



Displaced beneficiary in Gombe State cleaning beans to make bean cakes. Photo by Corinna Robbins, Mercy Corps.

RESPONSIVE ECONOMIC ASSISTANCE TO CONFLICT-AFFECTED HOUSEHOLDS (REACH)

Final Report

October 30, 2014 – April 30, 2016

Executive Summary

Program Context. Northeast Nigeria has experienced an urgent humanitarian crisis, resulting from the violent extremist activities of Boko Haram from which 14.8 million people have been affected in the states of Borno, Yobe, Adamawa and Gombe. REACH (Responsive Economic Assistance to Conflict Affected Households) aimed to address the food needs for the internally displaced persons (IDPs) and vulnerable host community members through monthly voucher distributions as well as a voucher for work component.

Goals and Objectives. The goal of REACH is *to enhance food security for IDP and host community households in Gombe State in Northeast Nigeria*, resulting in the following outcomes:

1. IDP and host households meet immediate food needs.
2. IDP and host households strengthen their livelihood base.



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The REACH program targeted 4,100 IDPs and to ensure households are able to purchase nutritious food that meets the needs of all household members including women, adolescent girls and young children, using food vouchers. Lastly, this program will ensure that 25 host communities benefit from rehabilitated community infrastructure through the execution of Voucher for Work interventions.

Detailed Activities. To implement the outputs, the REACH team conducted numerous sensitizations with beneficiaries who had limited experience with either paper or electronic vouchers. For the vouchers, REACH identified the most vulnerable households to receive support in close partnership with communities and traditional leaders. Beneficiaries were registered and validated based on vulnerability criteria (see page 8 below). The modality of the voucher distributions was finalized, piloted and further refined throughout the course of the program. Under the voucher for work component, REACH identified the household members who would participate in the voucher/cash for work programming, along with the specific community projects that were implemented, in close partnership with the communities, local stakeholders and key leaders.

Timely, Responsive Programming. REACH aimed to be as responsive as possible to address the changing conditions of the humanitarian crisis. Starting with paper vouchers, REACH found a more effective electronic modality. REACH piloted and scaled up electronic vouchers (e-vouchers) that allowed REACH to top up vouchers each month quickly as well as be able to respond to changes in market prices immediately. REACH continually monitored prices to ensure that its voucher value remained relevant. Due to limited pricing shifts, REACH maintained the value of its vouchers throughout the program.

REACH recognized the need to shift its voucher for work component to be more responsive to the needs of beneficiaries. Based on stakeholder feedback, the voucher for work output engaged host communities more fully because the infrastructure would serve the host community long-term. In addition, because the work resulted in a one-time payment, the stakeholders expressed that they would be better served through a cash payment, which REACH implemented.

Endline Survey Findings. Overall, the success of REACH was defined by the endline survey that was conducted by an external consultant. The main highlights were:

- No sampled households in Gombe or Yamaltu Deba experienced very severe or severe food security; compared to 42.1% of households at the baseline.
- 94.7% of households in Yamaltu Deba and 70.7% in Gombe were food secure at endline.
- 99.7% of sample household children aged 6-23 months consumed all seven-food groups at endline as compared to 9.0% at baseline.

Program Context

As a result of the violent extremist activities of Boko Haram and the subsequent counter insurgency, an urgent humanitarian situation emerged in Northeast Nigeria. According to the most recent published figures,¹ 14.8 million people (out of a population of 15.2 million in the four states of Borno, Yobe, Adamawa and Gombe) had been affected by the crisis in Northeast Nigeria. To address the humanitarian situation of the displaced and vulnerable households, the REACH project supported food needs for both the IDPs and vulnerable members of the host communities.

¹ 2016 Humanitarian Needs Overview (HNO) for Nigeria

REACH was designed to be implemented in three Local Government Areas (LGAs) within Gombe State over a period of twelve months (October 30, 2014 – October 29, 2015), to reach 4,100 households (28,700 individuals). In order to address the ongoing food needs of the target population, a no cost extension (NCE) was awarded for an additional six months. REACH subsequently continued to run until April 30, 2016 - a total of 18 months. REACH initially consisted of two phases of intervention:

First, the provision of eight monthly unconditional vouchers to help beneficiaries meet their immediate food needs. This allowed the targeted households to access food from chosen local vendors, thereby also assisting in the recovery of small businesses in the food market chain.

Second, having beneficiaries earn vouchers, in a sum equivalent to the monthly electronic vouchers, through participation in Vouchers for Work projects.

Pursuant to the mid-term review and evaluation of the program in June 2015, feedback from community leaders and program stakeholders guided the need to adapt the program intervention to address ongoing and additional needs of the target populations. The NCE allowed for the distribution of four additional months of unconditional vouchers to the same target beneficiaries to ensure they could access food to satisfy their immediate needs.

Moreover, the Vouchers for Work projects were shifted to small-scale community projects that would engage vulnerable host community members in return for a daily wage. While the objective of the intervention remained the same, the modality and primary target beneficiaries were adjusted to provide cash in return for work conducted on the community projects. During review meetings with stakeholders, it was determined that there was a need to involve more members of the host communities in the community projects, as the projects were being implemented in the host communities and would benefit them in the long term.

Overall, in both phases of program implementation, focus was on ensuring nutrition sensitive activities. Key nutrition messages were incorporated to accompany the monthly food assistance vouchers. These messages were disseminated mainly through women's support groups established in all of the targeted communities. The women support groups were also trained in screening for and referring cases of severe acute malnutrition (SAM) and moderate acute malnutrition (MAM) to local hospitals and clinics offering the Community-based Management of Acute Malnutrition (CMAM) program.

As part of ensuring the program implementation was nutrition sensitive, the foods in the food basket, i.e. the food available to be redeemed at vendors, were chosen with nutritional needs requirements for a household of seven members in mind. This was also coordinated with other humanitarian actors delivering food assistance across North East Nigeria to harmonize content and value. The foods in the food basket were the following: Beans, Eggs, Rice (Imported), Rice (Local), Garri (Cassava Flour), Ground Nut Seeds, Guinea Corn (Dawa), Maize, Maggi Cubes, Millet, Pasta (Foreign), Pasta (Local), Iodize Salt, Semolina, Soy Beans, Palm Oil, Sugar, Tomato Paste, Vegetable Oil, Yams, and Industrial Salt.

Assessments and Monitoring Tools

Evaluation: Baseline and Endline Surveys

Baseline Survey: To provide an overview and gain an understanding of the food security situation in the targeted areas in Gombe State, REACH conducted a baseline survey in order to measure the following four main program indicators: Coping Strategies Index, Household Hunger Scale, Women Dietary Diversity Score, and Minimum Acceptable Diet for Children between 6 and 23 Months of Age. Data was collected through a comprehensive household questionnaire. REACH received eligible questionnaires from 358 beneficiary households, comprising 3,143 individuals. This data served as the basis to track improvement in the lives of beneficiaries throughout the course of the program.

Endline Survey: An external independent consultant was engaged for the endline survey designed to assess REACH in Gombe state. The team collected data from a representative sample of households that benefited from the project in Gombe and Yamaltu Deba LGAs, aimed at measuring four main project indicators that were also measured during the baseline. These included the Coping Strategies Index, Household Hunger Scale, Women's Dietary Diversity Score and Minimum Acceptable Diet for children between 6 and 23 months of age. The data was analyzed in line with standard international guidelines, which provided information on indicator definitions, tabulation and data analysis procedure.

Endline data was collected from 406 respondents, who represented 4,069 individuals during the endline, 50% of these individuals were female (2,052) and 50% were male (2,017) and 469 (12%) were income earners. Of these respondents, 67% were from Gombe LGA and the remaining from Yamaltu Deba LGA. The results of the endline survey were compared with the baseline data.

Overall, the findings of the endline survey were positive. None of the sampled households in Gombe and Yamaltu Deba LGAs experienced either very severe or severe food insecurity at endline. Whereas at baseline, 42% of households experienced severe levels of food insecurity. At endline, 71% of sampled households in Gombe LGA and 95% of sampled households in Yamaltu Deba LGA were food secure. Additional findings are detailed in the *Impact* section of this report and the full endline survey report is annexed to this document (Annex 1).

Program Monitoring Tools

In order to fully monitor the effectiveness of the program on a continual basis and make subsequent improvements as needed REACH set up a system of tools to monitor its activities. These tools aimed to garner feedback from beneficiaries, vendors, the community in general and other key stakeholders.

Community feedback hotline: REACH maintained a community feedback phone hotline administered by the Mercy Corps M&E team.² The phone line was used to receive complaints, answer questions about REACH, and collect feedback on the implementation of the REACH program. Both beneficiaries and non-beneficiaries helped by contacting REACH to report issues, such as lack of goods available at vendors, increases in prices, low quality of goods, and issues involved in redeeming vouchers. These were logged

² Beneficiaries of both an FFP and an ODFA funded program used this phone line.

into a complaint logbook for tracking purposes. REACH staff would then investigate those that needed further inquiry. Most complaints were regarding the use of e-vouchers at the beginning of the program. After beneficiaries became accustomed to e-vouchers, most enquiries were related to irregular or lack of balances on the e-voucher cards, which the team regularly investigated and corrected where needed.

Voucher training monitoring: REACH conducted trainings in the use of the different voucher modalities to vendors and beneficiaries alike. At these trainings, and directly after, REACH M&E staff would observe the trainings and whether participants had understood them. The participants were asked about how and what had been communicated at the trainings in order to determine the trainings' effectiveness. The post-training evaluation showed that there was an improved understanding on voucher processes and systems (value of vouchers; duration of vouchers; where vouchers could be redeemed, etc.); how to identify REACH vendors; allowable goods that could be purchased with the voucher and the use of the hotline to provide feedback.

Distribution monitoring: REACH M&E staff conducted visits at distributions in order to ensure that the distributions took place on time, the beneficiaries had been properly informed about the distribution process, and that the distribution process was conducted according to the guidelines. This information was gathered in order to identify any gaps where improvement could be made in future distributions. The M&E staff would also register any complaints the beneficiaries had, as well as the numbers needed to track the program's indicators. During initial distributions, the team had difficulty managing large numbers of beneficiaries gathered in one location. While, logistically, gathering beneficiaries together could create a faster distribution system, the crowd control issues became a security challenge. Instead, REACH began to break the distributions into smaller groups in different locations within one community, which minimized the security threat and even made the distributions more efficient.

Post distribution monitoring (PDM): Following the redemption of the vouchers/monthly top-up of the food allowance, REACH would go to the communities and conduct a house-to-house survey based on a sample across communities to get representative feedback from beneficiaries on the process. 10% of beneficiaries were surveyed to find out if their vouchers had been redeemed and whether they received the quality and quantity of goods they needed. This would also help identify whether the voucher value was sufficient for the food basket. In addition, this was an opportunity for the REACH team to understand whether there were other needs not covered by the current vouchers. PDM would typically take place two weeks after the voucher distribution, also referred to as monthly top-up, as all beneficiaries had redeemed them by then. Additional data on PDM is annexed to this document (Annex 2).

Review meeting with stakeholders: In August 2015, REACH staff held a reflection meeting with program stakeholders, including government representatives, beneficiaries, vendors, and community volunteers. At the meeting, the implementation of the project activities was presented and discussed with the stakeholders, who also provided valuable feedback. The feedback provided helped REACH shape and adapt the program activities. For example, it was feedback from this stakeholder meeting that led to a rearrangement of the community projects, having them target the host community to a greater extent than initially envisioned.

Transaction monitoring: During the redemption of vouchers/monthly top-ups, REACH staff would visit the vendors to observe how the transactions were conducted. In particular, REACH monitored whether the vendors provided the beneficiaries with respectable service and did so in a timely manner. This monitoring followed the trainings the vendors had received from REACH on Do No Harm and gender sensitivity, had sufficient stock and staff at the store, and clearly displayed the banner with the feedback hotline phone number. If any issues were determined during the monitoring, REACH would address the issue with the

vendor and reorient him/her as necessary. In one instance, at the initial stages of the program, there was an issue of overcrowding of both beneficiaries and non-beneficiaries at certain vendors' shops, which resulted in beneficiaries spending more time than expected in the market. REACH worked with the vendors to get more staff to help in the shop to make the transaction process more efficient.

Goals, Outcomes and Outputs

The goal of REACH is *to enhance food security for IDP and host community households in Gombe State in Northeast Nigeria*. This was to result in the following outcomes:

1. IDP and host households meet immediate food needs.
2. IDP and host households strengthen their livelihood base.

The outputs are as follows:

Output 1.1: 4,100 IDPs and host households purchase nutritious food that meets the needs of all household members including women, adolescent girls and young children, using food vouchers.

To achieve the above output, REACH conducted the following activities:

- **1.1.1. Conduct community sensitization on unconditional voucher transfers making use of a variety of forums to adequately reach and include men, women, boys and girls.**

Mercy Corps met with the State Emergency Management Agency (SEMA) and discussed its food program and objectives, including the specific communities of focus and the beneficiaries expected. Then Mercy Corps met with community leaders to fully engage them in the process, providing information on the roles of community leaders; the modality of the intervention; and how beneficiaries should be selected (i.e. criteria, vulnerability). Community leaders supported the program by setting up a Community Relief Committee (CRC) in each community who would sensitize the community on the program and manage any community-level disputes that may arise.

Initially, REACH used paper vouchers and sensitized SEMA, community leaders and beneficiaries on the paper voucher modality. This phase also included training vendors and community volunteers on how paper vouchers should be used and tracked.

The unconditional voucher transfer modality was changed in the early phase of the program, following a successful pilot of an e-voucher system.³ Another phase of sensitization to match the e-voucher was implemented for beneficiaries, vendors, community leaders and other key stakeholders.

Throughout the program, sensitization took place at trainings outlining how either the paper or e-voucher system worked. Understanding how the voucher system works gave the beneficiaries the tools to get what they needed from the program and the vendors.

³ This is described in detail under *Activity 1.1.3 Establish cash voucher distribution and redemption mechanism*

- **1.1.2. Identify vulnerable IDP and host households eligible to receive unconditional voucher transfers.**

REACH was implemented in complementarity with the OFDA-funded program, Strengthening Opportunities and Access to Resilience (SOAR), to maximize impact and support beneficiaries' transition away from continued reliance on humanitarian assistance. To that effect, one registration and targeting process was used for both programs. The process involved four main activities:

Community mapping and leaders meeting: REACH worked together with SEMA and other local stakeholders to map out locations with a high concentration of displaced families. REACH identified 12 communities (8 in Gombe LGA and 4 in Yamaltu Deba LGA). The next step in the process was the mobilization and formation of a CRC in each of the communities, all consisting of 7 members, including the community's traditional leader, two religious leaders (Christian and Muslim), a woman leader, a youth leader, and two IDP representatives (one male and one female). The selected CRC in turn nominated or validated community volunteers whose main role was supporting community mobilization efforts, beneficiary registration, and general dissemination of program messaging. REACH conducted an informal interview with each volunteer to vet their ability and willingness to carry out the tasks associated with the program activities.

Beneficiary registration: The community volunteers were then trained on the beneficiary registration process and received ongoing formal and informal trainings on gender sensitivity and Do No Harm approaches. Based on criteria identified in the trainings, the community volunteers subsequently conducted door-to-door registration of beneficiaries within the target communities. The volunteers registered every interested household fulfilling the criteria.

The registration was conducted in the presence of representatives of the displaced families as a means of verification and validation of the process.

Registration list validation: Community volunteers would then submit completed registration lists to the REACH M&E team for data entry and verification. The M&E team conducted door-to-door verification of a minimum of 20% of the registered households on the submitted lists, checking against eligibility criteria and for validation of the information recorded in the forms.

While conducting registrations in the REACH-targeted communities, it became clear that other organizations previously completed registrations, but had failed to follow up with beneficiaries/communities. This caused some skepticism among the households in the communities who then, in turn, were reluctant to register or registered under false information. Therefore, although the registration list validation was intended to take place on only one occasion, issues in correctly registering the target number of beneficiaries meant that beneficiary registration, and subsequent validation, had to be conducted on several occasions in order to reach the targeted number of households. This challenge is described in more detail in the *Implementation Challenges* section of this report.

Beneficiary selection: Beneficiary selection was determined on the basis of the registration lists entered into the database, following the below vulnerability criteria:

- Vulnerable residents and displaced families with five or more family members and female or minor headed households.
- Households with higher numbers of pregnant and/or lactating women and/or children under the age of five.
- Households without any formal means of income generation.

The list of beneficiaries was submitted to the CRC members for a screening and validation process as a means of allowing them to engage in the final stages of the process and to give their final consent. This occasionally would also be used by the CRC members to point out if there were any people indicated on the list they did not think were in need of REACH support, which would subsequently be investigated by REACH staff.

- **1.1.3. Establish cash voucher distribution and redemption mechanism.**

Initially, REACH used a paper voucher modality to transfer the unconditional cash for food to beneficiaries. Consideration for an electronic voucher modality was in process, and REACH conducted a competitive bidding process to engage a service provider that would deliver a complete, cost effective product that can deliver functionality in a number of key areas. Of four bidders, Red Rose was selected as the most successful and a pilot was conducted in December 2014/January 2015 for the distribution and redemption of electronic vouchers. The pilot took place in five communities chosen to represent both a rural and urban setting (Kuri, Federal Low Cost, Pantami, Nassarawo, and Deba). The distribution took place over December 2014 and January 2015. Initially, 488 beneficiaries were selected for the pilot; however, 23 beneficiaries were absent for the distribution. Therefore, 465 beneficiary households were involved in the pilot, each receiving the e-voucher smart card. Sensitization with beneficiaries on the pilot was conducted at the distribution.

The feedback provided from the pilot was positive, as both vendors and beneficiaries found the e-voucher modality much simpler to handle and less time-consuming than paper vouchers, which need to be filled out by hand. An added benefit of the e-voucher system is the real-time monitoring it enabled. When an electronic voucher was used to purchase food at a pre-selected vendor, the vendor's terminal could transmit the details of the sale via a 3G connection. This included information on the price of the goods sold. If that price was higher than the standard price, REACH would investigate if the vendors were inflating the price. If the price was lower than the standard, REACH would investigate to ensure that the goods sold were of a sufficient quality.

Based on the experiences from the pilot, and similar experiences from other Mercy Corps programs in other countries, the decision was made to switch to the e-voucher modality. Parts of the paper voucher system were in place until March 2015, after which the program switched completely to the e-voucher system.

- **1.1.4. Distribute vouchers.**

REACH would notify the communities in advance of the day the distributions took place and conducted the distributions in front of the traditional leader's house. Only REACH staff handled the paper vouchers or e-voucher smart cards. The information received from the beneficiary registration was used to verify the identity of beneficiaries.

Initially, beneficiaries would queue up in order to receive their voucher, but as this proved too time-consuming as REACH staff had to go through the whole beneficiary list every time to find the next person in line, the system was changed. To improve the distribution process, REACH switched to a system where REACH staff would call out the name of the beneficiary and he/she would then approach and receive his/her voucher. REACH would check with local community leaders, before

this process started to assess if there were any beneficiaries who were elderly, sick, pregnant, or taking care of small children. These beneficiaries would then be called up first.

For the e-vouchers, the list of beneficiaries was sent to Red Rose who then printed out the smart cards on which the voucher balance was put. The beneficiaries then received a monthly top up with each beneficiary receiving an average of 12 top ups.

The paper vouchers were a set of vouchers of different values with the specific value detailed on each voucher. Each beneficiary received a set of paper vouchers adding up to the total amount of 9,600 NGN. Each set came with a serial number that matched the beneficiary and a participant card attached to the set that would be used to verify the beneficiary during distribution. There was a unique number on each voucher that would match the list that each participant would receive.

- **1.1.5. Conduct ongoing market monitoring to ensure continued availability of food goods through vouchers.**

The REACH M&E team visited markets on a monthly basis to monitor the prices and availability of the foods in the food basket. Throughout the implementation of REACH, the prices did not fluctuate to an extent that required an adjustment of the value of the paper vouchers or monthly e-voucher top-ups. The price monitoring data is attached to this report (Annex 3).

In the case of the e-vouchers, the terminals provided to the vendors would transmit all of the information related to voucher redemptions (prices, quantities etc.) to the online platform. This data was used in the ongoing monitoring of food availability. Due to connectivity issues, REACH would have to collect some of the vendors' terminals and bring them to the REACH office in order to synchronize the terminals data with the online database.

- **1.1.6. Design and deliver community-wide sensitization on nutritional awareness making use of a variety of forums to adequately reach men, women, boys and girls.**

REACH designed and delivered a community-wide sensitization campaign on infant and regular nutrition. To reach the different cohorts, REACH established women support groups set up specifically to inform on nutrition, as well as how to identify cases of SAM. Referring cases of SAM was made difficult, as there were very few CMAM centers available to the targeted communities. This particular challenge is describe in more detail under the *Implementation Challenges* section.

The members of the women support groups received training on complementary feeding of young children based on recipes containing rich foods that were locally available, as well as training on basic personal and environmental hygiene. REACH staff conducted demonstration activities for the women groups showing how to use the foods from the food basket to cook a nutritious meal for infants and/or the whole family, thereby keeping mothers from having to use infant packaging.

The women support groups then helped REACH to scale up sensitization awareness by carrying the information they receive in the groups to their respective communities. The women were given forms to register the number and type of people they provided training and information to. Furthermore, banners and flyers with nutrition messages were used as part of a mass sensitization campaign during voucher distributions.

The Red Rose platform assisted in the targeting of the nutritional messages as it provided a real-time overview of what the beneficiaries redeem at the vendors. If, for example, a particular nutritious

food group was found to be bought in only very small amounts, REACH would target that community with messaging on the importance of the food group in question.

Output 2.1: Twenty-five (25)⁴ host communities benefit from rehabilitated community infrastructure through the execution of Voucher for Work interventions.

Mercy Corps initially proposed for all 4,100 beneficiary households receiving food assistance to participate in the Voucher for Work projects, which will help in developing a foundation for further economic responsiveness and contribute to strengthening local livelihoods. Pursuant to a reflection meeting conducted in June 2015, community and stakeholder feedback highlighted the necessity of engaging host community members specifically in the community projects to reinforce community acceptance and reduce tensions arising from the depletion of host community resources.

Preliminary discussions around possible and necessary community projects also resulted in the realization that creating sufficient work for 4,100 beneficiaries would not be feasible and hence refocusing of the projects on vulnerable host community members was essential. For cost-benefit purposes and given the fact that payments for cash for work beneficiaries were mostly one-off, it was decided to make the payments in cash rather than acquire new smart cards/e-vouchers for a single use.

To ensure that host communities benefited from the projects, the target beneficiaries were primarily vulnerable host community members. This resulted in a different set of beneficiaries for the two interventions (unconditional food vouchers and community projects), and Mercy Corps conducted a separate beneficiary registration process for the community projects.

- **2.1.1. Conduct community sensitization on Vouchers for Work in a variety of forums to adequately reach and include men, women, boys and girls.**

REACH met with SEMA to sensitize them on the criteria and modality of the community projects. This resulted in the signing of a memorandum of understanding, according to which SEMA would receive regular updates on the community projects.

REACH team members also conducted community sensitization through the community leaders serving on the CRCs. To ensure that all cohorts were reached, special attention was paid to the women leaders from the CRCs and the women support groups engage with their communities to sensitize them on the community projects.

- **2.1.2. Identify household members to take part in Vouchers for Work.**

To assist in the targeting of beneficiaries and the identification and management of community projects, the program established project management committees (PMCs) in the targeted communities. The PMCs consisted of youth and women representatives, religious leaders, as well as members of both the displaced and host community. The CRCs nominated members of the community to serve on the PMC, ensuring they contained both religious leaders, a woman leader, youth leader, and IDP representatives.

⁴ Originally, 25 communities were planned to benefit from the community projects. However due to security considerations Funakaye LGA was deemed too insecure for REACH staff to operate, and the program intervention was, therefore, restricted to Gombe and Yamaltu Deba LGAs. This, in turn, limited the number of communities benefitting from community projects to 12, rather than the 25 initially envisioned.

The PMC was sensitized on the criteria REACH utilized for selecting household members to participate in the community projects; these were the same used for selecting the food voucher beneficiaries, and proceeded to register participants based on those criteria. REACH M&E staff received the list from the PMC and conducted the validation.

REACH trained the PMC members on how to manage community projects, including documenting all tasks undertaken, manage the tools used for the projects, identify potential community projects capable of including both men, women, and youth, and register community project participants.

- **2.1.3. Identify Vouchers for Work projects in conjunction with communities and other local stakeholders, taking into account the perspectives and priorities of men, women, boys, girls, and different ethnic groups.**

The PMCs were also sensitized on the type of community projects wanted by REACH, with an emphasis placed on projects being suitable for the participation of women. REACH staff conducted focus group discussions with the PMCs to determine types of community projects to be undertaken. The list of proposed projects was reviewed and the most suitable selected. In the case of some of the PMCs, REACH had to ask them to revise their proposed projects as they were either too capital intensive or benefitted only a few people.

A selection of the community projects that were chosen under this intervention include community cleaning and sanitation, rural road rehabilitation, construction and rehabilitation of drainage systems and refuse collection, construction of school chairs and a well, and the provision of waste containers.

REACH then conducted a market assessment to determine the cost of the community projects, the capacity of the communities to execute them (presence of skilled labor), and the appropriate amount to pay for the labor (taking into consideration the local wage levels).

- **2.1.4. Plan and execute Vouchers for Work projects and distribute vouchers.**

Once a proposed community project and its implementation schedule had been approved by REACH, the PMC would identify the specific workers to participate in the execution of the project. Skilled laborers were identified to work alongside unskilled laborers. Supervision of the work was primarily undertaken by the community's PMC and CRC. REACH made sure the materials needed for the community projects were delivered in a timely manner and supervised the quality of work.

Finished community projects were inspected by both the PMC and REACH, and the participants were paid following the completion of the attendance sheets (by the PMC) and the project completion notes (by REACH).

With the shift from the voucher to the cash modality, the process for execution of the projects and disbursement of wages followed internal Mercy Corps guidelines for cash for work programming.

The completed projects, along with the tools used, were donated to the PMC for continued use by the community. Under this intervention, the following illustrates some highlights of the community projects implemented by the host communities and other beneficiaries:

- *Community Cleaning and Sanitation:* Eleven of the communities prioritized community sanitation as issues around environmental degradation of poor environment hygiene were key challenges that waste disposal systems could not manage. These communities were

provided with cleaning tools such as rakes, shovels and brooms to clean main corridors and dump sites. Hygiene messages around the importance of proper waste disposal were integrated into these activities.

- *Rural Road Rehabilitation:* Two communities chose to rehabilitate some of its connector roads that were eroded by rain and flooding. Tools were provided for light construction activities which the community used to rehabilitate these roads.
- *Construction of School Chairs and Well:* Five communities chose to build some furniture for their school, engaging local artisans to build chairs and tables. One also decided to dig a well due to limited water sources that affected the area.

Key REACH Beneficiary Information

This section provides additional detail regarding the beneficiaries of REACH in terms of the total numbers and basic demographic information. Detail is provide for each intervention, unconditional food vouchers and voucher for work in separate sections.

Unconditional Food Voucher Beneficiaries

TOTAL NUMBER OF BENEFICIARIES

Total	IDPs	Members of Host Community
4,495 HH 41,201 beneficiaries	3,782 HH 35,205 beneficiaries	713 HH 5,996 beneficiaries

KEY INDICATOR DATA

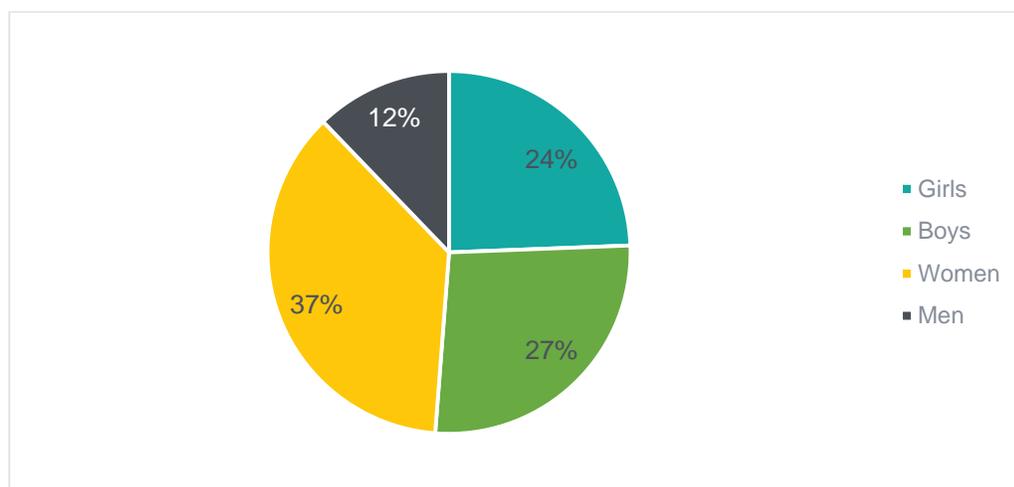
<u>Indicator</u>	<u>Targeted</u>	<u>Reached</u>
1.1a: # of recipients targeted and reached (disaggregated by sex and age: 6-23 months, 23-59 months, 5-18 years, and ≥ 18 years of age)	4,100 households 28,700 individuals	4,495 households 41,201 individuals

1.1b Actual cost per beneficiary sub-sectors activities

NGN 9600
USD \$60.00

NGN 9600
USD \$48.66⁵

REACH BENEFICIARIES, DISAGGREGATED BY GENDER AND AGE, END OF PROGRAM 2016⁶



REACH BENEFICIARIES, DISAGGREGATED BY GENDER AND AGE, END OF PROGRAM 2016

Gender	Beneficiaries	% of Total
Girls 0-5 Years	2,819	6.84%
Boys 0-5 Years	2,818	6.84%

⁵ Exchange rate used as of 30 April 2016 is NGN 197.30 = USD 1.

⁶ Age disaggregation for girls and boys is under age 18 and women and men are over 18 years of age.

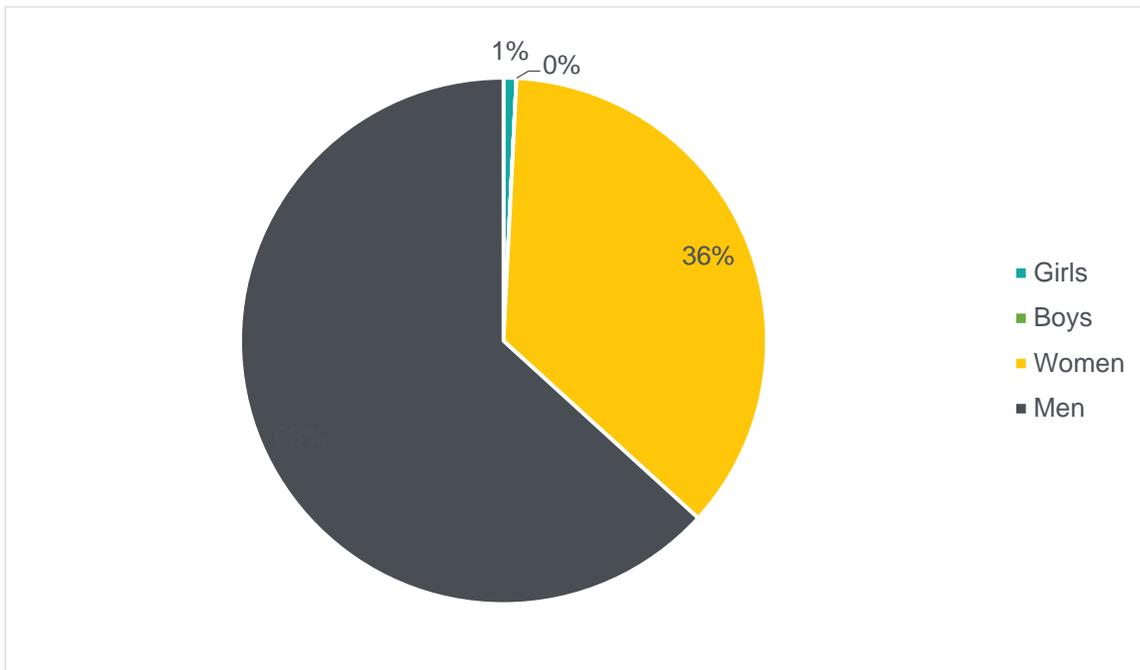
Girls 5-18 Years	7,710	18.71%
Boys 5-18 Years	7,264	17.63%
Women 18 years and above	10,702	25.98%
Men 18 years and above	9,888	24.00%

Community Project Beneficiaries

TOTAL NUMBER OF BENEFICIARIES PARTICIPATING IN COMMUNITY PROJECTS, 2016

Total	IDPs	Members of Host Community
1,012	206	806

COMMUNITY PROJECT BENEFICIARIES, DISAGGREGATED BY GENDER AND AGE, 2016



COMMUNITY PROJECT BENEFICIARIES, 2016

Gender	Beneficiaries	% of Total
Girls 5-18 Years ⁷	8	0.79%
Boys 5-18 Years	0	0
Women 18 years and above	364	35.97%
Men 18 years and above	640	63.24%

Total amount of cash transferred to beneficiaries

The total amount of cash transferred to beneficiaries during the Voucher/Cash for Work programming was \$700,082 USD. At exchange rates from the close of the program, April 30, 2016, this converts to 138,124,000 NGN.

⁷ This number represents girls that are head of household and engaged in livelihood activities in particular to sustain their families.

The total amount of cash transferred to beneficiaries during the Unconditional Cash Voucher programming was 427,699, 200 NGN or \$2,162,730 USD at the same exchange rate with a total of 44,552 monthly paper or electronic vouchers distributed during the course of the program. Additional details on the voucher intervention is detailed in the table below.

No.	Year	Month	Total HH served/ Total Number of Vouchers	Total Cash Distributed (Vouchers) (NGN)
1	2014	December	344	3,302,400
2	2015	January	131	1,257,600
3		Feb	423	4,060,800
4		March	3,401	32,649,600
5		April	-	Election Month
6		May	3,225	30,960,000
7		June	3,401	32,649,600
8		July	4,280	41,088,000
9		August	4,225	40,560,000
10		September	4,251	40,809,600
11		October	3,765	36,144,000
12		November	3,886	37,305,600
13		December	3,887	37,315,200
14	2016	January	2,907	27,907,200
15		February	3,886	37,305,600
16		March	1,413	13,564,800
17		April	1,127	10,819,200
Grand Total			44,552	427,699,200 (\$2,162,730 USD)

Price Development of Major Commodities Included in REACH

Based on price monitoring, there was no major change in prices that warranted a change in the food basket price during the life of the project. As such, there was no reason to change the value of the voucher during the course of the REACH program. Additional information regarding REACH price-monitoring activities are included in the annex to this document (Annex 3).

Post-Distribution Surveys: How the Recipients of Cash for Work used the Money Received

Following distribution of the vouchers, the REACH team conducted a survey by phone interview with a cross-section of 48 IDP beneficiaries across the different communities supported by the program. Based on this survey, the team found that approximately 82% of respondents spent at least 30% of the cash on food. About 62% spent between 70-100% on food. Beyond the clear priority of food for the beneficiary households, 13% spent some of the funds on farming; 13% spent some of the funds on an income generating activity, other than farming; 6% spent some of the funds on school fees for the children; 4% on health issues; and 2% spent some of the funds on clothing.

Impact

From the findings of the endline survey, the benefits of the REACH program are clear. Overall, the findings of the endline survey were extremely positive with some deviation based on geography. None of the sampled households in Gombe and Yamaltu Deba LGAs experienced either very severe or severe food insecurity at endline; whereas at baseline, 42% of households experienced severe levels of food insecurity. At endline, 71% of sampled households in Gombe LGA and 95% of sampled households in Yamaltu Deba LGA were food secure. The results varied by geography. Sampled households in Maikaho community were most food secure at endline at 100%, with good results seen in Kuri community (97% food secure); Dadin Kowa (93% food secure) and Tumfure (91% food secure).

Beyond this geographic irregularity, in the sampled households across all communities, there were no reports of severe hunger at endline, compared to 6.6% at baseline. The percentage of households that reported little to no hunger at endline was 92.8%, as compared to 12.8% at baseline.

However, mixed results were found in Malam Inna where 93.8% of sampled households still experienced moderate food insecurity at endline. The M&E team made efforts to understand what differentiated Malam Inna from the other communities. There were no clear barriers or challenges that Malam Inna faced either in terms of context or access to the program that could explain why the indicators were so different. Qualitative information collected by the project seemed to indicate that IDPs within Malam Inna were more mobile than those in other communities, however, there was no quantitative data to back up this conclusion. In future, additional efforts around qualitative data collection and analysis may be able to develop more nuanced reasons behind such geographic differentiation.

Women's dietary diversity also showed great improvement at endline, as compared to baseline, where women were consuming more of the dietary groups of focus, including starchy staples (88.6% at endline vs 25.0% at baseline), dark green leafy vegetables (85.2% vs 58.2%), Vitamin A rich fruit (63.6% vs 11.5%) and other fruits (45.5% vs 5.3%). The endline survey saw a similar trend with organ meat (37.7% vs 9.2%), meat fish (48.3% vs 6.8%), eggs (63.6%), nuts and seeds (79.5% vs 11.0%) and milk and milk products (70.0% vs 12.4%).

In addition to the women, children also showed improved nutrition. The proportion of children aged between 6 and 23 months who consumed all seven food groups at baseline (9.0%) increased to 99.7% during the endline survey. The consumption of dietary diverse liquids and solids also increased at endline. The minimum acceptable diet of milk and milk products was 38.9% at endline compared to 5.0% at baseline.

Moreover, the number of times that children eat either solid, semi-solid or soft foods other than liquids a day or night increased from 1.7 times at baseline to 2.5 times at endline.

Additional information regarding the endline survey can be reviewed in the attached, Annex 1.

Implementation Challenges

Dynamic movement of IDPs. Efforts to both register and distribute to beneficiaries were challenged by the fact that some of the IDPs were moving from community to community. Some IDP households did not have their head of household present as he/she was in a different community looking for work, while some IDP families moved from community to community asking for food. REACH mitigated these issues by having a next of kin registered for each head of household. The registered next of kin would then be able to receive the distribution in lieu of the head of household. In addition, by making sure that there was as little time between registration and distribution as possible, REACH was able to limit the number of IDPs who left the community between the registration and the distribution. However, throughout the course of the program, there were fluctuations in vouchers distributed each month due to these issues.

Unregistered IDPs showing up at distributions. Unregistered IDPs would show up at distributions to ask for food vouchers. REACH staff explained to these individuals only the registered beneficiaries were eligible to receive the food vouchers. In the earlier phase of the program, before the targeted number of households had been fully reached, REACH staff would describe the registration process and how to apply. After the targeted number of households was reached, the REACH team worked with the IDPs to understand how and where to locate other potential support, as the program could not register any more new individuals.

Security situation. Gombe was relatively secure compared to the rest of Northeast Nigeria, and its security situation improved throughout the implementation of the program; however, there were security incidents that required adaptation in implementation. REACH was initially planned to implement in Funakaye LGA and went through the process of identifying the intervention communities, selecting vendors and community volunteers, and starting the beneficiary registration process. However, the activities of Boko Haram insurgents made it too dangerous for REACH staff to operate there and REACH was not implemented in Funakaye LGA.

In addition, following the bombing of a marketplace by Boko Haram insurgents in Gombe, REACH persuaded vendors to relocate to the host communities until the security situation normalized. This helped mitigate the risk posed by Boko Haram as the beneficiaries would no longer travel to the crowded markets, which were likely targets of Boko Haram. Furthermore, during the election period, REACH suspended outreach to communities for a total of two weeks as the security situation deteriorated. As soon as the situation normalized, REACH staff continued normal operations.

Community and Vendor Acceptance. At the onset of the program, REACH discovered that other organizations had conducted registration exercises in the same communities, yet did not follow up on them. As a result of this, both vendors and beneficiaries were, at first, skeptical of REACH. Some beneficiaries refused to be registered, provided fake information, or did not show up for distributions. This skepticism faded once the first pilot was implemented and beneficiaries received food in return for their vouchers.

Initially, vendors were also hesitant to enroll in the e-voucher system, as it involved handing over food products to beneficiaries with no cash exchanged, only to be reimbursed by REACH following the reconciliation of vouchers. REACH prioritized the reconciliation and reimbursement process to ensure payment was received by vendors within a few days of the exchange of food for vouchers. This helped to build the vendors' trust in REACH and, subsequently, more vendors were willing to participate in the program, with some going as far as relocating to provide services within the communities when security considerations deteriorated.

Coordination challenges surrounding CMAM centers. There were only a few CMAM centers in the targeted communities, which made it difficult for the women support groups to refer cases of SAM. REACH advocated with the Gombe State Government for a scale up of the existing CMAM facilities, as only 3 out of the 11 local government areas in Gombe State had CMAM centers. However, the State Government did not express any interest in expanding the capacity of the existing centers or establishing new ones.

Deteriorating economic situation. During the implementation of the REACH program, Nigeria as a whole, and the Northeast in particular, experienced a weakening of the economy. This resulted in an uptake of petty crime and an increase in prices due to a depreciating national currency (the Nigerian Naira). Another outcome of the economic situation was periodic shortages in the fuel supply. Gombe faced fuel shortages, making it necessary for REACH staff to economize fuel usage. Whereas REACH staff would previously plan to visit several communities for different activities in one day, the movement, during periods of fuel shortage, was adapted so that all staff (protection, M&E, etc.) would visit the same community on the same day, thereby limiting the number of vehicles needed.

Recommendations for Future Programs

Improved harmonization with other actors on the content of the food baskets. As increased attention is focused on Northeast Nigeria, other international NGO actors will also join the efforts to respond to this humanitarian crisis. As food will be a continued key relief need, it is important for coordination efforts to include harmonization of food baskets, in addition to current efforts that have already worked to harmonize cash transfer values of international NGO programming. This can also be a tool to reinforce nutrition messages across multiple programs.

Transportation to CMAM centers. Although not defined as a specific objective of this program, where the REACH team saw cases of severe to moderate malnutrition, they were often the only actors in a position to make referrals to either CMAM centers or other health facilities. To manage this need, the REACH team was trained to identify the major signs of malnutrition. However, even with this referral system, a barrier to a child getting needed support can often be transportation, a consideration that Mercy Corps may include in future programming.

Improved targeted vulnerability criteria. A fundamental area of focus for Mercy Corps programs is to ensure that the beneficiaries supported are truly the most vulnerable. During a humanitarian crisis, these criteria and any subsequent screening processes need to be efficiently and effectively measured. REACH developed clear vulnerability criteria and piloted methods for screening potential beneficiaries with multiple layers of validation from both Mercy Corps and community leaders. With the data from this initial round of vulnerability screening, Mercy Corps should be able to analyze the data to understand the effectiveness of the screening process and how it can be improved in future interventions.

Shared focus on qualitative and quantitative data gathering. As was the case with Malam Inna, it is useful to have qualitative data in evaluations that can provide details, context and nuances that cannot be identified or tracked, often in a qualitative study. When there were irregularities in the quantitative data that was gathered, for Malam Inna in particular, it was difficult to identify specific reasons for these deviations. As such, for future intensive evaluation efforts, Mercy Corps will consider focused efforts on both quantitative and qualitative data collection and analysis.

ABOUT MERCY CORPS

Mercy Corps is a leading global organization powered by the belief that a better world is possible. In disaster, in hardship, in more than 40 countries around the world, we partner to put bold solutions into action — helping people triumph over adversity and build stronger communities from within. Now, and for the future.



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