

## **Webinar Report**

### **Global Nutrition Cluster Webinar: Resourcing Families for Better Nutrition (RF4BN) – Comparing effectiveness and cost-effectiveness of Cash Plus interventions in preventing Acute Malnutrition in Somalia**

**10 April 2025**

#### **Attendance:**


The webinar was attended by 170 participants, including representatives from **international NGOs** (SC, Concern, ACF, Internal medical Corps, Intersos, CRS, Give directly, Islamic Relief, Redcross, Norwegian Church Aid, CARE, ICRC, ACTED); **local NGOs** [Goal Ethiopia, Human Aid Selangor Society (HASS), Action Against Disaster Somalia, Wasda (Kenyan NGO), Savevulnerable, SAACID, Raagsan, Gredosom, (Somali NGOs)]; **UN agencies** (FAO, UNICEF, WFP, UNHCR); **academia** (UCL, Somalia Universities, John Hopkins University (JHU), Georgetown University); **donors** (Elrha, ECHO, USAID, Gov of Canada, NORAD, European Union); and **individual consultants** and other entities like the Centre for Disease Control (CDC).


#### **Summary report**


The webinar showcased the findings from the Elrha-funded Research to Action in Humanitarian Setting (R2HC) study, which tested the effectiveness and cost-effectiveness of Cash Plus interventions preventing acute malnutrition among children under five (CU5) and pregnant and lactating women (PLW) in Somalia. This study employed a mixed-method, prospective cluster-randomized controlled trial (cRCT).


The discussion was led by various experts, including members from Save the Children, Johns Hopkins University, the Somali Ministry of Health as the local research partner, and global cash and nutrition specialists. The webinar emphasized that malnutrition is a significant concern in Somalia, with millions of children affected annually. The research employed a cluster randomized trial to compare different models of cash transfer interventions, highlighting the effectiveness of cash coupled with social and behavioural change communication (SBCC) compared to cash alone or cash with additional top-up cash support for pregnant and lactating women. **Key outcomes demonstrated that combining cash assistance with SBCC strategies was significantly more effective and cost-effective in reducing child wasting than cash alone.** Drivers of malnutrition (such as individual dietary diversity, food security, dynamics of household spending as well as wash and hygiene practices, child and maternal health) were also discussed and their relation to child wasting. The study flagged the alarming problem of relapse in Somalia, including a presentation of the high relapse rates among children, the causes of relapse and potential protective effects that cash assistance can have on relapse prevention. The webinar concluded by stressing the importance of integrating cash with SBCC as an effective approach to reducing acute malnutrition while addressing gaps in existing humanitarian assistance.



At the end of the webinar, decision makers discussed the implications of the research for future programs and policies. Messages from the panellists included:


 Cash transferred alongside SBCC proved to be significantly more effective and cost effective in preventing child wasting than cash alone.


 Cash and SBCC have proven to have synergetic effect: The evidence highlights that cash-based interventions for addressing malnutrition are vastly enhanced when combined with social behaviour change communications. The collaborative nature of cash assistance enables families to make informed decisions about nutrition, reinforcing the importance of nutritional education for behaviour change.


 Household Dynamics Matter: Spending and decision-making patterns within households influence nutritional outcomes. The study emphasizes that knowledge transfer through SBCC can positively influence mothers and caregivers, leading to choices that align with improved dietary practices and care.


 Cost-Effectiveness: While cash assistance is crucial, the introduction of SBCC resulted in a more cost-effective strategy overall. The marginal additional costs for SBCC interventions proved to yield significant efficacy in reducing child malnutrition rates, reinforcing the notion that targeted educational efforts are an essential part of nutrition programs

-   High rates of malnutrition relapse was identified, suggesting revising the ongoing interventions on malnutrition to prevent deterioration. The sub-study revealed high rates of wasting relapse among children previously treated for malnutrition in the study locations and highlighted the importance to revise the exiting framework of relapse interventions to mitigate risks of relapse. Also, it emphasized the need for integrated approaches to ensure follow-up post discharge and continuous assistance.

-  Measurement Methods Evaluation: The research explored detailed metrics for child wasting, revealing that reliance on MUAC alone can lead to significant underestimations of child malnutrition when compared with WHZ. This highlights the need for robust methodologies in assessing malnutrition prevalence to inform effective intervention strategies.

 Collaboration with local partners and government bodies was essential for research implementation and community trust.

 Long-Term Implications for Policy: The findings will inform future policies aimed at preventing malnutrition in Somalia and similar humanitarian contexts. They provide a foundational basis for developing integrated programs that address the multifactorial nature of malnutrition while promoting local solutions.

 Broader Applications: The insights gathered from the research signify actionable recommendations that can transcend the Somali context, providing guidance for implementing similar cash and SBCC programs in other high-burden humanitarian settings.