SAVING LIVES
CHANGING LIVES

Internal Audit of WFP Operations in Somalia

Office of the Inspector General

Internal Audit Report AR/26/04

WFP
World Food Programme

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I. Executive summary

WFP in Somalia

1. As part of its annual workplan, the Office of Internal Audit conducted an audit of WFP operations in Somalia. The audit focused on full coverage of risk management, targeting, identity management, cooperating partner management, supply chain - logistics, delivery of cash-based transfer, and monitoring. In addition, the audit partially covered process areas such as operational planning, delivery and reporting, accountability to affected populations, and external partnerships.

2. The audit period was from 1 January 2024 to 30 June 2025. In 2024 WFP assisted 5.5 million beneficiaries with direct operational expenses of USD 384 million. In 2025 it assisted 3.5 million beneficiaries with direct operational expenses of USD 266 million.

Audit conclusions and key results

3. Based on the results of the audit, the Office of Internal Audit reached an overall conclusion of **some improvement needed**. The assessed governance arrangements, risk management, and controls were generally established and functioning well but needed improvement to provide reasonable assurance that the objectives of the audited entity/area should be achieved. Issues identified by the audit were unlikely to significantly affect the achievement of the objectives of the audited entity/area. Management action is recommended to ensure that identified risks are adequately mitigated.

4. In response to organisational and financial challenges, WFP undertook a structural review in 2023, leading to the adoption of a "one integrated global headquarters" model in October 2024 (effective 1 May 2025), which aimed at enhancing support to country offices and streamlining services through global hubs. Following a pause in a donor's foreign development assistance and declining funding projections, WFP accelerated its cost-efficiency measures, and by April 2025, due to a projected 40 percent funding reduction, WFP announced plans to reduce its global workforce by up to 30 percent. The results of this audit should be read in the context of these organisational measures.

5. During the audit period, WFP Somalia operated under the 2022-2025 Country Strategic Plan. The plan concluded in February 2026, and approval of the new strategic plan was pending Executive Board approval at the time of the audit reporting. During this period, declining humanitarian funding and persistent humanitarian needs shaped operations. After an improvement in food security, with crisis-level needs falling from 6.5 million people in 2023 to 4.4 million in 2024 and 3.4 million in 2025, the situation deteriorated, raising an estimated 6.5 million people in Integrated Phased Classification Phase 3 or worse in early 2026. In response to declining funding, the country office ran three prioritisation exercises in 2025 to assist the most vulnerable, reduced transfer values, shortened assistance duration, and narrowed geographic coverage. In 2025, the country office also undertook an organisational realignment that led to staff cuts by 20 percent.

6. The country office implemented all actions from the previous internal audit and strengthened internal controls across many functions. Risk management practices were well established, supported by active escalation, updated risk registers, and alignment with the Global Assurance Framework. Identity management controls improved through full household biometric registration, real-time deduplications, and improved access controls in SCOPE. The country office led strengthening of beneficiary targeting in Somalia after the 2023 post-delivery aid diversion reports and advanced the shift from status-based to vulnerability-based targeting, a role widely recognised by stakeholders.

Programme monitoring consistently met corporate requirements, underpinned by an independent structure and an accessible community-feedback mechanism. Overall, the country office operated within an effective control environment, with maturing internal controls, governance, and risk management processes.

Actions agreed

7. The audit report contains the following two observations with high-priority actions that require urgent management attention.

8. Observation 2 - Operational delivery and reporting: The country office should establish a reliable basis for reporting actual assistance figures and strengthen delivery oversight, so that stock management, distribution performance, and operational adjustments are grounded in accurate, timely information. During the audit period, there was no single, reconciled source for the number of people assisted. Data were fragmented across multiple systems and teams, reconciliation practices were inconsistent, and outputs in the corporate platform, COMET, were unreliable. Additionally, the country office had limited visibility over distributions by cooperating partners due to inconsistent use of corporate tools and delayed operational processes.

9. Observation 3 - Targeting governance and implementation: The country office should formalize its targeting governance, accelerate cost-efficient vulnerability-based targeting scale-up, and strengthen monitoring so that, in an environment of reduced resources and significant prioritisation, targeting decisions are evidence-based. Despite the country office's commitment to transition to vulnerability-based targeting following the 2023 post-delivery aid diversion reports, traditional status-based targeting continued to dominate, accounting for 69 percent of prioritised districts during the audit period. The targeting governance framework was outdated, and informal, vulnerability-based targeting rollout was slow against donor expectations, and targeting monitoring was inadequate — with no analysis of inclusion or exclusion errors produced since 2023.

10. The audit also highlighted four observations with medium-priority actions, identifying opportunities to strengthen management oversight of area offices, improve the efficiency and cost-effectiveness of identity management and food quality processes, recalibrate cooperating-partner management to the reduced operational footprint, oversight of cooperating partners as third party monitoring of them ceases due to funding constraints, and enhance monitoring functions so that evidence from area offices systematically informs programme decisions.

11. Management has agreed to address the six reported observations and implement the agreed actions by their respective due dates.

Acknowledgements

12. The Office of Internal Audit would like to thank managers and staff for their assistance and cooperation.

II. Country context and audit approach

Somalia

13. Somalia is a low-income country with an estimated population of 19.3 million people.[1] Somalia faces complex challenges of protracted conflict, limited social services and escalating climate shocks. In 2025, six million people needed humanitarian assistance. Somalia continues to rank among the lowest in global human development indicators, placing 192 out of 193 in 2025.[2] According to Transparency International's Corruption Perceptions Index for 2024, Somalia was ranked 179 out of 180.[3]

14. Somalia faces chronic, compounding crises driven by conflict, climate change, and environmental shocks. Since 2010, the country has endured recurring cycles of severe drought, flooding, and locust invasion. Acute food insecurity and malnutrition have persisted at high levels. The 2021–2023 drought — the most severe on record — pushed Somalia to the brink of famine and drove the number of people in crisis and emergency levels -Integrated Phase Classification (IPC) Phases 3 and 4 -from 3.5 million in 2020 to a peak of 6.5 million in 2023.

15. Although conditions temporarily improved in 2024 and 2025, with food insecurity at crisis-level and above declining to 3.4 million people, the situation deteriorated again in early 2026. From February to March 2026, an estimated 6.5 million people were facing acute food insecurity (IPC Phase 3 or worse), including more than 2 million in IPC Phase 4 (Emergency).

WFP operations in Somalia

16. WFP operations in Somalia are guided by the country strategic plan (CSP) for the period 1 January 2022 to 31 December 2025 and its subsequent extension to July 2026. The CSP's initial budget of USD 1.9 billion was revised to USD 3.9 billion through four budget revisions over the plan period.

17. In 2023, the Somalia Eritrea Monitoring Group panel of experts identified characteristics of perceived post-delivery aid diversion (PDAD) and called on humanitarian system to move decisively from 'status-based targeting' towards 'needs-based targeting' and beneficiary selection. In response, WFP led the inter-agency PDAD priority action on beneficiary targeting and identification. WFP developed and rolled out a vulnerability-based targeting (VBT) system across several locations, reducing gatekeeper influence and improving resource efficiency. Additionally, the country office introduced full-household biometric registrations across all area offices to improve accountability and optimised resource allocation.

18. During 2024 and 2025, WFP Somalia's operations spanned six programmatic areas: crisis food and nutrition assistance; shock-responsive social protection through cash-based transfers; home-grown school feeding sourced from local retailers and farmer cooperatives; integrated nutrition support covering prevention and treatment of malnutrition; early recovery and livelihoods support through food assistance for assets and training; and climate-smart food systems and anticipatory action. Figure 1 overleaf presents key operational figures for 2024 and 2025.

[1] Humanitarian Response Plan 2025

[2] Country Insights | Human Development Reports

[3] Somalia - Transparency.org

Table 1: Country operations key figures

	2024	2025	Total	Percent of total
Expenditure (in USD millions)				
Cash-based transfer (including commodity voucher)	214	142.4	356.4	55%
Food	95.3	60.4	155.7	24%
Capacity strengthening	12.4	19.9	32.3	5%
Service delivery	22.5	17.1	39.6	6%
Implementation	39.7	26.7	66.4	10%
	383.9	**266.5**	**650.4**	
Number of people assisted (in millions)	5.5	3.5		
Food distributed (quantity in metric tons)	40,000	41,000		

19. In 2024, WFP operations were divided into the following CSP strategic outcomes:

(i) Under CSP strategic outcome 1 (crisis response), WFP secured 92 percent of required funding and provided humanitarian food and nutrition assistance to 3.3 million crisis-affected people through USD 162 million in cash-based transfers (CBT) and 23,125 metric tons of in-kind food. With 79 percent of assisted people receiving CBT, WFP Somalia operated the largest CBT programme in the region.

(ii) Under Strategic Outcome 2 (resilience building), WFP strengthened human capital and resilience through targeted social protection, education, nutrition, and economic inclusion. In partnership with the Government of Somalia and the World Bank, WFP delivered social assistance entitlements to 1.2 million people under the Safety Net for Human Capital Project and provided nutritious school meals to 87,000 children.

(iii) Under Strategic Outcome 3 (resilience building), WFP reached 189,000 people through climate-smart, inclusive food systems programming, strengthening community resilience to shocks and addressing structural drivers of food insecurity.

(iv) Under Strategic Outcome 4 (resilience building), WFP delivered capacity-strengthening support to national institutions and government agencies.

(v) Under Strategic Outcome 5 (crisis response), WFP provided logistics and enabling services to the humanitarian sector, including management of United Nations Humanitarian Air Services, the Logistics Cluster, and the Emergency Telecommunications Cluster.

20. Funding shortfalls in 2024 and 2025 compelled the country office to significantly scale back humanitarian food assistance and revise its budget requirements to reflect prioritised populations in greatest need, allowing available resources to focus on critical, life-saving interventions.[4]

21. WFP Somalia Country Office operated with 488 staff members as of October 2025, including 73 international personnel. With its country office in Mogadishu, WFP Somalia maintained an extended footprint across the country through four area offices—in Mogadishu, Dollow, Galkayo, Garowe, and Hargeisa—and four field offices in Baidoa, Berbera, Beledweyne, and Kismayo.

[4] Annual Country Report 2024

WFP's organisational redesign and funding context

22. The results of this audit, and specifically the agreed action plans, should be read in the context of the organisational changes ongoing in WFP at the time of audit reporting.

23. In the second half of 2023, WFP conducted a review of its organisational structure. Following this exercise, in October 2024, WFP announced the adoption of a "one integrated Global Headquarters" model, which came into force on 1 May 2025, aiming to ensure better support to country offices, through consolidating the delivery of key enabling services via a network of global hubs.

24. In February 2025, and in response to the 90-day pause in a donor's foreign development assistance, WFP implemented cost-efficiency measures in view of projected donor forecasting and the overall widening resource gap.

25. In April 2025, WFP issued a Management Accountability Framework, aimed at enhancing accountability, authority, performance, and results across country offices and the global headquarters. The framework outlines functional roles and responsibilities at various levels including country directors, regional directors, and global functions. It establishes a support structure with a defined chain of command and explicit accountability, aiming at ensuring flexibility and operational efficiency.

26. In January 2026, WFP projected funding of USD 5.9 billion, 8 percent lower than the USD 6.5 billion received in 2025 and 40 percent lower than in 2024. Since 2025, WFP has been implementing measures to reduce its global workforce by 25–30 percent, potentially affecting up to 6,000 roles across all geographies, divisions, and grades. The results of this audit, including the agreed actions, should therefore be read in the context of these ongoing organisational changes.

27. Concurrently, WFP examined the role and configuration of its six regional bureaus, as part of the overall review of its organisational structure and decided to consolidate two of them: the one for Southern Africa, located in Johannesburg and that for Eastern Africa, to form the Eastern and Southern Africa Regional Office (ESARO), located in Nairobi, Kenya, operational since 1 May 2025.

Objective, scope and methodology of the audit

28. The audit's objective is to provide independent and objective assurance on the effectiveness of internal controls, governance, and risk management processes supporting WFP operations in Somalia. This audit contributes to the broader objective of issuing an annual assurance statement to the Executive Director regarding the adequacy and effectiveness of governance, risk management, and internal control systems across WFP.

29. The audit focused on Activity 1, 2, and 3 of the CSP representing 90 percent of the total direct operational costs during the audit period. Under Activity 1,2 and 3 of the CSP, the country office assisted approximately 5.2 million beneficiaries in 2024, representing 94 percent of the total beneficiaries assisted. Table 2 below summarizes the direct operational costs and beneficiaries assisted.

Table 2 – Key CSP activities (expenditure and beneficiaries assisted)

CSP activities	Expenditure (*USD millions*)			Number of beneficiaries assisted (millions)	
	2024	Jan-June 2025	Percent of total	2024	Percent of total
Activity 1: Crisis response - food and nutritional assistance to crisis-affected people.	307	84	78%	3.8	69%
Activity 2: Food and/or cash-based assistance to food-insecure people through reliable safety nets, including home grown school feeding.	33	15	10%	1.4	25%
Activity 3 Nutrition support and malnutrition prevention and treatment package to targeted vulnerable people.	6	3	2%		
Sub-total: activities in the audit scope	**346**	**102**	**90%**	5.2	**94%**
Other activities not in the audit's scope	38	15	10%	0.3	6%
Total	**384**	**117**		**5.5**	

30. In defining the audit scope, the Office of Internal Audit considered coverage by the following second and third-line oversight providers:

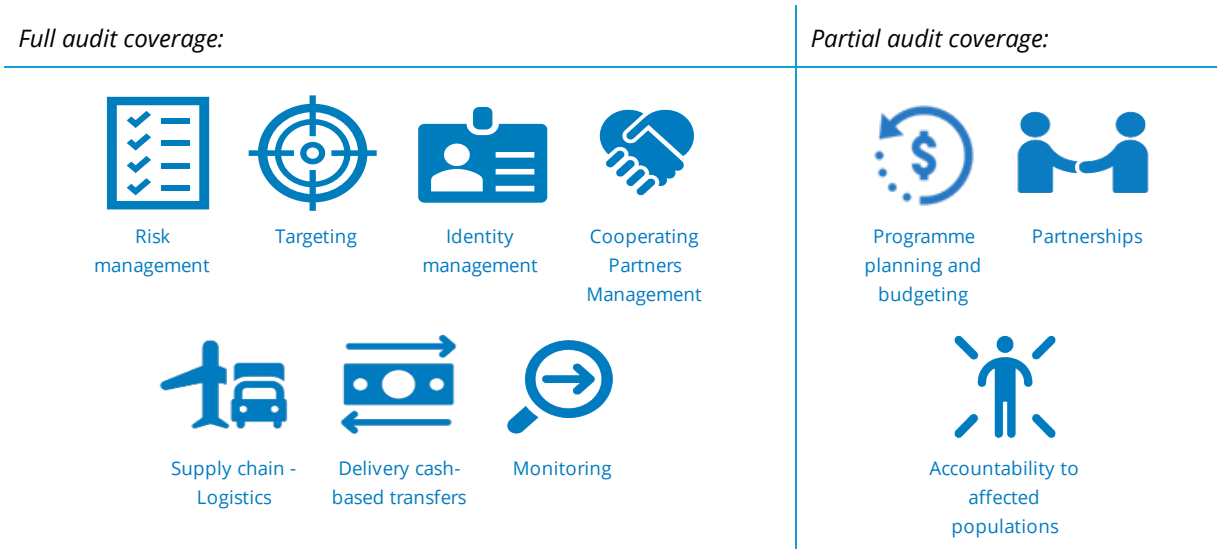
(i) Oversight and support missions conducted by the Eastern and Southern Africa Regional Office (ESARO) in 2024 and 2025 covering identity management and delivery assurance, and monitoring.

(ii) The Evaluation report of Somalia Country Strategic Plan 2022-2025 conducted in 2025.[5]

(iii) Oversight missions undertaken by the country office's risk management unit.

31. Figure 1 shows the process areas in the audit scope, as identified in the audit engagement plan.

Figure 1: Process areas in the audit scope



[5] Evaluation report of WFP Somalia CSP 2022-2025

32. The audit mission was conducted from 9 to 27 November 2025 in the country office in Mogadishu, with field visits to Baidoa, Mogadishu, and Galkayo. Due to severe funding constraints, the country office significantly reduced its CBT activities from November 2025 and implemented three rounds of prioritization across its operations. As a result, the audit team's ability to visit and observe active activities was substantially limited.

33. The audit assessed country office operations against established benchmarks to determine compliance, efficiency and effectiveness with the following criteria:

- WFP corporate strategies, policies, procedures and guidelines, and local standard operating procedures and guidelines, as appropriate, covering the processes in the audit scope.
- Applicable international standards and frameworks.
- Memorandums of understanding and other applicable operational agreements with Government entities and other partners in support of the interim country strategic plan.
- Standards and best practices for humanitarian operations, including benchmarks set by United Nations system-wide coordination bodies or peer organisations.

34. The audit used a comprehensive methodology that included: interviews with key WFP personnel and external stakeholders; reviewing relevant documentation; walkthroughs; process mapping; performing data analysis; field visits; transaction testing; root cause analysis; and verification of compliance with applicable policies and procedures. The draft report was shared on 26 March 2026 and final comments received on 13 April 2026.

35. The audit was conducted in accordance with the Global Internal Audit Standards issued by the Institute of Internal Auditors, ensuring consistency, quality and adherence to internationally recognised professional practices.

III. Results of the audit

Audit work and conclusions

36. Six observations resulted from the audit, relating to governance and risk management; operational planning, delivery and reporting; beneficiary targeting; identity management and transfer mechanisms; cooperating partner management; and Monitoring. Other audit issues, assessed as low priority, were discussed directly with the country office and are not reflected in the report.

37. The last internal audit of WFP operations in Somalia was conducted in 2023, at a time of heightened donor concern regarding post-delivery aid diversion and increased calls for stronger assurance and control measures across key humanitarian processes in Somalia.

38. Since the previous audit, the country office has taken significant steps to strengthen its assurance and control environment. The country office successfully implemented all agreed actions arising from the prior audit report. Key improvements included:

(i) Received targeted support from several global headquarters divisions, including in-country missions focused on improving controls and analytics around identity management and cash-based transfer delivery.

(ii) Led the inter-agency working group on targeting and beneficiary identification, developing and rolling out a VBT system to replace status-based targeting to reduce the risk of aid diversion and enhance targeting and prioritisation through evidence-based vulnerability mapping across large population groups.

Governance, risk management, and management oversight

39. Somalia country office had strong risk management structure and processes. The risk management unit was commensurate with the complexity of operations reporting to the deputy country director, enabling services. The country office implemented risk management practices including risk monitoring and advisory, fraud prevention and incident management, management accountability and assurance, oversight coordination, and risk communication.

40. Positive risk management practices included effective risk escalation to leadership through country leadership teams meetings, maintenance of updated risk registers across area and field offices, interagency coordination on risk management, and a structured incident management, and donor reporting mechanism. These processes were complemented by regional bureau oversight missions in high-risk areas such as food safety and quality, Identity Management (IDM), with assessments on emerging risks such as organisational alignment, occupational safety, health and environment, and a targeted fraud risk assessments for mobile money. The country office also assessed its risk maturity level against an interagency risk maturity model, achieving scores predominantly within the “leading” category and identifying no significant critical gaps.

41. The country office was identified as one of 31 high-risk countries for Global Assurance Project (GAP) implementation in 2023 and has since been implementing GAP-related measures to strengthen internal controls across key process areas.

42. The audit assessed the existence and effectiveness of risk governance structures; risk identification, assessment, implementation and monitoring of mitigation measures; and risk reporting to management and key stakeholders.

Observation 1. Oversight role of country office functions

43. During the current CSP period, the country office pursued a decentralization agenda, expanding the authority and operational responsibilities of area and sub-offices. Roles and responsibilities across country and area office functions were outlined in various guidelines. However, the oversight architecture did not keep pace with decentralization.

44. While operating procedures envisaged an active oversight role for country office functional units over area offices, this was not consistently implemented. For example: Area offices encountered operational issues they were not always equipped to resolve, and, in several instances, they did not seek guidance from the country office. Without an effective oversight mechanism, the country office was unaware of these issues and therefore unable to intervene. For instance, beneficiaries were in possession of superseded SCOPE[6] cards that area offices had not collected, contrary to country office requirements; and area offices were not utilising the Partner Connect functionality to track real-time distribution progress, an issue not known to the relevant country office functional units.

45. These findings illustrate the need for enhanced oversight and support mechanisms from country office functions to ensure that operational delays and control weaknesses are identified, escalated, and resolved in a timely manner.

Underlying cause(s):

Process and planning,	Inadequate process for monitoring, implementation, accountability *(decentralized structure with limited oversight)*
Oversight and performance	Insufficient oversight from local management

Agreed Actions [Medium priority]

The Country Office Director will formalise oversight and support roles for country office functional units in relation to area offices. This will require functional units to outline the required information flow from area offices, roles and responsibilities, review operational outputs, and undertake regular field visits with adequate follow-up mechanism to ensure control weaknesses and operational issues are identified and resolved in a timely manner.

Timeline for implementations

31 December 2026

[6] WFP beneficiary information and transfer management platform.

Operational planning, delivery and reporting

46. The country office had effective operational planning process. Plans were based on needs assessments, adjusted as conditions changed, and developed with inputs from all relevant units. Coordination and target setting worked well, and plans were properly approved and shared.

47. The audit examined how the country office plans operations, delivers against targets, and reports operational data.

Observation 2. Operational delivery and reporting

Reporting actual numbers of assistance

48. The country office did not have a single data source for actual number of people assisted. Data were fragmented across multiple platforms (SCOPE, COMET,[7] Partner Connect,[8] spreadsheets and manual CP distribution reports) and handled by multiple teams.

(i) SCOPE captured planned distribution numbers for in-kind and CBT, and redemption numbers for in-kind distributions using SCOPE cards.

(ii) Partner Connect recorded actual in-kind distribution numbers.

(iii) FSP reports captured actual cash-transfer redemption figures.

(iv) COMET was intended to consolidate data from all these sources.

49. Different teams at country office oversaw different parts of this process. Within Programme, the IDM/CBT team managed SCOPE and FSP reports, whilst the CP Management team handled Partner Connect and COMET. The country office did not consistently reconcile these data sources against COMET to ensure accuracy. Teams extracted data at different times, applied different logic, and each report had different numbers, as it would have either redemption or distribution numbers.

50. Although COMET was treated as the standard reference point, its figures differed significantly from other systems. In determining the actual number of people assisted, the audit noted notable inconsistencies between COMET figures and multiple underlying sources. This exposes the country office to risk of inaccurate reporting, affecting operational decision-making and increasing the likelihood of errors in donor reporting.

Tracking distributions and stock with cooperating partners

51. Operational inefficiencies at the area office level contributed to underachievement of planned operational targets. For instance:

(i) Area offices created Food Release Notes (FRNs) with limited involvement from the country office. FRNs were issued late and did not consider the stock already held by cooperating partners before requesting additional dispatches. As a result, distributions were lower than planned and cooperating partners held excess closing stock every cycle.

[7] COMET (country office tool for managing (programme operations) effectively) is WFP's corporate tool to design, implement and monitor programmes and performance management.

[8] Partner Connect is a corporate digital platform to strengthen collaboration between WFP and cooperating partners by streamlining core partnership processes.

(ii) CPs carried out distributions, but neither the country office, nor the area offices, had mechanisms to track CP distribution progress in real time, or on a regular (daily or weekly) basis. Area offices relied on CP reports and invoices to understand progress against targets. This caused delays in identifying underperformance and limited timely follow-up to identify and address underlying issues. Although Partner Connect had been rolled out in Somalia and offered real-time visibility of distribution levels, area offices were not using this functionality to monitor CP distributions.

Underlying cause(s):

Organisational direction, structure and authority	Unclear direction for planning, delivery, or reporting
Process and planning	Inadequate process Unclear roles and responsibilities Insufficient coordination
Tools, systems and digitisation	Absence of tools and systems (*fragmented corporate reporting /data management system and lack of integration*) Inappropriate implementation or integration of tools and systems

Agreed Actions [High priority]

The Country Office Director will:

(i) Establish standardised monthly reconciliation process that consolidates actual number of people assisted in each cycle across corporate systems, financial service provider reports, and cooperating partner distribution reports using a common template.

(ii) Formalize workflow for food release note generation, defining responsibilities, required checks, and timeframes for the area offices and country office units. The process will ensure food release notes are issued on time and reflect cooperating partner stock on hand and planned distribution targets.

(iii) Implement the use of Partner Connect across all area offices for recording and monitoring cooperating partner distribution progress.

Timeline for implementation

31 December 2026

Beneficiary targeting

52. In 2024, the country office assisted 5.5 million beneficiaries, including internally displaced persons (IDPs) and residents. For IDPs, it obtained beneficiary lists from the International Organisation for Migration (IOM). WFP initially prioritised 69 districts in the first quarter, reduced to 62 districts in the second quarter and further reprioritised to 42 districts in the remainder of the year, in response to funding constraints for its crisis response intervention.

53. During the audit period the country office developed and started to roll out VBT. WFP efforts were recognised by stakeholders interviewed for the audit for its leadership of the inter-agency targeting workstream, completion of the Humanitarian Country Team food assistance policy paper linked to PDAD, and its instrumental role in driving harmonised geographical targeting among humanitarian actors. The country office also actively contributed to the inter-agency Reset Reform Task Team, resulting in notable achievements such as roll out of the unified Single Registration Form (SRF) and integration of SRF data points into VBT household surveys.

54. The Vulnerability, Assessment and Monitoring (VAM) unit ran an effective process of geographic targeting and consolidated national level assessments, IPC analysis, and developed data modelling and analytics. Household targeting was decentralized to area and field offices where household data was collected by CPs for community-based targeting, with multiple pathways of CPs and WFP enumerators conducting the VBT data collection processes.

55. The audit reviewed targeting governance, targeting assessment and implementation, beneficiary data collection and management processes, and targeting monitoring.

Observation 3. Targeting governance and implementation

56. The country office did not have an updated governance framework to guide and oversee its targeting function throughout the audit period. The Targeting Working Group operated informally, with its terms of reference pending approval at the time of audit execution. Although a targeting strategy was in place, it had not been updated to reflect significant developments, including the evolution of VBT, or the introduction of categorical approaches for new population influxes.

Community-based targeting

57. Despite the country office's plans, following the 2023 PDAD report, to transition towards VBT, traditional status-based targeting continued to dominate operations during the audit period. The traditional targeting approach was used in 69 percent of prioritised districts (29 of 42). The enhanced community-based targeting (CBT 2.0), introduced in 2024, brought more formalised community structures through community task committees and structured training and sensitisation. However, these approaches remained susceptible to gatekeeper influence and to inclusion and exclusion errors, limiting the reliability of targeting outcomes.

58. Funding constraints in 2025 added further pressure. Three prioritisation rounds were conducted, resulting in a 60 percent caseload reduction compared to 2023, with geographic priorities aligned to IPC analysis across the 42 prioritised districts. Household-level prioritisation continued to rely on community structures in the absence of objective vulnerability data, exposing the process to bias and limiting assurance over targeting quality. Inclusion errors were not systematically tracked, which constrained the country office's ability to assess the adequacy of its targeting criteria and ensure that assistance reached the most vulnerable.

Vulnerability-based targeting

59. The country office rolled out VBT as a pilot in early 2024. Despite a two-year implementation window, VBT was functioning in only 40 percent of area offices and 31 percent of prioritised districts at the time of audit. The pace of implementation did not align with the strong donor preference for VBT to be adopted as the primary targeting methodology. By the time of the audit

fieldwork, 174,000 households were surveyed as part of the VBT process, with 88,000 households successfully cleared for registration.

60. The fragile security situation in Somalia, particularly in hard-to-reach and insecure areas, constrained the expansion of VBT, as the VBT scorecard required physical access for household-level data collection. The country office maintained that it applied the most feasible targeting method based on prevailing security and access conditions.

61. The expansion was also constrained by operational inconsistencies. Household data were collected through multiple pathways, either by CPs or independently recruited enumerators, without any comparative assessment of cost efficiency, agility, or scalability. This limited the country office's ability to optimise resources and design an evidence-based model for wider rollout.

62. The country office used VBT identifiers across systems providing linkages between MODA (used for collection of VBT data) and SCOPE (used for registration of selected beneficiary) through QR and hash codes to identify households targeted through the VBT approach during registration. As the relevant SCOPE data field was not mandatory, its uptake was inconsistent. Consequently, only 10,000 households could be reliably matched in SCOPE as of June 2025, improving to 78,000 during audit fieldwork. A gap of 10,000 remained against the 88,000 households cleared for registration.

Targeting monitoring

63. The monitoring of targeting activities was inconsistent. Process monitoring and targeting verification documentation were either unavailable or inconsistently maintained across area offices. No documented analysis of inclusion or exclusion errors was available for the audit period. The last such report had been compiled in 2023.

64. The targeting appeals process was conducted through the community feedback mechanism, with data analysed and acted upon at area office level. As the monitoring function was decentralised, the country office did not consolidate and report on targeting monitoring from area offices, which reduced the overall effectiveness of monitoring, learning, and utilising targeting information for adaptive decision-making.

Underlying cause(s):

Resources – Third parties:	Insufficient third-party capacity (NGO, government)
Process and planning	Inadequate process Insufficient planning Inadequate risk management
External factors - beyond the control of WFP	Conflict, security & access Funding context and shortfalls

Agreed Actions [High priority]

The Country Office Director will:

(i) Finalise and approve the targeting working group terms of reference and update targeting strategy and operating procedures to reflect current methodologies.

(ii) Complete a cost efficiency analysis of existing data collection approaches for vulnerability-based targeting to determine the preferred expansion model going ahead, expand vulnerability-based coverage across prioritized districts, and track progress with regular reporting to senior management.

(iii) Establish targeting monitoring process for all targeting approaches applied in Somalia, including documentation of inclusion and exclusion errors and evaluating targeting outcomes through a consolidated reporting mechanism.

(iv) In collaboration with relevant global headquarters division, explore the possibility of integrating a mandatory vulnerability-based targeting identifier field in SCOPE to ensure reliable system integration from data collection tools to SCOPE.

Timeline for implementation

30 September 2026

Identity management and transfer mechanisms

Identity management

65. Since the 2023 internal audit, the country office has taken progressive steps to enhance beneficiary identity management, aiming to improve data integrity and minimise duplication.

66. In late 2024, the country office introduced full household biometric registration, requiring fingerprints and photos for all the household members aged five and above. During the audit period, WFP's cooperating partners used Real-Time Biometric Identification systems to register beneficiaries, verifying identities on the spot and preventing duplicate entries. The country office also conducted monthly adjudication exercises to detect and address duplicate records within SCOPE. In 2025, the country office restricted the cooperating partners and unauthorised staff from being able to change beneficiary data in SCOPE.

67. These controls were effective and led to a significant reduction of the duplication rate from 68 percent in 2019 and 35 percent in 2022, to about 3 percent, as of November 2025.

Cash-based transfer

68. During the audit period, the country office implemented CBT through two transfer mechanisms. It transferred USD 175 million using mobile money and USD 88 million using electronic vouchers. Mobile money provides direct transfers to beneficiaries' mobile phone accounts via WFP-contracted mobile money operators, whilst WFP electronically delivered vouchers to beneficiaries using WFP's payment instrument (SCOPE card) allowing redemption of commodities at WFP-contracted retailers.

69. Beneficiaries preferred mobile money. According to 2025 post-distribution monitoring, 71 percent of beneficiaries prefer cash or mobile money transfers to vouchers and in-kind assistance. The country office prioritised mobile money mechanism considering beneficiaries preference and to reduce the risks associated with voucher mechanism. The country office significantly streamlined its retailer network, reducing the number from about 1,700 to 465, with further reductions anticipated. In June 2025, the country office launched a periodic verification of the active mobile money recipient to provide assurance that assistance reaches the right beneficiaries. The audit reviewed how the country office ensured beneficiary data integrity and accountability, focusing on the design and operation of controls that safeguard unique registration and ensure that cash and voucher assistance is accurately delivered and settled.

Supply chain - logistics

70. In 2024, and 2025 the country office moved and distributed 40,000 mt of food, including nutrition and commodities annually. ESARO conducted an oversight mission focused on Food Safety and Quality (FSQ) in October 2025, and recommended augmenting FSQ capacity in the country office, improving downstream food quality management, and food incident management by strengthening governance, and consistent application of corporate FSQ guidelines.

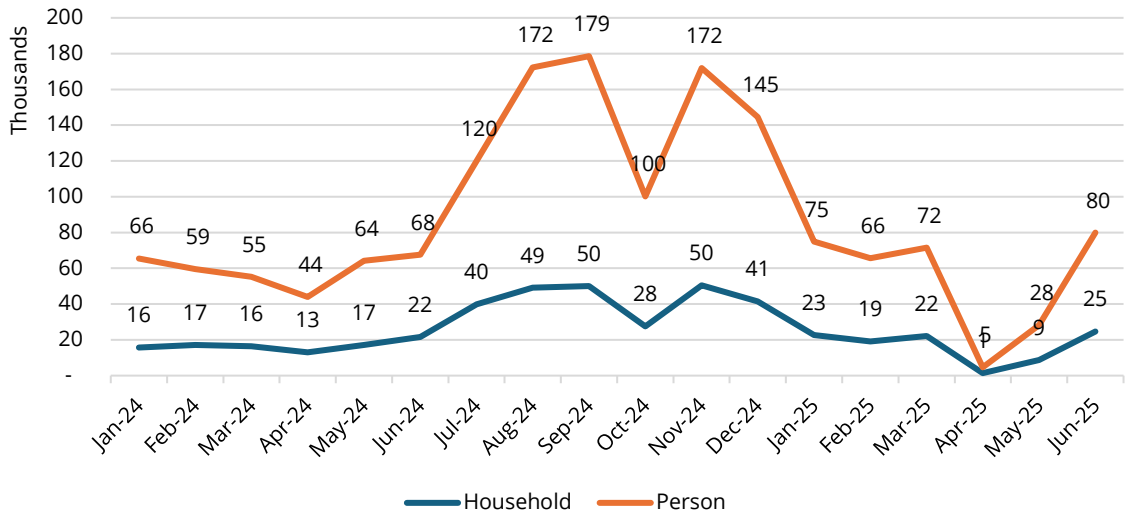
71. The audit reviewed warehouse management, commodity tracking, and management of food safety and quality.

Observation 4. Efficiency gains in identity management and food transfer

Continuous beneficiary registration

72. The country office maintained a continuous registration modality throughout the audit period, with approximately 1.5 million people (458,000 households) registered during the audit period at an average rate of 87,000 per month. Monthly trend for registrations is presented in Figure 2.

Figure 2: Trend of number of beneficiaries registered



73. The associated operational costs were estimated to be USD 500,000 per year for mobile point-of-sale devices, SCOPE cards, programme implementation tools, and deduplication. This estimate did not include the SCOPE licensing fee, staff cost, and cooperating partner costs, indicating that the true cost of continuous registration would be considerably higher.

74. WFP Somalia already had approximately 7.3 million active records of registered people in SCOPE. The country office maintained that continuous registration is necessitated either by beneficiary rotation, population displacement, or other operational factors.

75. The country office had not assessed whether continuous registration remained the most cost-effective and operationally sustainable approach relative to alternatives, such as periodic or event-triggered registration. The sustained high registration volume placed significant strain on verification processes and increased costs for registration and deduplication.

Periodic verification

76. The country office started a periodic verification of mobile money beneficiaries in June 2025. An October 2025 verification exercise identified approximately 2,000 households that did not show up for verification, corresponding to an estimated USD 1 million in assistance provided to these households between 2024 and the second quarter of 2025. Although non-attendance does not necessarily mean these beneficiaries no longer exist, it increases the risk that assistance flows to beneficiaries whose existence and redemption of assistance could no longer be verified.

Scope-card management

77. From January 2024 to November 2025, the country office printed about 510,000 SCOPE cards to use as payment instruments. An estimated 95,000 cards were printed but not used annually, at an estimated cost of USD 35,000 per year. Reducing the proportion of printed-but-not-used cards to between 5 and 10 percent of total cards printed would generate annual savings of between USD 68,000 and USD 80,000.

In-kind assistance: Food safety and quality

78. In 2024 and 2025, recurring food-infestation incidents required extensive fumigation across multiple warehouse locations (averaging 10–15 days). These disruptions delayed dispatches to CPs and reduced overall distribution efficiency and beneficiary reach. A total of 65,986 metric tons of food (22,733 mt in 2024 and 43,253 mt in 2025) underwent fumigation at port or area-office locations, at an estimated cost of USD 245,000. The volume requiring fumigation was substantial, relative to the 40,737 mt of food distributed in 2025.[9] The infestations appeared to originate upstream, at port or warehouse level, as WFP Somalia, in several cases, received commodities already infested. At the country-office level, there was no dedicated FSQ capacity to manage incidents, liaise with global headquarters, or oversee vendors responsible for fumigation and preventive controls.

Underlying cause(s):

Process and planning	Inadequate process Inadequate risk management
Resources - funds	Insufficient financial / cost management
Resources – People	Insufficient staffing levels

[9] In some cases, the same commodity required multiple fumigation cycles, partially inflating the comparative volume.

Agreed Actions [Medium priority]

1. The Country Office Director will:

   (i) Assess and document the operational rationale for continuous registration, and adopt a cost-effective and sustainable registration and verification model given current funding levels; and

   (ii) implement measures to reduce the volume of printed-but-unused SCOPE cards to an acceptable threshold.

2. The Country Office Director will secure technical expertise to oversee food quality and safety risks resulting from both upstream and in-country sources across all delivery modalities (In-kind, cash-based transfers and food systems), address capacity gaps, reduce infestation risks and related costs, and strengthen food safety and quality governance and compliance.

Timeline for implementation

1. 31 December 2026

2. 31 December 2026

Cooperating partner management

79. WFP Somalia implemented its programmes through CPs. In 2024, the country office contracted 85 CPs — 54 international and 31 local non-governmental organisations — under field-level agreements (FLAs) valued at USD 28 million. In 2025, the country office consolidated its FLA approach, bringing relief and nutrition activities managed by a single CP within one geographic location under a single agreement. This change reduced number of FLAs, streamlined management and oversight and strengthened cost control. Under the revised approach, 31 CPs were contracted — 17 international and 14 local — under FLAs valued at USD 21 million.

80. The country office demonstrated strong practice across several dimensions of CP management. It fully utilised the United Nations Partner Portal for standard due diligence and supplemented this with inter-agency risk management information for extended checks. It also successfully rolled out and operationalised Partner Connect, the corporate tool for CP reporting and FLA management, during the audit period.

81. WFP Somalia had a robust CP spot check mechanism. In 2024 the country office continued to use an externally contracted firm to conduct CP spot-checks. In both 2023 and 2024, spot checks covered more than 40 percent of contracted CPs. Findings from these spot checks informed targeted improvement plans and tailored capacity building packages developed jointly with the relevant partners.

82. The audit reviewed the full cycle of CP management — from partner selection and capacity assessment through to FLA management, reporting, invoicing, spot-checks, and performance evaluation.

Observation 5. Cooperating partner management

Cooperating partner cost

83. As shown in Table 3, the country office spent an average of USD 35 million annually on CPs between 2023 and 2025. Over the same period, the number of assisted beneficiaries and the value of cash transfers declined by more than 60 percent, while CP costs fell by only 14 percent. CP costs have, therefore, not been reduced in proportion to the overall contraction of the programme, highlighting opportunities for greater efficiency as the portfolio continues to reduce in size.

Table 3: Trends in CP expenditure and WFP operational scale (2023–2025)

Category	2023 (A)	2024 (B)	2025 (C) (full year)	Variance (C over A)
CP expenditure (USD in millions)	37.2	35.9	31.9	-14%
WFP's operational scale:				
CBT value (cash and vouchers) - (USD in millions)	458.6	196.1	124.6	-73%
Beneficiaries assisted - millions	10.6	5.5	3.5	-67%
Food distributed (mt)	77,000	40,000	41,000	-47%

84. The FLA budget methodology introduced in April 2024, had structural weakness to the detriment of CPs. To incentivise CPs to meet distribution targets, the country office tied CP budgets entirely to the volume of food distributed (variable cost). Fixed costs, such as staff salaries not directly tied to food distribution, were classified as variable cost within these budgets, creating an inherent inconsistency in cost categorisation.

85. When CPs fell short of their distribution targets, often for reasons outside their control, such as late food deliveries, equipment failures, and registration delays attributable to WFP, their budgets did not cover actual costs incurred. Each shortfall then required a separate exceptional approval, which required additional review layers, and delayed financial processing. Invoice approvals were delayed by up to three months in some instances, creating liquidity pressures that fell disproportionately on local partners with limited financial reserves.

Cooperating partner spot-checks

86. In 2025, the country office did not conduct any spot checks on CPs due to funding constraints that prevented the engagement of external firms, a mechanism used successfully in previous years. Spot checks are a core component of WFP's complementary assurance framework, providing independent verification of CP performance, compliance, and risk management. Their absence created a gap in the country office's assurance over its cooperating partners.

87. The country office intended to rely on monitoring as a mitigating measure. However, at the time of audit, these alternative oversight mechanisms had not been systematically embedded into CP oversight processes, and no formal framework had been established to ensure that assurance levels were maintained in the absence of external spot checks.

88. Given that funding constraints are likely to persist, the country office needs to establish a clear, structured, and sustainable alternative assurance model — one that does not depend on external firms but delivers equivalent oversight rigor over CP performance and compliance.

Underlying cause(s):

Process and planning	Inadequate process Inadequate risk management
Oversight and performance	Insufficient oversight over third parties
Resources – Funds	Insufficient financial / cost management
External factors - beyond the control of WFP	Funding context and shortfalls

Agreed Actions [Medium priority]

The Country Office Director will:

(i) Review the cooperating-partner cost structure against the current and projected operational portfolio and funding levels to identify opportunities for efficiency gains and cost reductions commensurate with the scale of operations.

(ii) Revise the field-level agreement budget methodology to align with corporate guidelines, ensuring that fixed and variable costs are appropriately categorized and that exceptional approvals are minimised.

(iii) Develop and operationalise cooperating partner oversight framework by establishing a structured, risk-based approach that sustains minimum assurance in the absence of external spot checks and is proportionate to available resources.

Timeline for implementation

30 September 2026

Monitoring and community feedback mechanism

89. The country office maintained strong monitoring governance with clear segregation of duties and oversight arrangements. The Planning, Monitoring, Learning and Evaluation (PMLE) unit reported directly to the Country Director, which ensured the required level of independence. Monitoring capacity was adequate across all area offices, drawing on WFP field monitors and three third-party monitoring (TPM) firms. Monitoring plans were risk-based, and layered (combining WFP monitors, TPMs, and remote monitoring), and aligned to access constraints.

90. Oversight from the ESARO further reinforced the strength of the monitoring function. The August 2025 oversight mission confirmed that the monitoring and complaints and feedback mechanisms were robust and did not highlight any significant weaknesses. Monitoring coverage consistently met the Minimum Monitoring Requirements.

91. The country office maintained a multi-channel community feedback mechanism, with frequent quality-assurance checks on call centres. Since last audit in 2023, the country office strengthened the accessibility and inclusivity of its CFM, by introducing two toll-free short-code numbers to replace the longer helpline numbers. These numbers were functional across all four national telecommunication networks, providing free and nationwide access. Migration of CFM from a tailored system to corporate system, SugarCRM, was ongoing at the time of audit fieldwork.

92. For monitoring, the audit reviewed governance mechanism, monitoring plans, monitoring coverage, evidence generation and use, and issue escalation and reporting mechanisms. For community feedback mechanism, the audit focused on its accessibility, data collection and usage, reporting, and case management.

Observation 6. Monitoring

Monitoring framework and operational control

93. Although the country office had strong governance and capacity in place, the monitoring framework did not align with evolving requirements. Certain operating procedures were updated, however, the 2022 monitoring strategy was outdated and did not reflect recent corporate changes or country-specific practices and risk considerations. These included targeting monitoring with the evolved targeting processes (as discussed in Observation 3), remote monitoring, the updated issue escalation and resolution mechanisms etc. As the country office was completing its current CSP in 2025 and preparing for the new CSP in 2026, it planned to develop a revised monitoring framework aligned with the upcoming CSP.

94. Roles and responsibilities for output monitoring were not optimally structured. The CP unit, rather than PMLE, was responsible for output monitoring, an approach different from standard WFP practice and this reduced the independence and completeness of monitoring oversight. Area offices also lacked sufficient tools and guidance to track assistance on an ongoing basis, identify operational delays, and take corrective action (as discussed in Observation 2).

Use of monitoring evidence for programme decision-making

95. PMLE teams generated substantial data and evidence at the area office level. They used an offline tool to capture process-level issues and applied a clear escalation and resolution mechanism. PMLE teams at area offices also held regular reflection sessions that supported cross-functional information sharing and timely problem-solving at the operational level.

96. Programme units at the country office were encouraged to liaise with their area office counterparts, but this informal approach did not ensure that PMLE findings consistently reached programme leadership to support programme design, strategic decisions, or operational adjustments. Whilst PMLE reported directly to the country director, no complementary mechanism existed to channel area office-level insights to programme teams in a systematic and timely manner. The findings indicate coordination challenges between the two country office units, alongside limitations in the use of PMLE-generated evidence.

Underlying cause(s):

Policies and procedures	Absence or inadequacy of local policies/guidelines
Process and planning	Inadequate process Insufficient coordination - internal or external

Agreed Actions [Medium priority]

The Country Office Director will:

(i) Update the monitoring framework (strategy and operating procedures) aligned with the 2026 strategic plan, corporate standards, country specific risks and operational context.

(ii) Review the placement of output monitoring responsibilities and decide whether responsibilities should shift from the cooperating partner management function to the monitoring function.

(iii) Establish a coordination mechanism requiring country office programme leadership to receive and review monitoring insights regularly, with agreed follow-up actions recorded to demonstrate how evidence informs programme design and operational adjustments.

Timeline for implementation

30 September 2026

External stakeholders and advocacy - Partnerships

97. The audit met with the United Nations Resident Coordinator and the principal donors supporting WFP's operations in Somalia to gather their feedback on WFP's performance, coordination with stakeholders, reporting practices, and key risks and concerns. The donors consulted included the United States of America, the Foreign, Commonwealth and Development Office (FCDO) of the United Kingdom, the World Bank, the Government of the Netherlands, the European Civil Protection and Humanitarian Aid Operations (ECHO), and the Federal Republic of Germany.

98. Donors expressed positive views on WFP's operations in Somalia. All donors confirmed that WFP's activities were fully aligned with, and complementary to, their strategic priorities for the country. They highlighted high levels of satisfaction with WFP's communication and engagement, describing it as consistent, transparent and responsive.

99. Donors also recognised significant improvements in incident reporting to donors and targeting mechanisms. WFP's leadership in the Vulnerability-Based Targeting (VBT) agenda was commended and seen as a cornerstone of humanitarian assistance in Somalia. Some donors also appreciated WFP's proactive approach to adjusting its footprint amidst funding challenges in 2025.

Annex A – Agreed actions plan

The following table shows the categorisation, ownership, and due dates agreed with the audit client for all the observations raised during the audit. This data is used for macro analysis of audit findings and monitoring the implementation of agreed actions.

The agreed actions plan is primarily at the CO level.

#	Observation	Process area	Owner	Priority	Due date for implementation
1	Oversight role of country office functions	Governance, risk management, and management oversight	Country Office	Medium	31 December 2026
2	Operational planning, delivery and reporting	Operational planning, delivery and reporting	Country Office	High	31 December 2026
3	Targeting governance and implementation	Beneficiary targeting	Country Office	High	30 September 2026
4	Efficiency gains in identity management and food transfer	Identity management and transfer mechanisms	Country Office	Medium	1) 31 December 2026 2) 31 December 2026
5	Cooperating partner management	Cooperating partner management	Country Office	Medium	30 September 2026
6	Monitoring	Monitoring and community feedback mechanism	Country Office	Medium	30 September 2026

Annex B – List of tables and figures

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Annex C – Acronyms used in the report

CBT	Cash-Based Transfers
COMET	Country Office Monitoring and Evaluation Tool
CP	Cooperating Partner
CSP	Country Strategic Plan
ECHO	European Civil Protection and Humanitarian Aid Operations
ESARO	Eastern and Southern Africa Regional Office
FCDO	Foreign, Commonwealth & Development Office (United Kingdom)
FLA	Field-Level Agreement
FRN	Food Release Note
FSP	Financial Service Provider
FSQ	Food Safety and Quality
GAP	Global Assurance Project
GHQ	Global Headquarters
IDM	Identity Management
IDP	Internally Displaced Person
IPC	Integrated Phase Classification
MODA	Mobile Operational Data Acquisition
MT	Metric Ton
NGO	Non-Governmental Organisation
PDAD	Post-Delivery Aid Diversion
PMLE	Programme Monitoring, Learning and Evaluation
SCOPE	WFP Beneficiary Information & Transfer Management Platform
TPM	Third-Party Monitoring
USD	United States Dollar
VAM	Vulnerability Analysis and Mapping
VBT	Vulnerability-Based Targeting
WFP	World Food Programme

Annex D – Agreed actions terminology

List of root causes

Category	Root cause
Organisational direction, structure and authority	Unclear direction for planning, delivery, or reporting
	Insufficient authority and/or accountability
	Strategic and operational plans not developed, approved, or not SMART
Policies and procedures	Absence or inadequate corporate policies/guidelines
	Absence or inadequacy of local policies/guidelines
Process and planning	Inadequate process or programme design
	Rules and processes, including for decision making, not established or unclear
	Unclear roles and responsibilities
	Insufficient planning
	Inadequate risk management
	Insufficient coordination - internal or external
Oversight and performance	Insufficient oversight from global headquarters / local management
	Insufficient oversight over third parties
	Oversight plans not risk-informed
	Performance measures and outcomes inadequately measured/established
Resources – People	Insufficient staffing levels
	Insufficient skills and/or competencies
	Absence of/insufficient staff training
	Inadequate succession and workforce planning
	Inadequate hiring, retention, and/or compensation practices
	Inadequate supervision and/or performance appraisal processes
Resources – Funds	Inadequate funds mobilization
	Insufficient financial / cost management
Resources – Third parties	Insufficient third-party capacity (NGO, government, financial service providers, vendor, etc.)
	Insufficient due diligence of third parties
	Insufficient training/capacity building of cooperating partners' staff
Tools, systems and digitization	Absence or late adoption of tools and systems
	Inappropriate implementation or integration of tools and systems
Culture, conduct and ethics	Deficient workplace environment
	Insufficient enforcement of leadership and/or ethical behaviours
External factors - beyond the control of WFP	Conflict, security & access
	Political – governmental situation
	Funding context and shortfalls
	Donor requirements
	UN or sector-wide reform
Unintentional human error	
Management override of controls	

Priority of agreed actions

Audit observations are categorized according to the priority of agreed actions, which serve as a guide to management in addressing the issues in a timely manner. The following categories of priorities are used:

Priority	Definition
High	Prompt action is required to ensure that WFP is not exposed to high/pervasive risks; failure to take action could result in critical or major consequences for the organisation or for the audited entity.
Medium	Action is required to ensure that WFP is not exposed to significant risks; failure to take action could result in adverse consequences for the audited entity.
Low	Action is recommended and should result in more effective governance arrangements, risk management, or controls, including better value for money.

Low-priority recommendations, if any, are dealt with by the audit team directly with management. Therefore, low-priority actions are not included in this report.

Typically, audit observations can be viewed on two levels: (1) observations that are specific to an office, unit, or division; and (2) observations that may relate to a broader policy, process, or corporate decision and may have a broad impact.[10]

The Office of Internal Audit tracks all medium and high-risk observations. Implementation of agreed actions is verified through the corporate system for the monitoring of the implementation of oversight recommendations. The purpose of this monitoring system is to ensure management actions are effectively implemented within the agreed timeframe to manage and mitigate the associated risks identified, thereby contributing to the improvement of WFP's operations.

The Office of Internal Audit monitors agreed actions from the date of the issuance of the report with regular reporting to senior management, the Independent Oversight Advisory Committee, and the Executive Board. Should action not be initiated within a reasonable timeframe, and in line with the due date as indicated by Management, the Office of Internal Audit will issue a memorandum to management informing them of the unmitigated risk due to the absence of management action after review. The overdue management action will then be closed in the audit database, and such closure confirmed to the entity in charge of the oversight.

When using this option, the Office of Internal Audit continues to ensure that the office in charge of the supervision of the unit that owns the actions is informed. Transparency on accepting the risk is essential, and the Risk Management Division is copied on such communication, with the right to comment and escalate should they consider the risk accepted is outside acceptable corporate levels. The Office of Internal Audit informs senior management, the Independent Oversight Advisory Committee, and the Executive Board of actions closed without mitigating the risk on a regular basis.

10 An audit observation of high risk to the audited entity may be of low risk to WFP as a whole; conversely, an observation of critical importance to WFP may have a low impact on a specific entity, but have a high impact globally.

Annex E – Audit rating system

The internal audit services of UNDP, UNFPA, UNOPS, and WFP adopted harmonized audit rating definitions, as described below:

Rating	Definition
Effective / satisfactory	The assessed governance arrangements, risk management and controls were adequately established and functioning well, to provide reasonable assurance that issues identified by the audit were unlikely to affect the achievement of the objectives of the audited entity/area.
Some improvement needed	The assessed governance arrangements, risk management and controls were generally established and functioning well but needed improvement to provide reasonable assurance that the objective of the audited entity/area should be achieved. Issue(s) identified by the audit were unlikely to significantly affect the achievement of the objectives of the audited entity/area. Management action is recommended to ensure that identified risks are adequately mitigated.
Major improvement needed	The assessed governance arrangements, risk management and controls were generally established and functioning, but need major improvement to provide reasonable assurance that the objectives of the audited entity/area should be achieved. Issues identified by the audit could negatively affect the achievement of the objectives of the audited entity/area. Prompt management action is required to ensure that identified risks are adequately mitigated.
Ineffective / unsatisfactory	The assessed governance arrangements, risk management and controls were not adequately established and not functioning well to provide reasonable assurance that the objectives of the audited entity/area should be achieved. Issues identified by the audit could seriously compromise the achievement of the objectives of the audited entity/area. Urgent management action is required to ensure that the identified risks are adequately mitigated.