you think are the causes of these changes in behaviours?		
C14	Are there any girls and boys in this community who are involved in hard labor or child marriage?  Hard labour                      Child marriage		
C15	IF YES, What types of work are these children involved in? Probe for more options.		
C16	Has there been an increase in children being involved in this type of work from November last year to now? If YES, WHY?		
C17	Which groups of children are more involved in that type of work? What is the estimate number of children involved in that work in your community?		
C18	Are there any other forms of child abuse including child marriage, neglect, exploitation or violence against children happening in this community? IF Yes, Give details. Who violated		



C1 9	What are the causes for such violations of children's rights?	
<b>D. MHH</b>		
D1	How are girls and women managing their menstruations during this situation? What type of materials is being used?	
D2	<i>what materials girls and women would prefer to use. Are those materials readily available in shops and markets? Are they affordable?</i>	
D3	Do girls and women have access to facilities where they can change, wash, dry, and/or dispose of menstrual products and cloth?	
D4	What are your biggest worries or concerns when it comes to menstrual health management in your community during this period?	
D5	<i>practical barriers such as lack of access to water and safe facilities, social or cultural barriers, myths and stigma, restrictions on movement, access to MH products, incl. barriers related to costs</i>	
D6	Are there adolescent girls in your community who are pregnant or young mothers?	
D7	Where can adolescents and young people, in particular girls, access health care, including sexual and reproductive health services and information such as contraception, STI and HIV testing, or maternal health care?	
D8	What would you want to see in your community that would improve access to for example contraceptives or sexual and reproductive health care?	
<b>SECTION E: EDUCATION</b>		
E1	How many of the following groups of schools are in this village?	ECD centres
		Primary school
		Secondary school
		Vocational training



E2	Are there school-age children within this community who are currently not attending school?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
E3	If YES How many boys and girls?	Number of girls	Number of boys
E4	IF Yes, What are the reasons why they are not attending	Girls	
		Boys	
E5	Have households faced any challenges to send girls and boys to school between November last year and now?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
E6	IF YES, What are the reasons for the challenges? <ul style="list-style-type: none"> <li>• What did you do to manage those challenges? –probe for prioritization of children to send to school.</li> </ul>		
END			



**Market Assessment (Observation and Traders' Survey)**

Date	
Name of the Market	
Name of the District	
The geographic location of the market	
1=Primary, 2=Secondary	<input type="checkbox"/> Primary market <input type="checkbox"/> Secondary market
Frequency of market	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly
Type of market infrastructure <i>[tick all that apply]</i>	<input type="checkbox"/> Temporary makeshift structure <input type="checkbox"/> Permanent open structures <input type="checkbox"/> Adjoined individual shops <input type="checkbox"/> Other _____
Catchment areas of the market including distances (Km)	

This table is used to identify the basic commodities available in the market.

Write **Y** if the stall/shop is open or products are available and **N** if not. Indicate the number of stalls that offer the basic commodities listed under the items.

Stalls/Shops		
Items	Y/N	Number



Food (sorghum, Maze, rice, oil, sugar, milk)		
Livestock (ox/bull, goat, and sheep)		
WASH (bucket, water jug, gloves, detergents)		
Kitchen tools and equipment (stove, pots, plates)		
Mattress and blanket		
Shelter (roof materials, nails, wood, )		
Hygiene (bath soap, toothpaste)		
Education (school materials like paper, pencils etc)		
Health clinics and pharmacies (medicines, clinics for consultations)		
Clothing		
Protection services (e.g. psychosocial support services, legal services, birth registration offices)		
SRHR/MHH (disposable Pads, - Reusable pads, underwear menstrual cup)		

#### A. Demand for Basic Commodities by age and sex

This table is used to gather information from shop owners on the daily traffic of buyers and demand for basic commodities by age and sex.

Consult/interview shop owners to provide information on the estimated percentage of daily buyers/client disaggregated by age and sex.

Approximate Buyers/Clients (Daily)					
Type of stall/shop	Total	Girls %	Boys %	Women %	Men %
Food					
Livestock					
WASH (Jerry Cans, Soap Bath/laundry)					



Kitchen tools and equipment					
Mattress and blanket					
Shelters					
Hygiene					
Education					
Health clinics and pharmacies					
Clothing					
Protection services					
SRHR / MHH (Sanitary pads, Under garments)					

- Number of people with disability accessing critical market systems in crisis and non-crisis time?
- How do people with disability access critical market systems in crisis and non-crisis times? (open)

#### B. Seasonality

This table provides information on the seasonality of basic commodities based on the demand per month.

- Conduct an interview with shop owners on the months with high demand for specific commodities and the months for the lean season.
- Write at least 3 months for peak season and 3 months for the lean season.
- Provide supporting information/reasons.

Peak and Low Commodity Marketing Months/Seasons								
Major items (food, WASH, shelter, NFI, MHH, SRHR, Livestock etc)	3 Peak marketing months				3 Low marketing months			
	Month 1	Month 2	Month 3	Reason(s)	Month 1	Month 2	Month 3	Reason(s)



<b>Food :</b>								
Teff								
Wheat								
Maize								
Oil								
Salt								
<b>Livestock – Goat</b>								
Sheep								
Bull or ox								
<b>Cereals: Beans</b>								
Chick Peas								
Lentil								
<b>VEG: Potato</b>								
Onion								
Tomato								
Cabbage								
<b>WASH</b>								
Soap Bath/Laundry								
Jerry Can								
<b>MHH- Disposal pads, reusable pads, underwear</b>								
<b>Education</b> Scholastic Materials- Exercise book, pen, pencil, eraser and Bags,								
<b>Livestock – Goat</b>								
Sheep								



Bull or ox							
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**Price monitoring**

This table provides information on price fluctuations.

Current price levels		
Commodity	The local unit of measure (number/kilo/liter)	Price Birr
<b>Food :</b>		
Teff		
Wheat		
Maize		
Oil		
Salt		
<b>Cereals:</b> Beans		
Chick Peas		
Lentil		
<b>VEG:</b> Potato		
Onion		
Tomato		
Cabbage		
<b>MHH</b>		
Reusable pads		
Disposable pads		
Underwear		
<b>Education-Scholastic Materials -</b>		
<b>Exercise book</b>		



<b>Pen</b>		
Notebooks		
Bags		
Pencil/Eraser/Sharpener		
<b>WASH</b>		
Bath soap		
<b>Laundry soap</b>		
Jerry Can		
Livestock – goat		
Sheep		
Bull or Ox		

#### Supply Chain system

(across different themes)-spatial and temporal both.

- This table provides information on the impact of the emergency to the supply chain of basic commodities.
- Provide information on the remarks column the source of the product and whether the supply was partially or fully affected (ex. Supply will not reach the shops due to collapsed bridge etc).

#### Supply Chain System (across different themes) - Spatial and Temporal

Items	Name and Place	Remarks (including challenges)
Food		
Livestock		
WASH		
Kitchen equipment and tools		
Mattress and blanket		
Shelters		
Hygiene		



Education		
Health clinics and pharmacies		
Clothing		
Protection services		
SRHR/MHH		

What percentage in terms of price is different compared to the source?

Item	%
SRHR/MHH	
Food	
Livestock	
WASH	
Kitchen equipment and tools	
Mattress and blanket	
Shelters	
Hygiene	
Education	
Health clinics and pharmacies	
Clothing	
Protection services	

Who sets the prices at which traders sell in the markets (government, big traders, each trader, etc.?)

Items	Who sets the price?
Food	
Livestock	



<b>WASH</b>	
<b>Kitchen equipment and tools</b>	
<b>Mattress and blanket</b>	
<b>SRHR/MHH</b>	
<b>Shelters</b>	
<b>Hygiene</b>	
<b>Education</b>	
<b>Health clinics and pharmacies</b>	
<b>Clothing</b>	
<b>Protection services</b>	

Are there storage facilities in the market like?

<b>Items</b>	<b>Storage Facilities (Y/N)</b>
<b>Food</b>	
<b>SRHR/MHH</b>	
<b>Livestock</b>	
<b>WASH</b>	
<b>Kitchen equipment and tools</b>	
<b>Mattress and blanket</b>	
<b>Shelters</b>	
<b>Hygiene</b>	
<b>Education</b>	
<b>Health clinics and pharmacies</b>	
<b>Clothing</b>	
<b>Protection services</b>	



Do traders display the prices in markets?				
<b>Food</b>	<b>WASH</b>	<b>Kitchen</b>	<b>Mattress and blanket</b>	<b>Shelters</b>
<input type="checkbox"/> YES <input type="checkbox"/> NO				
<b>Hygiene</b>	<b>Education</b>	<b>Health clinics and pharmacies</b>	<b>Clothing</b>	<b>Protection services</b>
<input type="checkbox"/> YES <input type="checkbox"/> NO				
<b>SRHR/MHH</b>	<b>Livestock</b>			
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO			

Are the displayed market prices easily readable by girls, boys, women and men? (Y/N)	
Do traders discriminate by charging different prices to consumers? (Y/N)	
Are there any trader associations in the markets? (Y/N)	

- What are the likely barriers to entry and exit (challenges) in the markets? (open)
- General or specific risks and uncertainties observed in the market related to security, environment, political, civil strife and other risks/uncertainties (open)
- Is the market place accessible for adolescents, in particular adolescent girls? (Y/N)  
Consider probing around:
  - Practical barriers such as opening hours, physical location (Open)
  - Safety and security issues (Open)
  - Social and gender norms and how that impacts girls and boys access to the markets (Open)

Are traders willing to participate in Cash/voucher programming? Provide details

Item	Yes/No	Comments
------	--------	----------



Food		
Livestock		
WASH		
Kitchen equipment and tools		
Mattress and blanket		
Shelters		
Hygiene		
Education		
Health clinics and pharmacies		
Clothing		
Protection services		
SRHR/MHH		

Are traders able to meet increased demand? How?	
---	--

Are they able to get credit for stock from their suppliers? (Y/N)	
---	--

Cash and Voucher Assistance Programming in the Market	
Are there CVA programming taking place in the market?	
Which actor is responsible for those?	
Are there any challenges?	

- Time needed for meeting increased demand (days/months)



Food	
Livestock	
SRHR/MHH	
WASH	
Kitchen equipment and tools	
Mattress and blanket	
Shelters	
Hygiene	
Education	
Health clinics and pharmacies	
Clothing	
Protection services	

- Are you able to get credit for the stock from your supplier? (Yes/No)
- If not, can you manage increased demand? (Yes/No)
- How? (open)

- Other CVA programs in which the market is situated? by whom, challenges, experiences, address of the challenges.(open)

- What are the existing banking and financial services infrastructure? (list all banks, microfinance entities, post office, cooperatives, VLSA, mobile platform, security company). Provide details.

Name	Type	Comments




**Mobile network coverage infrastructure (list operators, requirements and challenges)**

Operator	Requirements	Challenges

**Is COW (Connection on Wheels) available by any mobile operator especially in a “No network” zone?**

<p>How do adolescent girls and boys currently access and use mobile phones, ATMs, etc?  <b>Are there specific legal/cultural barriers they face when it comes to accessing the banking system or using technology</b> (probe for cultural barriers to the use of technology, no access to airtime and charging etc.)?  <b>How might these be best addressed?</b></p>	
--	--

**Name and contacts of all people interviewed in the market**

	Name	Age	Sex	Role	Tel. number
1					
2					



3					
4					
5					
6					
7					
8					
9					
10					



**PLAN INTERNATIONAL RAPID NEEDS ASSESSMENT  
KEY INFORMANT INTERVIEW (KII) TOOL**

*This KII Tool has 3 parts i.e. State level, Region Level, and Woreda level KIIs. Use the relevant parts to interview different levels of Key Informants. Adolescent girls and women should be included as KIIs, especially at the village level*

ASSESSMENT DETAILS				
Date of Assessment				
Assessment Site Information				
State /County/Village				
Name of person (s) conducting the assessment				
Name	Title	Contact		
Key Informant Details				
Key Informant Name				
Sex of Key Informant		<input type="checkbox"/> Male <input type="checkbox"/> Female		
Designation and Organization		Designation/Position		
		Organization (if applicable):		
Section A: Region Level KII				
A1	How is the State affected by the current drought or food insecurity situation?			
A2	Which counties are most affected? Please rank by level of effect starting with the most affected county to the least affected.			
A3	what categories of people are most affected within the counties			
A4	What are the main causes driving this drought/ food insecurity in the State?			
A5	What is the total estimated population affected by the drought/famine in the State?	<b>Age group</b>	<b>Gender</b>	<b>Population</b>
		0-5 years	Boys	
			Girls	
		6-12 years	Boys	
			Girls	
		13-17	Boys	
			Girls	
18-24	Men			
	Women			
25-44	Men			

			Women	
		45-54	Men	
			Women	
		55-64	Men	
			Women	
		Above 65	Men	
			Women	
A6	What is the Government Currently doing to address the Food Insecurity situation in the affected areas? To what extent do the most affected people have access to that?			
A7	Which other organizations are working to address the Food Insecurity situation in the State? <ul style="list-style-type: none"> <li>Which counties are they working in?</li> <li>Which activities are they implementing</li> </ul>	<b>Organization</b>	<b>Activities</b>	
A8	What gaps exist in the affected counties to address the most pressing food insecurity needs? <ul style="list-style-type: none"> <li>Which Counties has gaps?</li> </ul>	<b>Identified gaps</b>	<b>Where?</b>	
A9	What is the level of Malnutrition in the State? <ul style="list-style-type: none"> <li>Which Counties have more malnutrition cases?</li> </ul>			

Section B: Woreda Level KII				
ASSESSMENT DETAILS				
Date of Assessment				
Assessment Site Information				
State /County/Village				
Name of person (s) conducting the assessment				
Name		Title	Contact	
Key Informant Details				
Key Informant Name				
Sex of Key Informant		<input type="checkbox"/> Male <input type="checkbox"/> Female		
Designation and Organization		<i>Designation/Position</i>  <i>Organization (if applicable):</i>		
B1	What is the total population of this County?	<b>Age group</b>	<b>Gender</b>	<b>Population</b>
		0-5 years	Boys	
			Girls	
		6-12 years	Boys	
			Girls	
		13-17	Boys	
			Girls	
		18-24	Men	
			Women	
		25-44	Men	
			Women	
		45-54	Men	
			Women	
		55-64	Men	
Women				
Above 65	Men			
	Women			
B2	How is the County Affected by the food insecurity situation/ drought this year?			
B3	Which village are most affected? Please rank the affected village starting			

	with the most affected to the least affected.			
B4	what categories of people are most affected within the counties			
B5	How many people from this County population are affected by the drought situation?	<b>Age group</b>	<b>Gender</b>	<b>Population</b>
		0-5 years	Boys	
			Girls	
		6-12 years	Boys	
			Girls	
		13-17	Boys	
			Girls	
		18-24	Men	
			Women	
		25-44	Men	
			Women	
		45-54	Men	
			Women	
		55-64	Men	
Women				
Above 65	Men			
	Women			
B6	What are the main drivers/ causes of the food insecurity situation in the county?			
B7	What were the general levels of harvests/yield in the county for the previous season?			
B8	What is the County Government doing to respond to the Food Insecurity situation and to what extent do the most vulnerable access to that?			
B9	Which other Organizations are working to address the Food Insecurity Situation in the County? <ul style="list-style-type: none"> <li>• What activities are they doing?</li> <li>• Which village are they working in?</li> </ul>	<b>Organization</b>	<b>Activities</b>	
B10	What gaps still exist to address the food insecurity situation? <ul style="list-style-type: none"> <li>• Which village has gaps?</li> </ul>	<b>Identified gaps</b>		<b>Where?</b>

B11	How are the following groups of people affected by the food insecurity situation in the County?	<b>Age group</b>	<b>Gender</b>
		0-5 years	Boys
			Girls
		6-12 years	Boys
			Girls
		13-17	Boys
			Girls
		18-24	Men
			Women
		25-44	Men
			Women
		45-54	Men
			Women
		55-64	Men
Women			
Above 65	Men		
	Women		
B12	How are affected households coping with the drought situation? (look at how female headed households including adolescent girls headed households particularly cope with that situation)		
<b>Nutrition</b>			
B13	What is the level of malnutrition in the County? • Which village are more affected than others?		
B14	Is there any difference in the level of malnutrition cases this year compared to the same time last year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
B15	If Yes, what are the differences?		
<b>Education</b>			
B16	How many schools are in this County?	<b>School level</b>	<b>Number of schools</b>

		ECCD				
		Primary				
		Secondary				
B17	What are the total enrolment levels for the schools in the county this term?	<b>School level</b>	<b>Number of schools</b>			
		ECCD				
		Primary				
		Secondary				
B18	What is the total number of teachers in the schools?	<b>School level</b>	<b>Trained teachers</b>		<b>Untrained teachers</b>	
			<b>Male</b>	<b>Female</b>	<b>Male</b>	<b>Female</b>
		ECCD				
		Primary				
		Secondary				

Kebele LEVEL KII				
ASSESSMENT DETAILS				
Date of Assessment				
Assessment Site Information				
State /County/Village				
Name of person (s) conducting the assessment				
Name	Title	Contact		
Key Informant Details				
Key Informant Name				
Sex of Key Informant		<input type="checkbox"/> Male <input type="checkbox"/> Female		
Designation and Organization		Designation/Position		
		Organization (if applicable):		
C1	What is the total population estimate for this village?	<b>Age group</b>	<b>Gender</b>	<b>Population</b>
		0-5 years	Boys	
			Girls	
		6-12 years	Boys	
			Girls	
		13-17	Boys	
			Girls	
		18-24	Men	
			Women	
		25-44	Men	
			Women	
		45-54	Men	
			Women	
		55-64	Men	
Women				
Above 65	Men			
	Women			
Food Security and Livelihoods				
	What are the households' current main sources of food in this village?			
	How did the food sources change between November last year and now?			

	On average how long will current household food stocks last in this village?																	
C2	Which groups of people are most affected by the food insecurity situation in the village?																	
C3	Have there been any displacements or outmigration of people from this or other villages in the past 3 months?	<input type="checkbox"/> Yes <input type="checkbox"/> No																
C4	If Yes, how many people out-migrated and to where?																	
	IF YES, What were the reasons for the outmigration?																	
C5	How are households coping with the dwindling food stocks of in this village?																	
C6	What are the main sources of livelihoods <sup>1</sup> for households in this village?																	
<b>Education</b>																		
	How many schools are in this village	<table border="1"> <tr> <td>ECCD</td> <td></td> </tr> <tr> <td>Primary</td> <td></td> </tr> <tr> <td>Secondary</td> <td></td> </tr> </table>	ECCD		Primary		Secondary											
ECCD																		
Primary																		
Secondary																		
	What is the state of school Infrastructure in the existing schools?																	
	What are the current enrolment levels for the schools?	<table border="1"> <thead> <tr> <th>School type</th> <th>Boys</th> <th>Girls</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>ECCD</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Primary</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Secondary</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	School type	Boys	Girls	Total	ECCD				Primary				Secondary			
School type	Boys	Girls	Total															
ECCD																		
Primary																		
Secondary																		
	Has there been any change in the attendance levels for boys and girls at the schools last term compared to this term?	<input type="checkbox"/> Yes <input type="checkbox"/> No																
	IF YES, How did the attendance change? Which groups of children are most affected by this change?																	
	What are the reasons for such a change?																	
	Number of trained/untrained teachers m/f																	

<sup>1</sup> People's means of making a living –capabilities, assets, income and activities required to secure the necessities of life.