

Cash plus nutrition education shows promise for combating wasting

A small investment in nutrition education turned cash assistance into a life-saving intervention for Somalia's most vulnerable children.

An effective and high value-for-money approach

Humanitarian actors increasingly turn to cash interventions to prevent malnutrition, but limited evidence has been available on the best approaches. This study in Somalia showed that addition of a Social and Behavioural Change (SBCC) intervention (nutrition education programming), to cash transfers ('Cash Plus') significantly outperformed both cash alone and increased cash, offering both improved and sustained nutritional outcomes and high value-for-money.



Health worker measuring Mid-Upper Arm Circumference (MUAC) of child in Baidoa, Somalia, 2023

Mustafa Saeed / Save the Children Somalia

Background

Wasting affects millions of children under 5 years (CU5) and pregnant and lactating women (PLW) annually, yet research into the most effective, preventative interventions is nascent.

Existing evidence indicates that cash assistance can be effective in addressing malnutrition when combined with nutrition education - known as "Cash Plus" or "Cash +". However, there is limited research in humanitarian contexts which compares the effectiveness and cost-effectiveness of Cash by itself with Cash Plus.

How the research was conducted

A randomised control trial alongside cost-efficiency analysis was conducted in Bay and Hiran regions of Somalia, comparing three arms over six months:

- (1) *Cash Only (517 HHs)*: cash transfers,
- (2) *Cash + SBCC (501 HHs)*: Cash assistance with nutrition education activities
- (3) *Cash + Top-up (472 HHs)*: increasing the amount of cash to each household

Key findings

- Cash +SBCC proved effective in preventing acute malnutrition (wasting) among children under five and influencing nutrition behaviours among pregnant and lactating women. Neither Cash-Only nor Cash+Top-up effectively decreased wasting amongst children under 5.
- The proportion of households experiencing moderate/severe hunger decreased across arms 1 and 2, but not for Cash+Top-ups. Children's diet diversity—including the intake of animal-source proteins—improved across all study arms, with those receiving Cash+Top-ups improving the most.
- Six months of programming cost \$875 per household for Cash-Only, \$906 for Cash+SBCC, and \$1204 for Cash+Top-up. Since Arm 2 had a relatively low marginal cost (+\$31 per child) and was the only approach that reduced wasting, Cash+SBCC is the most cost-effective arm.
- Households in Arm 2 incurred an average of \$8 in costs to attend 12 weeks of nutrition education sessions, mostly for transport.

Implications for humanitarian practitioners and policymakers

These findings offer strong evidence for integrating SBCC into cash-based nutrition interventions aiming to prevent and reduce acute malnutrition. They make a compelling case for integrated humanitarian assistance that combine financial support with education, especially in fragile settings. As humanitarian funding becomes increasingly constrained, such evidence-based approaches are vital for ensuring that scarce resources deliver maximum impact for vulnerable populations.

Cash programs aiming to address malnutrition of children should consider incorporating nutrition education activities, while taking steps to address the costs for participants of attending to ensure interventions reach the most vulnerable households.

Simply providing more cash is not a cost-effective method to address wasting in children in Somalia. This does not, however, indicate that Cash-Only and Cash+Top-Up are not beneficial in addressing food insecurity: both approaches showed positive impacts on children's diet diversity and overall household hunger reduction.

Currently, siloed implementation of cash and nutrition programs limits impact; therefore, linking actors through platforms like SUN and the Prime Minister's Office, and establishing an intersectoral working group, will foster collaboration, align objectives, and strengthen policy coherence.

Recommendations for future research

Given the six-month period of this study, future research should explore outcomes over 9-24 months, and compare different durations of assistance – e.g., 6, 9, and 12 months – to identify the optimal duration needed to achieve sustained improvements in child wasting. These two together can help determine whether longer durations lead to more durable outcomes or if shorter, well-targeted interventions suffice.

About the study team

This study was conducted in partnership between Save the Children International, Save the Children Somalia, Johns Hopkins University, the Somali Ministry of Health, and the Somali National Bureau of Statistics.

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Keywords

Acute Malnutrition, Cash Assistance, East Africa, Behaviour Change, Children, Somalia

Articles and further reading

The project page on the Elrha website is here: <https://www.elrha.org/projects/effectiveness-and-cost-effectiveness-of-cash-plus-interventions-in-preventing-acute-malnutrition-somalia>

[The Effectiveness and Cost-Effectiveness of CashPlus Interventions to Prevent Acute Malnutrition in Somalia: Evidence from an Adaptive Cluster Randomized Control Trial | medRxiv](#)



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This research was funded by Elrha's Research for Health in Humanitarian Crises Programme (R2HC), which aims to improve health outcomes for people affected by crises by strengthening the evidence base for public health interventions. The programme is funded by the UK Foreign, Commonwealth and Development Office (FCDO), Wellcome, and the UK National Institute for Health Research (NIHR). Elrha has developed this Research Snapshot in consultation and partnership with University of Victoria's Research Partnerships and Knowledge Mobilization unit, on behalf of Research Impact Canada – Réseau Impact Recherche Canada network.

<http://www.elrha.org/programme/research-for-health-in-humanitarian-crises/>