ASAL Humanitarian Network MPCT
New Beneficiaries Endline Assessment

Mandera County

March 2022

Overview

The ASAL Humanitarian Network's (AHN) humanitarian assistance programme provides three rounds of multipurpose cash transfers (MPCTs) to vulnerable populations in drought-affected counties in arid and semi-arid counties of Kenya. This assessment looks at a supplementary set of beneficiary households in Mandera county added to the main lot of beneficiary households under the AHN's main programme.[1] This response in Mandera county is primarily funded by Oxfam[2] and consists of two implementing local partner non-governmental organisations (NGOs): RACIDA and NAPAD[3]. The AHN will be distributing three rounds of MPCTs between December 2021 and March 2022, to selected beneficiary households across Mandera county in Kenya.

To monitor the ongoing impact of the MPCTs on the beneficiary population, IMPACT Initiatives provides impartial third-party monitoring and evaluation. IMPACT conducted a baseline assessment prior to the first round of transfers, a midline assessment after the first round, and an endline assessment after the last round of transfers. This factsheet presents **key findings from the endline assessment in Mandera county as well as comparison of some key indicators from the baseline assessment**. The figures in grey highlight the magnitude of change from the baseline to the endline for relevant indicators.

Methodology

A total of 717[4] households received three rounds of MPCT between December 2021 and March 2022. IMPACT interviewed beneficiary households two weeks after the last round of cash transfers. **A total of 252 beneficiary household surveys were conducted.**

The interviewed beneficiary households were selected through a simple random sampling approach at the county level, rendering findings that are representative at the county level with a 95% confidence level and a 5% margin of error. A buffer of 10% was introduced to off-set expected difficulties in reaching the sample size in the follow-up assessments. All results presented have been aggregated by the proportion of AHN beneficiary households.

Challenges & Limitations:

- Data on household expenditure was based on a 30-day recall period; a considerably long duration over which to expect households to remember expenditures accurately. This might have negatively impacted the accuracy of reporting on the expenditure indicators.
- Daily data checking and coverage tracking was affected by poor internet connection in some areas, which made it difficult to follow-up with the enumerators engaged in the field.

Key findings

- Findings suggest an improved food security among beneficiary households in the endline across the key indicators compared to the baseline, with improved Food Consumption Scores (FCS), Household Dietary Diversity Scores (HDDS), as well as a lower reduced Coping Strategies Index (rCSI). In line with this, considerable improvement was observed in the percentage of households reporting never having been able to meet their HH's basic needs in the 30 days prior to data collection decreasing from 74.1% at the baseline to 33.7% at the endline assessment.
- Market purchase remained the most comonly reported primary source of food (95.6%) in the 7 days prior to data collection.
- The average reported monthly income per HH during the endline assessment was 7,682 Kenyan shillings (KES)[5], an 87.6% increase from the baseline assessment (4095 KES).
- Similar to the baseline, the most commonly reported source of HH income was casual labour (51.0%), followed by remittances (17.3%).

Locations Covered

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Income & Expenditure

Income Source

Most commonly reported primary sources of household income at the time of data collection:

1. 51.0% Casual labour
2. 17.3% Remittances
3. 15.3% Livestock
4. 10.0% Cash transfers

Expenditure Share

Most commonly reported expenditure categories and average amount spent (in KES) per category per household in the month prior to data collection:

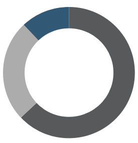
Food (3238) (+1055)	48.4% (+10%)
Debt repayment (1374) (+1087)	20.5% (+16%)
WASH items (925) (+438)	13.8% (+5%)
Medicine (517) (-406)	7.7% (-8%)
Education (360) (-937)	5.4% (-17%)
Other expenses (198) (-315)	3.0% (-6%)

Average reported total household expenditure over a month	6693 (+978)
Average reported total household income over a month	7682 (+3587)

Spending Decisions

% of households by reported primary spending decisions maker[3]:

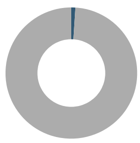
Joint decision-making	63.1%
Male	25.3%
Female	11.6%



Spending Conflict

% of households reporting conflict or problems within the household as a result of disagreement on how to spend money during the 6 months prior to data collection:

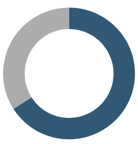
Yes	0.2%
No	99.8%



Households wellbeing

% of households reporting having been able to meet their household's basic needs in the 30 days prior to data collection:

Never	33.7% (-40.3%)
Almost never	66.3% (+42.4%)
Sometimes	0.0% (-1.5%)
Always	0.0% (-1.5%)
PFA	0.0% (0.3%)



Food Sources

% of households by most commonly reported primary sources of food[3]:

1. 95.6% Market purchase
2. 3.2% Begging
3. 0.8% Gift

Key Impact Indicators

The key indicators include: Livelihood Coping Strategies Index (LCSI), Food Consumption Score (FCS), Household Dietary Diversity Score (HDDS) and reduced Coping Strategies Index (rCSI).

FCS[6]

Endline

Poor	Borderline	Acceptable
34.1%	41.4%	24.5%
(-28.5%)	(+21.0%)	(+7.5%)

Average number of meals consumed by household members per day: 2.1 (+0.2)

HDDS[7]

% of households by HDDS category:

Endline

Low	Medium	High
60.6%	39.0%	0.4%
(-26.5%)	(+26.3%)	(+0.3%)

Average HDDS per household: 4.1

rCSI[8]

Most commonly reported strategies employed to cope with a lack of food or lack of money to buy food in the week prior to data collection, by average number of days these strategies had been employed:

Reduced the number of meals eaten per day	1.8 (-2.1)
Relied on less preferred, less expensive food	2.2 (-0.3)
Reduced portion size of meals	1.7 (-1.2)
Borrowed food or relied on help from friends or relatives	1.8 (-0.5)
Restricted adults' consumption so children can eat	2.1 (-0.5)

Average rCSI score per household: 12.4 (-9.1)

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Protection Performance Indicators

% of households reporting themself or someone in the community had been consulted by the NGO about their needs:

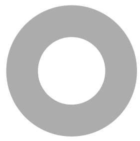
Yes 51.8%

No 48.2%

% of households reporting believing that some households were unfairly selected:

Yes 0.0%

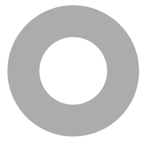
No 100.0%



% of households reporting being aware of someone in the community being pressured or coerced to exchange non-monetary favours to get on the beneficiary list:

Yes 0.0%

No 100.0%



% of households reporting having paid, or knowing someone who paid, to get on the beneficiary list:

Yes 0.0%

No 100.0%

% of households reporting feeling that they have been treated with respect by NGO staff upto the time of data collection:

Yes 100.0%

No 0.0%

% of households reporting being aware of someone in the community using the different mechanisms to contact the agency:

Yes 100.0%

No 0.0%

% of households reporting feeling safe going through the programme's selection & registration processes:

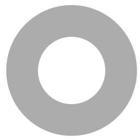
Yes 100.0%

No 0.0%

% of households reporting experiencing any problems receiving their money due to a lack of access to, or knowledge about mobile money technology:

Yes 0.0%

No 100.0%



% of households reporting being aware of the existence of options to contact the agency if you had a question or problem with the assistance:

NGO staff	92.0%
Hotline	67.0%
NGO desk	0.0%
Not aware	0.0%

% of households reporting having raised any concerns on the assistance received to the NGO using any of the complaint mechanisms available:

Yes 39.8%

No 60.3%

Of households that reported having raised concerns, % reporting being satisfied with the response:

Yes 100.0%

No 0.0%

Analysis, feedback, and potential issues to follow up on:

Consistent improvements were seen across all key food and livelihood security indicators, as shown in Annex 1 below. Particularly, the endline assessment saw a decrease in the proportion of households with a poor FCS (from 62.6% to 34.1%, in the baseline and endline respectively) and a decrease in the average rCSI (from 21.5 to 12.4).

Findings suggest that food constituted the primary expense for the households as 48.4% of the monthly expenditure during the endline assessment was reportedly spent on food. This reflects a 10.0% increase from the baseline assessment and an improvement in households' food consumption indicators.

The average household expenditure increased from 5716 KES in the baseline to 6693 KES in the endline. This can be attributed to by the cash transfer distributed, which is further reflected in cash transfer being among the most commonly reported primary sources of income at 10.0%.

All households reportedly preferred receiving cash via mobile money (100.0%). Moreover, the majority of households (94.4%) also reported being satisfied with the payment process.

Key protection and performance indicators show positive results; all households (100.0%) reported not having been asked to pay to get on the beneficiary list, and 100% of households reported having felt safe going through the selection process. Moreover, half of the households (51.8%) reported having been consulted by the NGO about their needs.

Some households (10%) reported the cash transfers were their primary source of income, and on average, 20.5% of income was spent on debt repayment, indicating that households may be facing challenges if the cash transfers were to end

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End Notes

1. The AHN early action drought response is being implemented in 8 of the worst affected counties of Marsabit, Isiolo, Samburu, Turkana, Wajir, Tana River, Garissa, and Mandera. The AHN response is supported by Oxfam, Concern and ACTED.
2. Oxfam's donors involved in the project are Swedish International Development Cooperation Agency (SIDA), German Federal Foreign Office (GFFO), Irish Aid, and Danida. Oxfam's affiliates involved in the project are Oxfam Great Britain (OGB-KLUB), Oxfam Hong Kong (OHK), Oxfam America (OUS), Oxfam IBIS (Denmark), and Oxfam Ireland. The AHN response in Mandera County with the partners NAPAD and RACIDA is supported specifically by Oxfam through funding fromOxfam Hong Kong.
3. The local partner NGOs are Nomadic Assistance for Peace and Development (NAPAD) and Rural Agency for Community Development and Assistance (RACIDA).
4. A total of 717 households were interviewed in the baseline. Eventually, 717 surveys were kept in the baseline after data cleaning. For data consistency, the sample for the subsequent assessments has been drawn from the 717surveys kept and analysed during the baseline. The sample for the endline assessment has been drawn from the 252 surveys.
5. 1 USD = 115.0476 KES as on the 8th of March 2022.
6. The Food Consumption Score (FCS) is a measure of the food intake frequency, dietary diversity, and nutritional intake. It is calculated using the frequency of a household's consumption of different food groups during the 7 days prior to data collection, weighted according to nutritional importance.
7. The Household Dietary Diversity Score (HDDS) is a measure of the number of unique food groups consumed by household members in the 24 hours prior to data collection.
8. The Reduced Coping Strategies Index (rCSI) is a measure of reliance on food consumption based negative coping strategies to cope with lack of food in the seven days prior to data collection.

Annex 1: Comparative findings of key indicators

		Mandera		
		Baseline	Midline	Endline
Food Consumption Score (FCS)	Poor	62.6%	36.1%	34.1%
	Borderline	20.4%	40.6%	41.4%
	Acceptable	17.0%	23.4%	24.5%
Household Dietary Diversity Score (HDDS)	Low	87.2%	58.2%	60.6%
	Medium	12.7%	41.0%	39.0%
	High	0.1%	0.8%	0.4%
Average Reduced Coping Strategies Index (rCSI)		21.5	18.5	12.4
Average household income in KES in the month prior to data collection		4095	7200	7682
Average household total expenditure in KES in the month prior to data collection		5716	6641	6693
Average proportion of total expenditure spent on food in the month prior to data collection		38.2%	49.9%	48.4%