Somalia & Somaliland
May 2026 Snapshot Report

Executive Summary

The feedback from communities this month reveals continued humanitarian crises in Somalia's Lower Juba and Lower Shabelle regions, where displacement, drought, and inflation have created acute needs especially amongst minority communities. Food security (34%) and livelihood assistance (32%) dominate requests. The continued dominance of food security and livelihood-related requests aligns with the May 2026 IPC Projection Update[1], which estimated that six million people across Somalia were facing Crisis or Emergency levels of food insecurity amid rising food prices, livelihood deterioration, displacement, and declining humanitarian assistance. On the other hand, WASH needs have decreased significantly to 11%. Women and children constitute the most vulnerable groups.

⬆️**2%** of people cited **Aid effectiveness** issues specifically concerns around the inclusivity and accessibility of Aid, and **organisational responsiveness** increased to 14% of tagged feedback.

Loop handled 102 sensitive cases in May, reflecting a significant rise from 69 cases in April (+48%). Service-level concerns increased this month, accounting for 81% of all feedback (83 reports), including 48 service-level complaints and 35 non-sensitive assistance requests. The increase in service-level complaints and concerns regarding aid accessibility may reflect wider funding constraints affecting humanitarian operations in Somalia. During May, humanitarian agencies reported[2] significant reductions in assistance coverage due to funding shortfalls. Complaints mainly related to delays, non-payment, and lack of follow-up after registration, while assistance requests primarily concerned cash, food and nutrition, health, and education support. Half of service-level complaints originated from Lower Juba.

Protection-related concerns decreased to 16% of all feedback (16 reports), continuing the downward trend observed since February. GBV remained the most reported protection concern, while fraud, corruption, and aid diversion reports declined significantly to 3%, with the three reported cases mainly concerning allegations of improper influence in registration processes.

Most sensitive reports were submitted by individuals on their own behalf (89%), with women and girls accounting for 56% of all sensitive feedback, reflecting a slight decline compared to previous months. Reporting from persons with disabilities increased to 10%, mainly concerning service-level complaints and follow-up after registration.

[1] Somalia IPC Update - May 2026
[2] Reuters: Somalia faces severe malnutrition crisis as WFP warns of aid halt

Reports from minority and marginalised communities remained stable at 32%, with most originating from internally displaced individuals and primarily related to service-level concerns. Geographically, sensitive reports were received from 11 regions, with three-quarters of submissions concentrated in Lower Juba, Lower Shabelle, Banadir, and Galgaduud.

A total of 35 referrals were made, including 19 assistance-related referrals and 16 referrals related to allegations (corruption, fraud, and service-level complaints). Overall, 71% of referrals were acknowledged, with higher acknowledgement for assistance-related referrals (89%) compared to allegation-related referrals (50%).

Total feedback volume

During May, Loop received ⬆️6,817 pieces of feedback; a 9% increase from April (6,266). Out of those, Loop published ⬆️1198; a 64% increase from March (433) and handled ⬆️219 sensitive reports.

While Loop is available for communities via the Voice channel, Whatsapp and our Web channel, all feedback was received via the Voice channel.

Open feedback

Language use:

The majority of published feedback (1198) was recorded in ⬆️Maxatiri (73%); ⬆️Maay (17.5%); ⬇️Kizigua (4.7%) (mostly women in Kismayo); ⬇️ Banadiri Merka (3.6%) (from both women and men in Lower Shabelle); ⬆️ Bujuuni (1.17%).

Demographic information:

⬇️While feedback from **females** dipped slightly to 55% (60% in April); it remains a significant increase in feedback from women since the beginning of 2024.
⬆️Feedback from **Children and Adolescents** (ages 14-17) saw a significant increase 3% (1.6% in April).
⬆️2% was shared by the **Elderly** (over 60 years of age), (1% in April).
⬆️3% of feedback came from **People living with disability** (PLWD) (1.8% in April).

> Feedback from people with disabilities in Somalia comes primarily from the Kismayo/Lower Juba region, with additional individuals from Mogadishu/Banaadir, Beledweyne/Hiran, and Caabudwaaq/Galguduud. Their needs span multiple thematic areas, including food security, health (medications), livelihoods (cash and employment), shelter, water and sanitation, education, and assistive devices such as wheelchairs. Most users are male with physical disabilities (walking or climbing steps) or visual impairments, and

> several are female heads of households. Many face compounding vulnerabilities as internally displaced persons (IDPs), elderly individuals, low-income families, or parents caring for children with disabilities. The feedback reveals critical gaps in access to medical treatment, mobility aids, educational support for their children, employment opportunities, and basic shelter, especially during heavy rains and drought conditions across these conflict-affected regions.

⬇️A significant decrease in feedback is seen from minority communities with 6%, down from 15% in April.

> Feedback from minority communities (primarily Kizigua speakers) in Somalia shows strong patterns across several areas. The most dominant themes are food security, shelter, and water access, with frequent requests for plastic sheeting, cash assistance, and basic supplies. Most community members come from Kismayo in Lower Juba, particularly from IDP camps like Istanbul and New Luglaw, with many displaced from conflict zones like Gosha. Key vulnerability factors include being internally displaced, low-income status, female-headed households, and caring for orphaned children. Several users report mobility or visual impairments that compound their challenges. The feedback reveals systemic marginalization where minority communities face compounded difficulties due to displacement, poverty, language barriers, and limited humanitarian access, especially during seasonal hardships like the rainy season.

Vulnerability factors:

↔️47% of people who used Loop this month mentioned having one or more vulnerability factors (47 % in April).

The analysis shows that dependent children represent the most frequently cited vulnerability, appearing in the majority of cases and highlighting the intergenerational toll of displacement and resource scarcity. Displaced populations (IDPs) form another highly vulnerable category, with many living in camps and informal settlements following forced relocation due to ongoing conflict and environmental stressors.

The geographic distribution reveals that Lower Juba region, particularly Kismayo and its IDP camps (Istanbul, New Luglaw, New Qam Qam), contains the highest concentration of vulnerable individuals, followed by Lower Shabelle (Afgooye, Marka, Qoryooley, Janaale) and Banaadir. Additional at-risk populations are found in Galguduud, Gedo, Middle Shabelle, and Sool.

Gender analysis indicates a strong female majority among users, suggesting that women disproportionately bear the burden of household sustenance and child-rearing in these crisis-affected environments. This dynamic intensifies vulnerability, as women frequently navigate limited access to resources and decision-making authority while

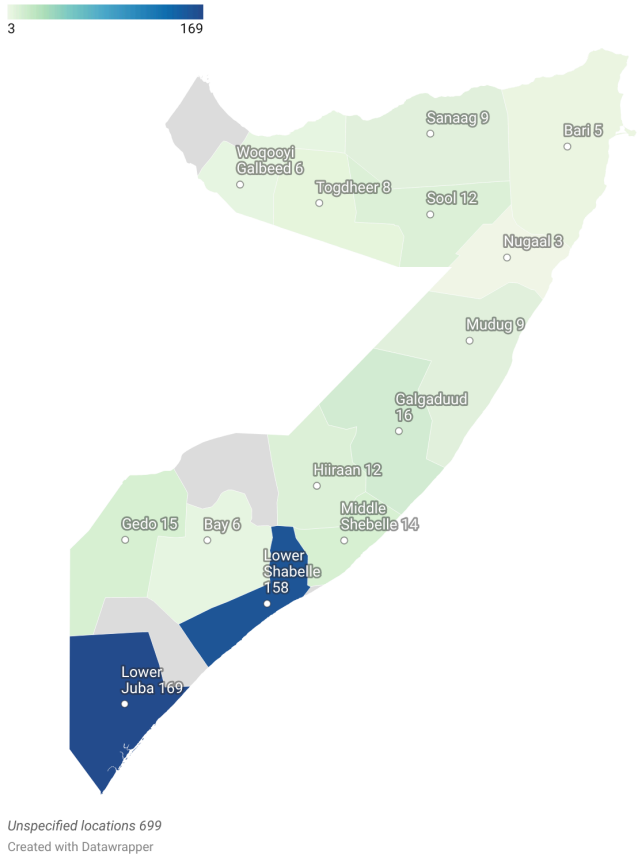
managing multiple caregiving responsibilities – often as divorced, separated, or widowed household heads.

Thematic patterns across submissions show consistent priorities: food insecurity ranks as the most pressing concern, followed by livelihood support (cash assistance, employment, agricultural inputs), shelter deficits (including tarpaulin for rain protection), and healthcare access (medications and medical treatment). Additional recurring themes include water and sanitation shortages, educational barriers (children unable to afford school or madrasa fees), lack of essential household supplies (clothing, bedding, cooking items), and climate-related pressures (drought, heavy rains, flooding, extreme temperatures). The rainy season and flood risks[3] intensifies shelter and water needs, while sustained drought conditions continue to undermine food production, livestock survival, and water availability across much of the affected regions.

Location:

As shown below, the majority of people requesting assistance and reporting vulnerabilities continue to come from Lower Juba and Lower Shabelle.

Figure 1: Locations of open feedback



Lower Juba accounts for the highest volume of feedback (169), revealing a humanitarian crisis centered around Kismayo and its IDP camps (Istanbul, New Luglaw, New Qam Qam, Buulo Bartire, and Al Hidaaya). The primary concerns are food security, shelter needs (especially plastic sheeting/tarpaulin), water shortages, livelihoods (cash assistance and employment), and health (medications). Most users are internally displaced persons fleeing conflict from areas such as Gosha, Jamaame, and Muganbow, facing extreme poverty. Children, orphans, and female-headed households represent highly vulnerable demographics, with many widowed or divorced women caring for multiple orphaned children while managing unemployment and resource scarcity.

[3] Somalia IPC Update - May 2026

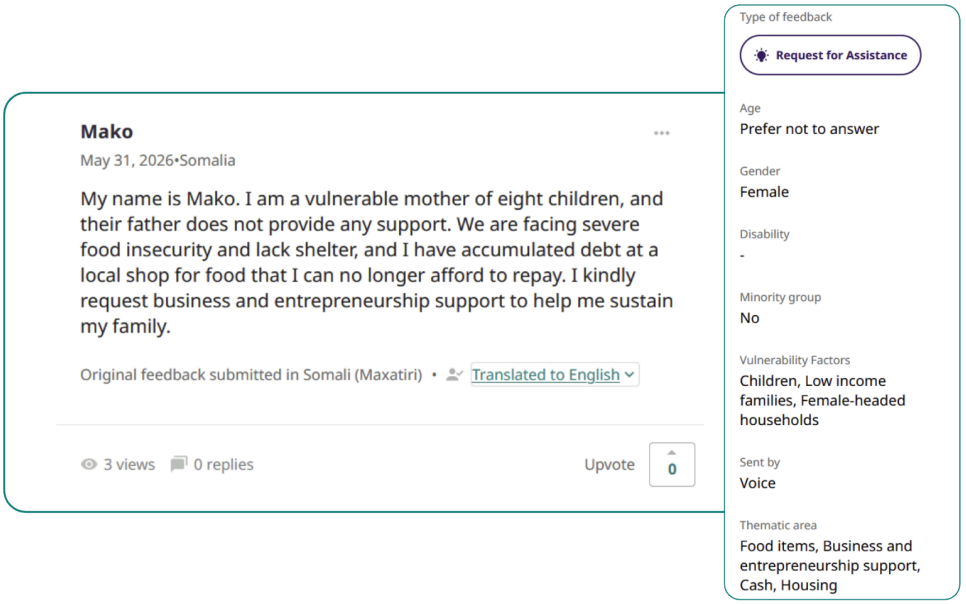
Identified needs include food assistance, tarpaulin for rain protection, water access, cash support, medical treatment, and educational opportunities, all exacerbated by the rainy season and ongoing conflict displacement.

Lower Shabelle follows closely (158 pieces of feedback). Key concerns include food insecurity, shelter deficits, drought impacts, and agricultural livelihood support. Many users are displaced farmers who have lost livestock or cropland due to drought and heavy rains, with additional vulnerabilities including low-income status, caring for children, and female-headed households.

The Banaadir region also shows substantial feedback, with needs centered on food, shelter, cash assistance, and education for displaced families living in informal settlements.

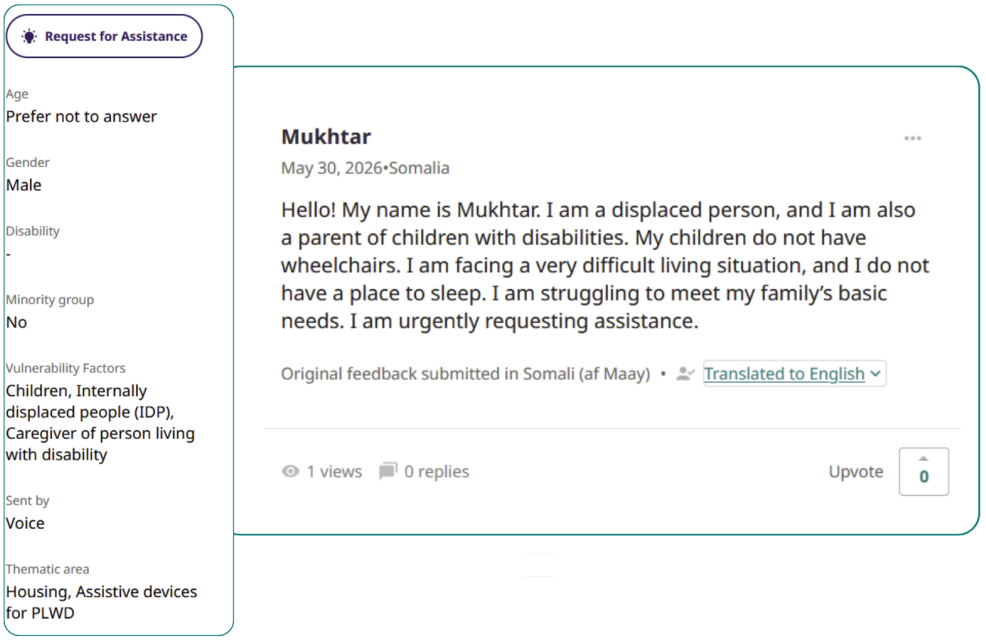
What did the community members request?[4]

Request for assistance for food, shelter, and cash from a displaced mother of eight children whose father provides no support:

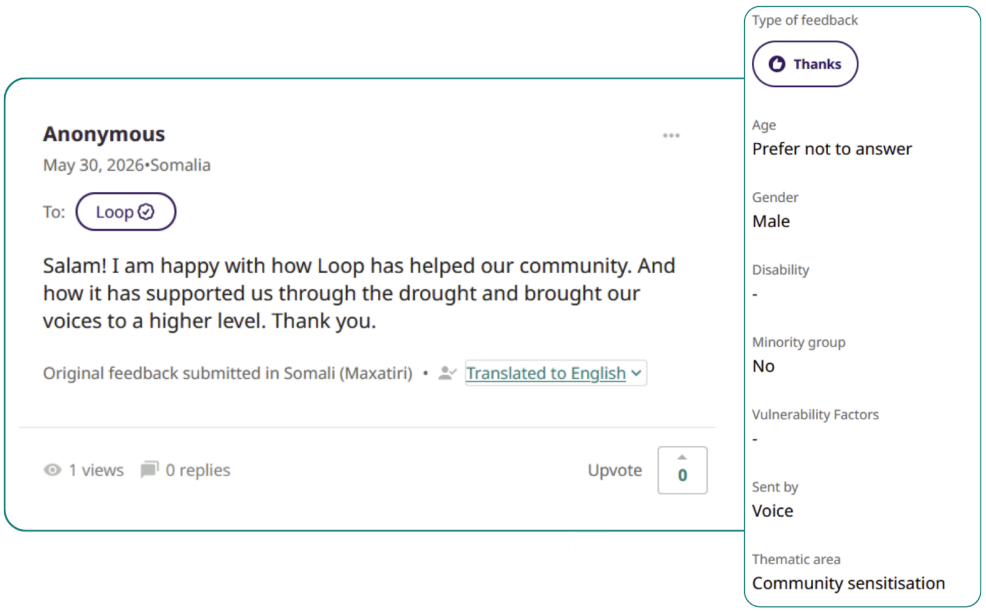


Request for assistive devices (wheelchairs) for children with mobility disabilities living in makeshift shelters with no access to aid:

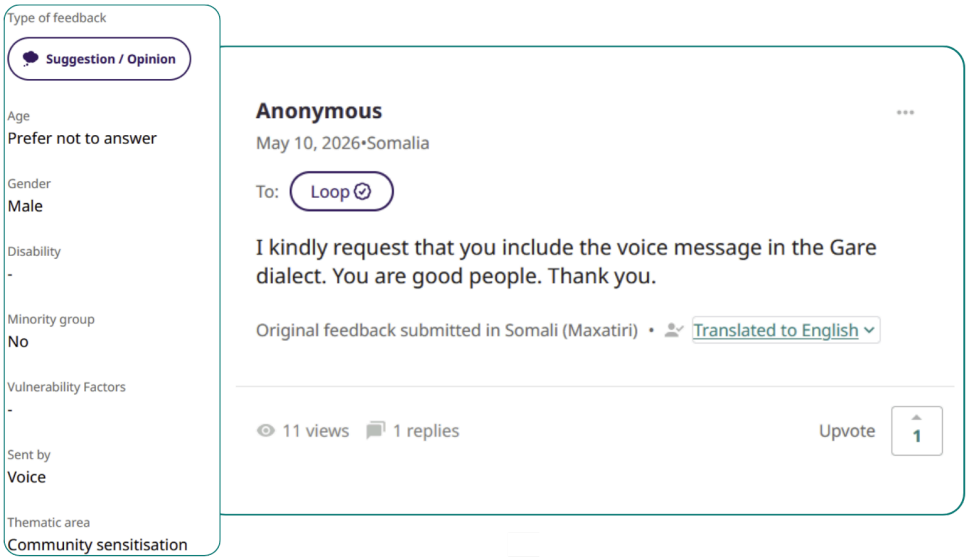
[4] In some cases community members speak about multiple needs in one feedback yet they might request one type of service.



Thanks message expressing gratitude to Loop for providing a confidential channel to share concerns and for responding to requests with dignity:



Suggestion to expand voice message support to include Gare dialect for better accessibility:



Community sectoral requests:

⬇️**34%** Food security (50% in April)

⬇️**32%** Livelihoods/General assistance (43% in April)

⬇️**16%** Shelter (19% in April)

⬇️**13%** Environment (droughts and floods) (27% in April)

⬆️**12%** Health (8% in April)

⬇️**11%** WASH (38% in April)

⬇️**11%** Essential living supplies (22% in March)

⬇️**5%** Education (7% in April)

⬆️**2%** of feedback cited **Aid effectiveness** issues specifically concerns around the inclusivity and accessibility of Aid.

Organisations responsiveness and community reactions

In the reporting period, Loop tagged organisations in 20% of published feedback. ⬆️**14%** (6% in April) of those were **replied to** by organisations. Replies were from

Lifeline Gedo (LLG), Norwegian Refugee Council (NRC), Juba Foundation (JU), Global Initiative for Resilience and Development (GIRD), Arche Nova, and Save the Children.

Sensitive Reports

Loop handled ⬆️102 sensitive cases this month, reflecting reflecting a significant rise from 69 cases in April (+48%). This increase closely mirrors the overall increase in incoming feedback.

What type of sensitive reports were submitted?

⬇️**16%** (16 reports) were related to **protection concerns**, including Gender-Based Violence, Child Protection, General Protection, MHPSS, and HLP. This represents a decrease compared to April, when protection concerns accounted for 23%. Overall, protection-related reporting continues to show a persistent downward trend compared to February (35%).

Within this category, GBV was the most reported concern with 5 reports, followed by Child Protection and Housing, Land and Property (HLP) with 4 cases each. General Protection accounted for 2 cases, while Discrimination represented 1 case. No cases related to Landmines/UXO or MHPSS were reported this month.

Only 5 GBV reports were submitted this month, up from 3 in April. All cases were related to intimate partner violence. More than 20 cases were submitted per month earlier last year, before a gradual decline began around November and continued through December (3), January (4), February (4), March (6), April (3) and May (5) confirming a sustained low level of GBV reporting since the end of 2025.

⬇️ **3% of sensitive reports (3 reports) concerned fraud, corruption, or aid diversion** this month, representing a significant decrease compared to 17% (12 reports) in April. This decline coincided with a reduction in reporting from Lower Shabelle, which had been the primary source of fraud and corruption allegations in previous months. Notably, no such reports were received from Lower Shabelle this month.

Instead, the three reports originated from Kismayo (Lower Juba) and Bardheere (Gedo) and primarily concerned allegations of improper influence in registration processes. Similar to patterns observed previously, reports highlighted concerns that personal connections or clan affiliation may have influenced beneficiary selection, leading to the exclusion of vulnerable households from assistance.

⬆️**81% (83 reports) of feedback related to service-level concerns** this month. This comprised **47% (48 reports) classified as service-level complaints** and **34% (35 reports) categorised as non-sensitive requests for assistance**. Compared to April, when service-level concerns accounted for 61% of all feedback (33% service-level

complaints and 28% non-sensitive requests for assistance), this represents a notable increase in the overall proportion of service-level feedback.

Service-level complaints mainly reflected issues related to delays, non-payment, or post-registration processes. Many complainants reported having been registered, often through fingerprinting, photographs, or the issuance of beneficiary cards, but receiving no follow-up, updates, or clarity regarding their assistance status. A smaller number of complaints concerned inaccessible distribution points, exclusion from community targeting processes, or the absence of assistance programmes and services in their area. Half of all service-level complaints (50%, 24 out of 48) originated from Lower Juba, making it the primary reporting region for this category of feedback.

Most requests for assistance were submitted by individuals facing vulnerabilities or multiple vulnerabilities and primarily related to **cash assistance, food and nutrition support, health services, and education**.

↔️ **No reports** related to **Sexual Exploitation and Abuse (SEA) or other types of misconduct** were received in May, consistent with trends observed since Q1 2026.

Who is reporting sensitive reports?

⬆️ **89% (91 reports)** of sensitive feedback was **submitted by individuals on their own behalf**, while 11% (11 reports) was submitted on behalf of someone else. This represents a slight increase in self-reported cases compared to April (84%).

The current pattern shows that most third-party reports are submitted on behalf of children, primarily to seek support related to education, nutrition/food, or health needs, as well as on behalf of highly vulnerable adults requiring access to health services, particularly specialised care. A smaller number of reports were submitted by community members raising concerns affecting broader groups. Notably, two reports were submitted by community leaders, including one highlighting gaps in GBV services and seeking support for a GBV survivor, and another concerning the exclusion of persons with disabilities during a registration process. An additional report submitted by a community member raised concerns about service gaps affecting the wider community, particularly access to health services.

Gender

This month, ⬇️**56% (60 reports)** of sensitive feedback was submitted by **women and girls**, while ⬆️**44%** was submitted by **men and boys**. This reflects a continued gradual decrease in the proportion of sensitive feedback submitted by women and girls compared to earlier in the year, including 78% in January.

Overall, the gender distribution shows a similar pattern to April. Protection-related reports were predominantly submitted by women and girls (67%), while service-level complaints and fraud/aid diversion reports were more balanced, with 55% submitted by women and 45% by men and boys.

Women and girls and men and boys reported a diverse range of protection concerns, with child protection, GBV, general protection, and housing, land and property issues reported across both groups.

Age

In terms of age, sensitive reports submitted by **children and adolescents (under 18)** accounted for ↔️**10%** of all reports this month, remaining unchanged compared to April. While the overall number of reports from children remains low, their share of submissions has remained higher than the levels observed earlier in the year.

In May, 4% of reports were submitted by children aged 0–13, and 6% by adolescents aged 14–17. Of these reports, 60% were submitted by boys and 40% by girls. Most reports submitted by children and adolescents were related to Child Protection concerns and requests for assistance, particularly regarding access to health and education services.

Sensitive reports from **older individuals (aged 60+)** accounted for ⬇️**5%** of all reports this month, compared to 7% in April. While reporting by older individuals has declined since its peak in January (16%), it has remained relatively stable in recent months, fluctuating around 5–7% of all reports.

Of the reports submitted by older individuals this month, 80% were submitted by men. Their reports were diverse, mainly including requests for assistance, as well as, protection concerns and service-level complaints. 60% originated from Banadir, and at least two of these were from individuals affected by evictions, with ongoing impacts on their living conditions and needs, underscoring the effects of eviction on vulnerable older households in the region.

Adults aged 18 to 59 accounted for ⬆️**72%** of sensitive feedback this month, compared to 58% in April. Within this group, **younger adults (18–29)** represented ⬆️**32%** (20% in April), indicating an increase in reporting from younger adults, while **adults aged 30–59** accounted for ⬆️**39%** (38% in April) remaining stable over recent months.

Gender distribution was similar across both age groups. Within the 18–29 group, 60% of reports were submitted by women, while in the 30–59 group, 65% of reports were submitted by women.

Among women aged 18–29, the majority of reports were submitted by displaced individuals (80%), with several cases remaining unconfirmed. Most were either female-headed households or women caring for children, spouses, or other family members with disabilities. Reports were primarily related to service-level complaints regarding cash assistance registration and follow-up, as well as non-sensitive assistance requests, particularly for health, food, and basic household needs. Additional concerns included housing, land and property issues, GBV and protection-related health needs, reflecting a mix of urgent service access challenges and vulnerability-related needs within this group.

Due to ongoing challenges in reaching some individuals for follow-up, the **age** of authors remains **unknown for ⬇️14%** of reports this month.

Are members of linguistic and ethnic minority and marginalised communities submitting reports?

This month, ⬇️32% of sensitive reports (33 reports) were submitted by individuals from minority or marginalised communities, compared to 33% in the previous month, indicating a very slight decrease in representation. Among reports from minority and marginalised groups, 88% were submitted by internally displaced individuals and 61% were submitted by women.

Most individuals identified as belonging to minority groups, including Eyle, Somali Bantu, Shiidle, Rer Shabelle, Mushunguli, Baajuni, and Madhiban. Notably, **30% of reports from minority communities were submitted by individuals from the Mushunguli group**, all of which were reported in Kizigua. This reflects a gradual strengthening of Loop's partner-led community engagement efforts targeting Kizigua speakers, first observed since February. In addition, 24% of reports from minority communities were submitted by individuals from the Eyle community, largely concentrated in Lower Shabelle and Banadir.

This month, a large proportion of reports from minority and marginalised communities were related to service-level complaints, accounting for more than 60% of all reports received. Most concerned cash assistance programmes, with individuals primarily seeking follow-up on their registration status.

A smaller proportion of reports related to requests for assistance, primarily concerning access to health and education services. One report concerned barriers to education faced by seven children from a Kizigua-speaking family. It was reported that the children dropped out of school because lessons were delivered in languages they did not understand, limiting their access to education. The report also highlighted broader concerns that other Kizigua-speaking children in the community may face similar challenges.

Loop is currently implementing a project in Kismayo funded by Grand Challenges Canada (GCC) in partnership with Raagsan, MRG, and MCAN. Advocacy efforts under this project are informed by feedback collected through Loop. One emerging area of focus is further exploring language barriers faced by Kizigua speakers in accessing feedback and complaint mechanisms, as well as the potential impact of the limited presence of Kizigua-speaking staff on their ability to fully understand information, access services, and raise concerns effectively.

Are people living with disabilities submitting reports?

Reports submitted by **persons with disabilities** increased to ⬆️**10%** (10 reports) this month, compared to 6% in April. Half of these reports were submitted by individuals with visual impairments, while the other half were submitted by individuals with

physical disabilities. In addition, one report concerned a person with a speech impairment.

Additionally, a further **5%** of reports were submitted **on behalf of family members with disabilities**, including both children and adults, mainly related to self-care activities (washing, dressing, eating, and toileting) requesting support for their

Almost all reports submitted by persons with disabilities were service-level complaints, mainly involving requests for follow-up after registration. These included a complaint alleging that multiple families with persons with disabilities had been excluded from a registration process in one location.

While most reports submitted by persons with disabilities were service-level complaints, all reports submitted by individuals caring for persons with disabilities were requests for assistance, mainly concerning access to health care and specialised health-care services.

Referral education and psychosocial support for a child with a speech disability

A 35-year-old woman living in an IDP settlement in Kismayo contacted Loop seeking support for her daughter, who has a speech disability. She reported that several months earlier, an individual claiming to represent an organisation had registered her daughter for what was described as a future school for children with special needs. However, no further contact was made, and the family never received any support or information regarding the registration. The mother expressed concern that her daughter was unable to access education adapted to her needs and reported additional worries about the child's well-being, including difficulties sleeping at night and restlessness during the day. She contacted Loop to seek assistance in identifying appropriate educational opportunities and support services for her daughter.

Loop intervention: Loop initially referred the case to a service provider, but the referral did not result in any support for the family. Following continued follow-up, Loop identified and referred the case to another organisation that agreed to provide assistance. The organisation enrolled the child in ongoing psychosocial support, including weekly play therapy sessions, and supported the mother to enrol her daughter in a school in Kismayo where a trained special needs teacher is available. The organisation also coordinated with the school to ensure that appropriate learning and support materials would be provided to the child.

Outcome & Impact: As a result of the referral, the child gained access to both specialised educational support and psychosocial services. The case highlights the importance of sustained follow-up and alternative referral pathways in helping children with disabilities access appropriate services when initial support efforts are unsuccessful.

Which regions did sensitive reports come from?

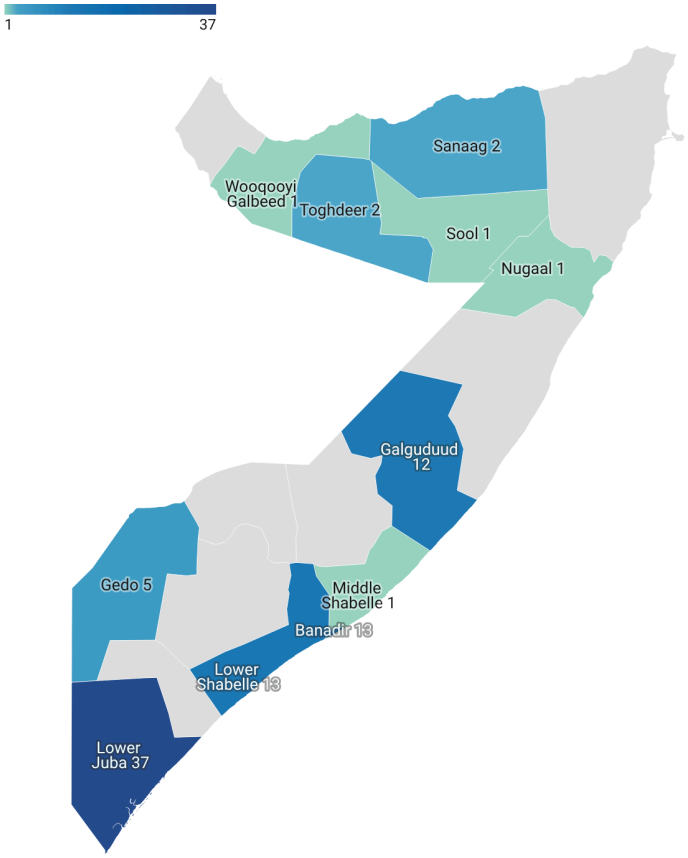
This month, sensitive reports were received from ⬇️**11 regions** across Somalia, showing a slight decrease in geographical coverage compared to last month (12).

Sensitive feedback remained concentrated geographically, with 75% of reports originating from four regions: Lower Juba, Lower Shabelle, Banadir, and Galgaduud. Lower Juba alone accounted for more than one-third of all reports, making it the single largest reporting region this month.

Lower Juba recorded the highest share of sensitive feedback in May, increasing to ⬆️36% of all reports compared to 22% in April. Within the region, all but one report originated from Kismayo, while a single case was reported from Dhobley in Afmadow district.

Reports from Kismayo were particularly concentrated in IDP sites located in North Kismayo, Galbeed, and Dalxiis areas, including Fanole, Dhumaase, Najax, Waamo, and Towfiq. Within this region, 62% of reports were submitted by individuals belonging to minority groups. Most reports related to service-level complaints (65%), while a further 24% were requests for assistance, primarily concerning access to health and education services. The remaining 11% concerned issues related to perceived unfairness in registration processes and other protection concerns.

Figure 2: Locations of Sensitive Feedback



Unspecified locations: 14

Created with Datawrapper

Lower Shabelle, Galgaduud and Banadir show notable shifts between April and May.

Lower Shabelle recorded a significant decrease, accounting for ⬇️13% of sensitive reports in May compared to 35% in April. This decline was primarily driven by a reduction in aid diversion reports, which had been concentrated in the region in previous months.

In contrast, **Galgaduud and Banadir** experienced significant increases in reporting. Galgaduud's share of sensitive feedback rose from 7% in April to ⬆️13% in May, while Banadir increased from 4% to ⬆️13% over the same period.

In Banadir, a significant proportion of reports were related to evictions or requests for in-kind and cash assistance, primarily driven by the consequences of displacement following eviction.

No sensitive reports were received from Awdal, Bakool, Mudug, Middle Juba, Nugaal, Bay, Bari and Hiran. Overall, some of the regions continue to show persistently low levels of sensitive feedback, having consistently recorded either no reports or very low numbers since 2025. The absence of reports from Bay and Hiraan is of particular note, given that these regions have historically generated some level of sensitive feedback.

What is the current status of the sensitive reports?

A total of 102 new cases were opened during May. Of these, **30 cases were closed within the same month**, while 72 cases remain open at the end of May and are under follow-up.

Additionally, **49 cases opened in previous reporting periods were closed in May**, bringing the total number of cases closed during the month to 79.

Of the total number of 79 cases closed in May:

⬇️**44%** were **successfully resolved**, with follow-up actions such as signposting (providing information on where and how to access relevant support) or referral to appropriate services, completed to the satisfaction of the author or based on agreed outcomes. This represents a decrease compared to April, when the closure rate stood at 52%, indicating a slight decline in the proportion of cases successfully closed this month.

The remaining ⬆️56% could not be successfully resolved due to a range of operational and contextual challenges. The most common constraint was the inability to establish contact with feedback authors, followed by insufficient information to facilitate referrals, including the absence of organisation names in service-level complaints. Additional challenges included cases where contacted individuals denied submitting feedback, lack of response from organisations, and, in more limited instances, authors declining referrals, unavailability of services in certain areas, or cases where Loop discontinued contact following risk assessments where continued engagement was deemed to pose a risk to the author.

How many referrals were made this month?

⬆️**35 referrals were referred this month**, including ⬆️19 referrals for assistance and ⬆️16 related to corruption, fraud, and service-level complaints.

This represents a slight increase compared to April, when 27 referrals were made, including 17 for assistance and 10 for corruption, fraud, and service-level complaints.

How responsive were organisations to referrals this month?

⬇️**71% of all referrals** submitted this month were acknowledged, a decrease from 81% last month, mainly due to a lower acknowledgement rate for service-level complaints. This includes ⬇️89% of assistance-related referrals and ⬇️50% of allegation-related referrals, representing a decrease compared to April (94% and 60%, respectively).

For both allegation and protection-related referrals, several reminders were often required to ensure that organisations confirm receipt and take timely action.

- **National NGOs: ⬆️8** referrals – **⬇️75% acknowledged (6/8)**
- **International NGOs**: **⬆️17** referrals – **⬇️88% acknowledged (15/17)**
- **International institutions/UN: ⬆️10** referrals - **↔️50% acknowledged (5/10)**
- **Government Entities:↔️ 0** referral were made this month

Despite the relatively good acknowledgement rate for the assistance-related referrals, updates on the outcomes of several cases are still pending, and a higher number of cases resulted in no support being provided or available.

Of the 19 assistance-related referrals made this month, **7 survivors/persons in need have already received services**, a further **2 are scheduled to receive assistance** and **3 referrals are pending updates** from organisations on the services provided and **2 are awaiting confirmation of eligibility**. **5 referrals resulted in no support being provided**, because the case required specialised services outside the organisation's scope of support, because the author had relocated to another area, or, in two cases, because no funding remained available to support the case.

Referral for access to medical care for a household with limited awareness of available services

An 18-year-old woman living in Kismayo contacted Loop seeking medical assistance for her seriously ill father. She explained that she and her 13-year-old brother are being raised by their father, who is 60 years old, following the death of their mother when they were young. Her father suffers from high blood pressure, which has resulted in partial paralysis of one leg and one arm, leaving him unable to walk and in need of urgent medical attention. The author explained that she had been unable to take him to a health facility due to financial constraints and lack of available resources. She also shared that she previously experienced a stomach condition for which she continues to experience occasional pain.

Loop intervention: Loop referred the case to a health service provider in Kismayo for medical assessment and support. The organisation accepted the referral and provided the requested medical services at a health facility, ensuring that the father and the author received the required care.

Outcome & Impact: Following the referral, the author confirmed that her father and herself received medical support and expressed strong satisfaction with both Loop's assistance and the services provided by the organisation. She shared: "I am really very impressed by the services received by the organisation and the way we have been treated and supported. Thank you." She also explained that she was not previously aware of available support pathways and appreciated having access to Loop's feedback mechanism. She stated that she would share Loop's contact number with others who may need assistance. The case highlights the role of referral pathways in connecting vulnerable households with essential health services and increasing awareness of available support mechanisms.