2024 MSNA IN SYRIA – METHODOLOGICAL OVERVIEW

Objective of the methodological overview

The methodological overview is part of the Multi-Sectoral Needs Assessment (MSNA) analysis toolkit. It aids in the understanding of how MSNA data was collected and analyzed, and it explains the composites of the Multi-Sectoral Needs Index (MSNI) and REACH Syria's specific approach and rationale for the analysis of the severity of needs. This methodological overview helps external stakeholders go through concise and to-the-point MSNA outputs methodology; It is a key component of any MSNA information product and linked to the MSNA Analysis Guidance, that contains the details on the MSNI and the sectoral composite frameworks.

This methodological overview stresses the following:
- *Final overview of the MSNA methodology: final scope and coverage of the assessment, secondary data sources, ethical considerations and limitations (including deviations from the ToRs);*
- *Analysis of the Sectoral Composites: description of the framework used to construct the sectoral composite indicators;*
- *Annexes: further details on the country Sectoral Composite Framework, the estimation of the overall severity of needs (Multi-Sectoral Needs Index – MSNI), list of partners that participated in the research cycle.*

About REACH

REACH facilitates the development of information tools and products that enhance the capacity of aid actors to make evidence-based decisions in emergency, recovery and development contexts. The methodologies used by REACH include primary data collection and in-depth analysis, and all activities are conducted through inter-agency aid coordination mechanisms. REACH is a joint initiative of IMPACT Initiatives, ACTED and the United Nations Institute for Training and Research - Operational Satellite Applications Programme (UNITAR-UNOSAT).

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List of Acronyms

AoI: Area of Influence
GoS: Government of Syria
IDP: Internally Displaced Population
NES: Northeast Syria
NWS: Northwest Syria

Geographical Classifications

Hubs	The humanitarian coordination structure for the different Areas of Influence in Syria: Government of Syria controlled areas, the Kurdish self-administration areas in northeast Syria and Turkish-backed opposition in northwest Syria.
Area of Influence	An administrative unit that refers to a geographic area where a particular actor or group exerts control or significant influence.
Governorate	The highest administrative division, each with its own local government and administrative structure (Admin level 1).
District	The second-level division within a governorate, positioned between the governorate and subdistrict levels (Admin level 2).
Sub-District	The administrative division that is a subdivision of a district (Admin level 3).
Community	The smallest administrative unit and represents individual cities, towns, villages, or clusters of settlements (Admin level 4).

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General and specific objectives and research questions

General and specific objectives

General objectives

To inform evidence-based strategic planning of humanitarian response activities by the Inter Sector Group (ISG), Sectors, and Sector partners, through the provision of up-to-date, relevant and comparable data on the multi-sectoral and sectoral[1] needs of vulnerable communities in Syria across different geographic locations and population groups. The data will feed into the Humanitarian Needs Overview (HNO), on which the Humanitarian Response Plan (HRP) will be planned.

Specific objectives

Provide a comprehensive, evidence-based understanding of the humanitarian needs of the assessed population, by sector and across sectors at the sub-district level and above, as well as among the IDP in camps population, IDP out of camps population, and residents at the governorate level and above to inform the 2025 Humanitarian Needs Overview (HNO) for Syria and 2025 Humanitarian Response Plan (HRP).

Research questions

1. What are the humanitarian needs of crisis-affected populations, regarding:
   - Personal and household-level vulnerabilities, crisis impact, living standards, use of coping mechanisms, and priority needs?
   - Sectors including health, education, protection, early recovery and livelihoods, accountability to affected populations (AAP), shelter/non-food items (SNFI), WASH, and inter-sectorally?
   - Prevalence, severity, and co-occurrence of sectoral and multi-sectoral living standard gaps?
2. What are the differences in needs and vulnerability across different geographic areas in Syria, especially across hubs?
3. What are the differences in needs and vulnerability across different population groups (at the national and governorate levels), such as IDPs in camps, IDPs outside of camps, host communities, female-headed households, or households headed by elderly, or people with disabilities?[2]

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[1] The MSNA specifically covers health, education, Shelter/NFI, WASH, FSL, nutrition, protection, early recovery and livelihoods, and includes inter-sectoral indicators as well as an AAP section that addresses accountability and aid provision across all active sectors.

[2] Head of household disaggregation will not be built into the sampling strategy; however, it is assumed that the sample size will be apply large to allow comparison between the groups at the national level.

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Scope and coverage of the assessment

The assessment covered Northern Syria - Northwest Syria (NWS) and Northeast Syria (NES)[3] at the household level. Sampling took place at sub-district level (75 sub-districts in total).

Groups of population and sampling strategy

The selection of the sample was grounded in the 2023 population baseline sourced from the United Nations' Population Task Force (PTF) and the IDP Task Force 2024 dataset, encompassing demographic data for both resident and internally displaced populations (IDPs). Given that the primary data collection for the Multi-Sector Needs Assessment (MSNA) was exclusive to Northern Syria (NES and NWS), the OCHA Area of Influence (AoI) dataset was incorporated to demarcate distinct geographic regions of operation. Using these datasets, REACH was responsible for calculating the sampling frame. The sampling frame excluded any communities not included within the NES and NWS regions, as well as communities inaccessible to REACH or partner enumerators.

The integration of the "Area of Influence", based on OCHA categorization, serves to assign a specific influence group to each community, reflecting the control exerted over the respective territory. Consequently, within a single sub-district and/or governorate, distinct portions of land may be under the control of different groups. For instance, this can be observed in the case of forces controlled by the government versus the Syrian Democratic Forces. This division plays a pivotal role in defining the intervention zones for NWS and NES. Furthermore, it allows us to exclude communities falling within the scope of the governmental Area of Influence (GoS). This distinction becomes particularly significant when considering our sampling approach. At the sampling level, this approach enables us to obtain separate samples for each Area of Influence (AoI) within shared geographical areas, such as at the sub-district level. This targeted sampling strategy ensures accurate representation for the diverse zones within these shared areas.

The MSNA primary data collection was conducted using a stratified random sampling methodology, which allows for collecting quantitative data that is statistically representative at the area of influence and sub-district level. Furthermore, findings were statistically representative for three population groups (residents, IDPs in camps and IDPs out of camps) at the (area of influence – governorate) level.

The three main populations of interest for this assessment are internally displaced persons (IDPs) residing in camps, IDPs residing out of camps, and host community populations in Syria.

Other possible populations of interest and levels of disaggregation, although not considered in the sampling strategy and therefore not representative, are female-headed households, or households headed by elderly or people with disabilities. Child-headed households were excluded from disaggregation levels due to ethical considerations in the research design which prohibit interviewing minors under 18 years old.

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[3] Within these regions, the subdistricts that are part of the region RAATA were covered. The RAATA region in northern Syria refers to the areas surrounding Ras al-Ain and Tell Abiad, located in the northern part of the country along the Turkish border.

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Table 1: Defining the groups of population

The population of interest for the assessment were: residents, IDPs in Camp and IDPs out of camp. Since returnees were also found during the data collection, the definition for this population group is provided in the following table. Nonetheless, the lack of information available and collected for returnees is a barrier for the sampling and analysis.

Residents	Individuals or groups of people who currently reside in their communities of origin, or communities of permanent residence prior to the Syrian conflict. This includes populations that were never displaced as well as previously displaced populations that have returned to their communities of origin
IDPs in Camps	Individuals or groups of people who have been forced to leave their communities of origin, in particular as a result of or in order to avoid the effects of armed conflict, situations of generalised violence, violations of human rights or natural or man-made disasters, and who have not crossed an international border[4] *NES: IDPs located within "planned camps" (according to OCHA categorization) *NWS: IDPs living in any form of settlement (as delineated by the IDP Task Force dataset)
IDPs out of Camps	Individuals or groups of people who have been forced to leave their communities of origin, in particular as a result of or in order to avoid the effects of armed conflict, situations of generalised violence, violations of human rights or natural or man-made disasters, and who have not crossed an international border[4] *NES: IDPs not residing in "planned camps" (according to OCHA categorization) *NWS: IDPs not living in any form of settlement (as delineated by the IDP Task Force dataset)
Returnees	People who have previously been displaced for at least 24 hours away from their community of origin/community of first departure and returned to it with the intention of staying. This is regardless of whether the person can return to their house but rather relates to returning to the community of first departure when the event triggering the displacement began.

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[4] UNHCR, Emergency Handbook

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Table 2: Sampling strategy by group of population

Group of population	Type of sampling	Precision level	Further stratification
Residents	Random sampling	Confidence level: 90% Margin of error: 10+/- %	Geographic: Sub-district
IDPs in Camps	Random sampling	Confidence level: 90% Margin of error: 10+/- %	Geographic: Sub-district
IDPs out of Camps	Random sampling	Confidence level: 90% Margin of error: 10+/- %	Geographic: Sub-district

For each of the specified targets, the sample size for every sampling unit is determined using probabilistic theory for proportion estimators, with a target margin of error set at 10% and a confidence level of 90%. A population proportion of 50% is presumed to calculate the sample size for the scenario with the highest estimator variance. Additionally, a buffer of 10% is incorporated to account for potential non-responses. With these parameters, and accounting for population distribution within and across sub-districts, the target sample size for each unit is fixed at 75.
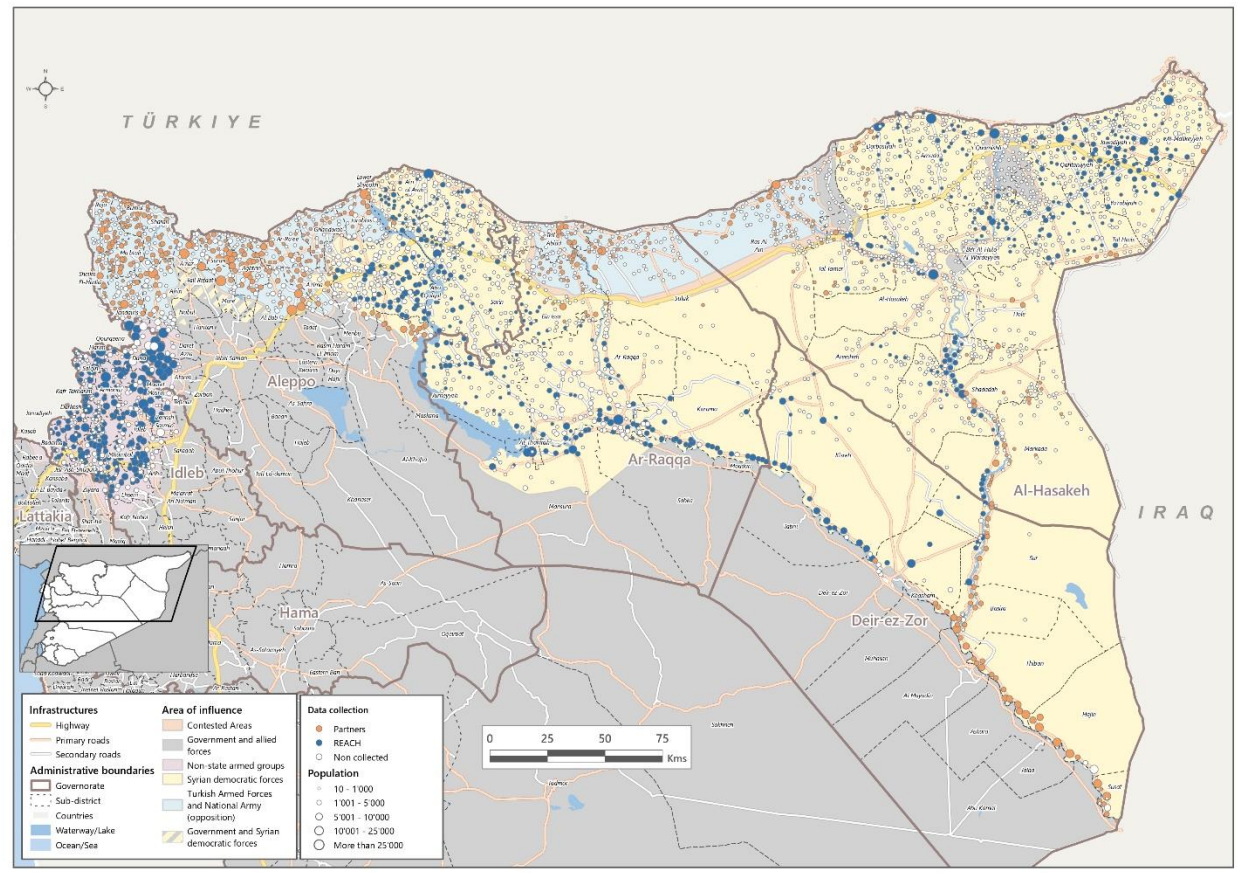
To calculate the number of samples required to achieve the two targets, we combined two independent sampling strategies as follows. The first sampling is at AoI- subdistrict level for the total population: the 75 required samples for each AoI - subdistrict are allocated across the 3 population groups based on their distributions relative to the overall population. The second sampling is at AoI- governorate and population group level: the 75 required samples for each AoI – governorate - population group are distributed between the subdistricts based on their relative population distributions. Next, we combined the 2 samplings by taking the maximum of the required number of samples for each combined stratum (AoI - Sub-districts - Population groups)

Data collection and geographical coverage

Quantitative data collection took place between the 28th of July and the 1st of September of 2024, and covered a final total number of 5,788 households. Households were interviewed through structured, 60-90-minute interviews, covering all humanitarian sectors active in the Syria response. All surveys were conducted in person through REACH and partner enumerators. The surveys were conducted on smartphones using the KoBo Collect Android app, and enumerators uploaded the data to the REACH server every day.

The sampling frame consists of 3,315 communities, divided into 75 subdistricts, 21 districts, and 5 governorates. The clean dataset has a total of 5,788 household surveys.

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SYRIA MSNA 2024 Coverage

Secondary data sources

- Population Task Force (PTF) dataset for 2023: Sub-district level population data
- IDP Task Force May 2024 Dataset: IDPs in camps and IDPs out of camps population data
- OCHA Area of Influence (AoI) dataset for 2024: Community-level access data

Ethical considerations and limitations

Ethical considerations

- *The research design has been coordinated with relevant stakeholders to avoid unnecessary duplication of data collection efforts. It respects respondents, their rights and dignity (by seeking informed consent, designing length of survey/discussion while being considerate of participants' time, and ensuring accurate reporting of information provided), does not involve data collection with minors, and follows IMPACT SOPs for management of personally identifiable information.*

- *Due to the protracted conflict in Syria, some areas are at a higher risk due to military operations on the ground. Therefore, the research design could expose data collectors to risks as a direct result of participation in data collection. However, to mitigate that, REACH enumerators were only able to access "safe areas" in Northern Syria, which are regularly monitored and assessed by ACTED security in-country, and in the event of sudden escalations, the REACH team adjusts the sampling.*

- *As a result of the complex landscape with many actors involved in the conflict, it is not possible to completely exclude the possibility of retaliations on respondents and their communities. To mitigate this, REACH ensured that safety protocols were followed, that interview information was protected, and respondents' identifiable information was not shared.*

- *Due to the different sectors covered in the MSNA, the research design does involve collecting information on specific topics which may be stressful to research participants. To mitigate this, REACH provided core training to field officers and enumerators, including PSEAH training, and instructed data collectors to practice informed consent by informing respondents that they have the right to terminate the interview at any point without negative repercussions, and by allowing 'prefer not to answer' responses for all potentially sensitive or traumatizing questions.*

- *The research design did involve data collection with vulnerable groups such as persons with disabilities, as the questionnaire included the globally approved Washington Group questions. To mitigate this, enumerators were trained on the module, in coordination with Humanitarian Inclusion (HI), to ensure data was collected following global standards.*

The following is the training agenda for the MSNA 2024 in Syria:

Day 1		
Lead Facilitator	**Time**	**Activities**
REACH trainer	9:00 – 10:00	• Welcome • Introductions • Overview of the training schedule • Icebreakers
REACH trainer	9:25 – 9:35	• Introducing MSNA • Consent
CCCM trainer	10:00 – 10:45	• Cluster-specific training
Protection focal point	11:00 – 12:30	• Cluster-specific training
WASH focal point	1:30 – 2:30	• Cluster-specific training
SNFI focal point	2:30 – 3:20	• Cluster-specific training

Day 2		
Lead Facilitator	**Time**	• **Activities**
REACH trainer	9:10 – 10:10	• Cluster-specific training (LCSI)
OCHA trainer	10:10 – 10:25	• Cluster-specific training
Education focal point	10:40 – 11:40	• Cluster-specific training
ERL focal point	11:40 – 12:30	• Cluster-specific training

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Health focal point	1:30 – 2:30	• Cluster-specific training
WGQ focal point	2:30 – 3:45	• Washington group questions and answer options

Day 3		
Lead Facilitator	Time	• **Activities**
OCHA trainer	9:00 – 10:45	• Cluster-specific training
Nutrition trainer	11:00-11:45	• Cluster-specific training
REACH trainer	11:45-12:45	• Cluster-specific training (FSL)
PSEAH trainer	1:30 – 3:30	• PSEAH definitions • Review related questions and answer options • Q&A

Day 4		
Lead Facilitator	Time	• **Activities**
REACH trainer	9:00 – 9:45	• Complaints & Response Mechanisms • Q&A
REACH trainer	9:45 – 3:30	• Tool training and review

Limitations and challenges

Regarding the limitations, there are two aspects to consider:

- **Representativeness of the findings**: Two subdistricts were under-sampled due to operational constraints (Ein Issa TAF SY110202TAF and Mansura SY110301). The results for these subdistricts are not generalisable with a known level of precision and should be considered indicative only.
- **Highly dynamic context and lack of exact population figures**: This caveat impacts the data collection phase, where communities might not be populated, not be accessible, or become inaccessible during data collection. To mitigate this limitation, the data team monitored data collection closely and re-sampled at a late stage of the data collection. While lost access to a few communities led to the loss of 2 subdistricts in the sample, the re-sampling ensured that this did not affect the representativeness of the findings.

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For details regarding the indicators and thresholds used in this analysis, please refer to Annex 2.

Each year, REACH facilitates the collection and analysis of crisis-level data across sectors and population groups through Multi-Sector Needs Assessments (MSNA) to support decision-making by humanitarian actors. MSNAs are conducted within a strong partnership framework at sector and inter-sector levels. They are timed in order to inform strategic decision-making milestones along the humanitarian programme cycle (HPC), such as the Humanitarian Needs Overview (HNO) and the Humanitarian Response Plan (HRP).
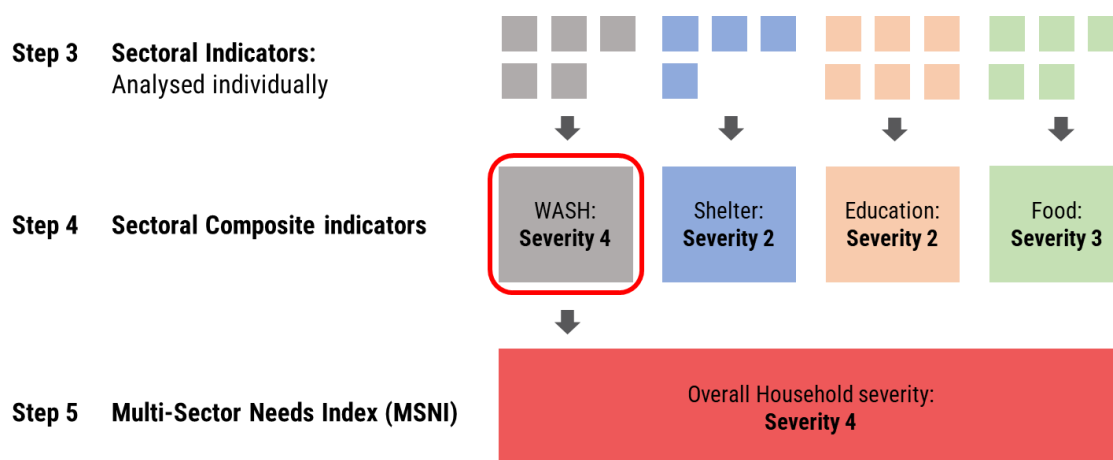
The MSNI data analysis framework is independent from the Joint Inter-Sector Analysis Framework (JIAF). While some of the conceptual elements for the MSNI are the JIAF 2.0 (e.g. Sectoral Composites, indicators, severity categories), the methodology used is different. The REACH MSNI analysis method was developed internally by REACH and is implemented primarily using household-level data collected through the MSNA. In line with the research questions, the analysis aims to provide a crisis-wide overview of humanitarian needs and the underlying drivers that influence access to basic needs and services.

The MSNI analysis conducted for Syria deviates from the standardized global MSNI framework based on contextualized changes. The main deviation consists of including two additional indicators in the protection composite but following the same logic for composite analysis. Another deviation consists of including livelihood coping strategies indicators to the food security calculations. This renders the overall MSNI framework as different from the standard version and therefore should be considered as only specific to the needs within the Syrian context.

The methodology relies on a two-step aggregation process (see *Figure 1*):
   (1) ***Aggregation of indicators at the sector level***: *Construction of Sectoral Composites, see Annex 3 for further details;*
   (2) *Aggregation of Sectoral Composites into a multi-sectoral composite result: Multi-Sector Needs Index (MSNI), see Annex 4 for further details.*

Figure 1: Approach for the MSNI analysis

The key analytical components are:
- *Sectoral Composites: signifies a need in a given sector, where the severity score is 3 or higher.*
- *Severity: signifies the "intensity" of needs, using a scale that ranges from 1 (minimal/no gap) to 4 (extreme needes)/4+ (very extreme needs).*
- *Magnitude: corresponds to the overall number or percentage of households in need.*
- *The Multi-Sectoral Needs Index (MSNI) is a measure of the household's overall severity of humanitarian needs across sectors (expressed on a scale from 1 to 4+), based on the highest severity of sectoral severity scores identified in each household.*

The severity scale is based on the type of severity scales that exist in [Version 2.0 of the Joint Intersectoral Analysis Framework (JIAF).](#) This framework measures the gradual deterioration of a household's situation towards the worst possible humanitarian outcome. While the JIAF severity scale includes 5 classes ranging from 1 (none/minimum) to 5 (catastrophic), for the purpose of this MSNI, only a scale of 1 (none/minimum) to 4 (extreme) is used. The "4+" score (very extreme) is used when the data indicates that the situation could be catastrophic. But the term "catatstrophic" is not used in this analysis. This is because the data needed to establish a "catastrophic" score is mainly collected at the area level (e.g. mortality rates or malnutrition prevalence), which is difficult to take into account in an analysis at the household or individual level.

The different levels of severity can be broadly defined as follows:
- Very extreme (4+): Indications of total collapse of living standards, with potentially immediately life-threatening outcomes (increased risk of mortality and / or irreversible harm to physical or mental well-being).
- Extreme (4): Collapse of living standards. (Risk of) significant harm to physical or mental well-being.
- Severe (3): Degrading living standards, with reduced access to / availability of basic goods and services. (Risk of) degrading physical or mental well-being.
- Stress (2): Living standards are under stress. Minimal (risk of) impact on physical or mental well-being / stressed physical or mental well-being overall.
- Minimal (1): Living standards are acceptable, at a maximum showing some signs of deterioration and / or inadequate access to basic services. No or minimal (risk of) impact on physical or mental well-being

Based on the severity scale, sectoral composite scores are calculated by aggregating indicators by sector. A simple aggregation methodology was identified, based on the Multidimensional Poverty Index (MPI) aggregation approach. For details on the aggregation methodology, please refer to Annex 3.

The Multi-sectoral Needs Index (MSNI) is a measure of the overall severity of needs experienced by a household over all sectors (expressed on a scale of 1 to 4/4+), based on the highest severity score from the sectoral composite for a given sector and identified within each household. The MSNI approaches multi-sectoral needs from an overall perspective. A household is considered in need if any of its sectoral composite score is 3 or higher. Whether a household has very severe need in a single sector or co-occurring severe needs in several sectors, its final MSNI score will remain the same. While this approach makes sense from a response planning perspective – if a household has an extreme need in a single sector, this may substantiate a humanitarian intervention regardless of the co-occurrence with other sectoral needs—, further analyses are needed to unpack the MSNI and understand these differences in magnitude and severity between households. *For details on the MSNI construction, please refer to Annex 4.*

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Annex 1: Mandatory Reporting on Missing Values

The following table shows the indicators and sectoral composites with missing values and the percentage of missing values for each indicator.

Indicator/Variable	Percentage	Relevant limitation
rcsi_cat	1.7%	Due to N/A values in the indicator
hhs_cat_ipc	0.8%	Due to N/A values in the indicator
fsl_fc_phase	3.8%	Due to N/A values in the indicator
fclcm_phase	3.8%	Due to N/A values in the indicator
comp_foodsec_score	3.8%	Due to N/A values in the indicator
comp_foodsec_in_need	3.8%	Due to N/A values in the indicator
comp_foodsec_in_acute_need	3.8%	Due to N/A values in the indicator
comp_edu_score_disrupted	0.1%	Due to N/A values in the indicator
comp_wash_score_water_quantity	0.0%	Due to N/A values in the indicator
comp_wash_score_water_quality	0.5%	Due to N/A values in the indicator
comp_wash_score_sanitation	0.2%	Due to N/A values in the indicator
comp_wash_score_hygiene	0.1%	Due to N/A values in the indicator
comp_snfi_score_shelter_issue_cat	1.4%	Due to N/A values in the indicator
comp_snfi_score_occupancy_cat	0.6%	Due to N/A values in the indicator
comp_snfi_score_fds_cannot_cat	0.3%	Due to N/A values in the indicator
comp_prot_child_sep_cat	0.1%	Due to N/A values in the indicator
comp_prot_score_concern_freq_cope	0.2%	Due to N/A values in the indicator
comp_prot_score_concern_freq_displaced	0.1%	Due to N/A values in the indicator
comp_prot_score_concern_hh_freq_kidnapping	0.4%	Due to N/A values in the indicator
comp_prot_score_concern_hh_freq_discrimination	0.3%	Due to N/A values in the indicator
comp_prot_risk_always_d	0.8%	Due to N/A values in the indicator
comp_prot_score_concern	0.8%	Due to N/A values in the indicator
comp_prot_explosive_effect	0.3%	Due to N/A values in the indicator
comp_prot_documents_gos	13.4%	Due to N/A values in the indicator

Annex 2: Related publications (terms of reference, datasets, dashboards)

The following documentations and outputs related to the 2024 MSNA in Syria are available on the REACH Resource Center:

- *Terms of reference*.

All REACH multisectoral outputs can be found here.

Annex 3: Details on the indicators used for the Sectoral Composites

Food Security

Indicator	Question(s)	Response options	Sectoral Composite does not indicate need		Sectoral Composite indicates need		
			Severity level 1	Severity level 2	Severity level 3	Severity level 4	Severity level 4+
Household Hunger Scale (HHS)	• *In the past 4 weeks (30 days), was there ever no food to eat of any kind in your house because of lack of resources to get food?* • *How often did this happen in the past [4 weeks/30 days]?* • *In the past 4 weeks (30 days), did you or any household member go to sleep at night hungry because there was not enough food?* • *How often did this happen in the past [4 weeks/30 days]?* • *In the past 4 weeks (30 days), did you or any household member go a whole day or night without eating anything*	Yes, No, Don't know, Prefer not to answer Rarely (1-2 times), Sometimes (3-10 times), Often (10+ times)	Food Consumption: Households have adequate food intake, both in terms of quantity and quality (diverse diet). Coping Strategies: Households do not need to engage in negative coping strategies or resort to very minimal, non-damaging measures to maintain food security.	Food Consumption: Households may experience slight food consumption gaps, or they meet their food needs but at the cost of slightly reducing food diversity. Coping Strategies: Households employ stressed coping strategies	Food Consumption: Households are unable to meet their food needs adequately, leading to significant food gaps or severely reduced food diversity. Coping Strategies: Households employ crisis coping strategies.	Food Consumption: There are large food consumption gaps leading to acute malnutrition, or households meet their food needs through extremely inadequate and unsustainable means. Coping Strategies: Households engage in emergency coping strategies, which severely affect their long-term livelihoods	Food Consumption: Households face an extreme lack of food, leading to starvation, death, and the collapse of livelihoods. Coping Strategies: No viable coping strategies are available, and households are in life-threatening situations.

	at all because there was not enough food? • *How often did this happen in the past [4 weeks/30 days]?*						
Food Consumption Score (FCS)	• *How many days over the last 7 days, did most members of your household (50% +) eat, inside or outside the home, cereals, grains, roots or tubers, including wild roots?* • *How many days over the last 7 days, did most members of your household (50% +) eat, inside or outside the home, any beans / legumes, pulses or nuts?* • *How many days over the last 7 days, did most members of your household (50% +) inside or outside the home, drink milk or eat other dairy products?* • *How many days over the last 7 days, did most members of your household (50% +) eat, inside or outside the home, meat, fish, or eggs?*	Integer	Households have adequate food intake, both in terms of quantity and quality (diverse diet).				

	• *How many days over the last 7 days, did most members of your household (50% +) eat, inside or outside the home, vegetables or leaves, including all wild vegetables or leaves?* • *How many days over the last 7 days, did most members of your household (50% +) eat, inside or outside the home, fruit, including all wild fruits?* • *How many days over the last 7 days, did most members of your household (50% +) eat, inside or outside the home, oil, fat, or butter?* • *How many days over the last 7 days, did most members of your household (50% +) eat, inside or outside the home, sugar or sugary foods?*						
Reduced coping strategy index (rCSi)	• *During the last 7 days, were there days (or, if so, how many) when your household had to rely on less preferred or less expensive food to cope*	Integer					

	with a lack of food or money to buy it?					
	• *During the last 7 days, were there days (or, if so, how many) when your household had to borrow food or rely on help from a relative or friend to cope with a lack of food or money to buy it?*					
	• *During the last 7 days, were there days (or, if so, how many) when your household had to limit portion size of meals at meal times to cope with a lack of food or money to buy it?*					
	• *During the last 7 days, were there days (or, if so, how many) when your household had to restrict consumption by adults in order for small children to eat to cope with a lack of food or money to buy it?*					
	• *During the last 7 days, were there days (or, if so, how many) when your household had to reduce number of meals eaten in a day to cope with a lack of food or money to buy it?*					

Living Coping Strategies Index (LCSI)	Stress: • *Sold household assets/goods (radio, furniture, television, jewellery etc.) to meet essential needs* • *Spent savings to meet essential needs* • *Borrowed money from a former lender/bank to meet essential needs* • *Reduce non-food essential expenses (health, education, etc.) in order to prioritize household basic needs* Crisis: • *Sold productive assets or means of transport (sewing machine, wheelbarrow, bicycle, car, etc.) to meet essential needs* • *Children (under 15 years old) worked to contribute to household income (e.g. maid, casual labour) to meet essential needs* • *Moved to less expensive accommodation to meet other essential needs* Emergency: • *Engaged in socially degrading, high risk, or*	Yes, No, had no need to use these coping strategies, No have already exhausted this coping strategy and cannot use it again, Not applicable/This coping strategy is not available for me	Households do not need to engage in negative coping strategies or resort to very minimal, non-damaging measures to maintain food security.				

	exploitive jobs, or life-threatening income activities (e.g., smuggling, theft, join armed groups, prostitution) to meet essential needs • *Mortgaged/Sold house that the household was permanently living in or sold land to meet essential needs* • *Any household member migrated informally to meet essential needs*					

Health

			Sectoral Composite does not indicate need		Sectoral Composite indicates need		
Indicator	**Question(s)**	**Response options**	**Severity level 1**	**Severity level 2**	**Severity level 3**	**Severity level 4**	**Severity level 4+**
% of individuals with a health care need	*During the last 3 months, did person of age: ${health_ind_age} and gender: ${health_ind_gender} have a health problem and needed to access health care?*	Yes, No, Don't know, Prefer not to answer	No person with healthcare needs and no person with a disability	At least one person with a met need AND [no person with a disability OR	At least one person with an unmet need AND [no disability OR WGSS level 1 or 2]	At least one person with unmet needs AND	

				WG-SS level 1 or 2]	OR [No person with needs OR met needs] AND WG-SS level 3 or 4	WG-SS level 3 or 4	
% of individuals with an unmet health care need	*If yes, was person of age: ${health_ind_age} and gender: ${health_ind_gender} able to obtain health care when they felt they needed it?*						
Washington Group Questions (WGQ)	• *Does he/she have difficulty seeing, even if wearing glasses? Would you say…* • *Does he/she have difficulty hearing, even if using a hearing aid(s)? Would you say…* • *Does he/she have difficulty walking or climbing steps? Would you say…* • *Does he/she have difficulty remembering or concentrating? Would you say…* • *Does he/she have difficulty with self-care, such as washing all over or dressing? Would you say…* • *Using his/her usual language, does he/she have difficulty communicating, for example understanding or being understood? Would you say…*	No difficulty, Some difficulty. A lot of difficulty, Cannot do/unable to do at all				

Education

Indicator	Question(s)	Response options	Sectoral Composite does not indicate need		Sectoral Composite indicates need		Severity level 4+
			Severity level 1	Severity level 2	Severity level 3	Severity level 4	Severity level 4+
Access and barriers to access education							
% children 5 to 18 y.o. who attended school or any early childhood education program at any time during the 2023-2024 school year	*Did child of age: ${edu_ind_age} and gender: ${edu_ind_gender} attend school or any early childhood education program at any time during the 2023-2024 school year?*	Yes, No. Don't Know, Prefer not to answer	All school-aged children attended formal school at any time OR No school-aged children		At least one school-aged child did not attend formal school at any time	At least one school-aged child did not attend formal school at any time, for a reason identified as a severity 4 or 5 in the PiN guidance, indicating that the child faced a severe protection risk	
% children 5 to 18 y.o. not attending school or any early childhood education program at any time during the 2023-2024 school year, by main reason	*During the 2023-2024 school year, what was the main reason child of age: ${edu_ind_age} and gender: ${edu_ind_gender} did not access formal school?*	List of education barriers					
Education Disruption							
% children 5 to 18 y.o. whose education was disrupted, by type of event	• *Natural hazards such as flood, cyclone, drought, wildfire or earthquake* • *Teacher's absence* • *School used as a shelter by displaced persons* • *(Using the answer options "Child is affiliated with opposition groups" or "Child is affiliated with armed forces or armed*	Yes, No. Don't Know, Prefer not to answer	None of the children education was disrupted OR No school-aged children	At least one child's education has been disrupted by teacher absenteeism.	At least one child education has been disrupted by climate related hazards or the school being used as a shelter by displaced population	At least one child education has been disrupted by school being occupied by armed groups/ non-state governmental actors	

				groups) in the education barriers

groups) in the education barriers

WASH

Indicator	Question(s)	Response options	Setting	Sectoral Composite does not indicate need		Sectoral Composite indicates need		
				Severity level 1	Severity level 2	Severity level 3	Severity level 4	Severity level 4+
Water quantity								
% of households having had access to a sufficient quantity of drinking water	*In the last 4 weeks, how frequently has there NOT been as much water to drink as you would like for you or anyone in your household?*	Never, Rarely, Sometimes, Often, Mostly, Always, Don't know, Prefer not to answer	All settings (Rural, Urban, Camp)	Never (0 times)	Rarely (1-2 times)	Sometimes (3-10 times)	Often (11-20 times)	Always (more than 20 times)
Water quality								
% of households having had access to an improved water source	*What is the main source of drinking water for members of your household?*	List of water sources	Rural	Safely managed or Basic	Limited or Unimproved		Surface water	
			Urban	Safely managed	Basic or Limited	Unimproved	Surface water	
% of households reporting distance to water source	*How long does it take to go there, get water, and come back?*	Integer	Camp	Safely managed	Basic	Limited	Unimproved	Surface water
Sanitation								

% of households with access to functioning sanitation facilities % of households having had access to an improved sanitation	• *What kind of toilet facility do members of your household usually use?* • *Do you share this sanitation facility with others who are not members of your household?* • *If yes, how many households in total use this toilet facility, including your own household?*	List of toilet facilities Yes, No, Don't know. Prefer not to answer Integer	Rural				
				Basic	Limited or Unimproved		Open defecation
			Urban				
				Basic	Limited	Unimproved	Open defecation
			Camp				
				Improved and Not shared with people outside of the household	Improved and Shared with less than 20 people	Improved and Shared with between 20 and 50 people	Unimproved or Improved & shared with more than 50 people	Open defecation
Hygiene							
% of households with access to functioning handwashing facilities (H1) % of households with access to	• *Can you please show me the place where you usually wash your hands?* • *Where do you and other members of your household most*	Accept, Refuse List of handwashing facilities, Soap, Water, Both, None	Rural				
				Basic	Limited or No facility		

functioning handwashing facilities, by type of device (observed)	• *often wash your hands?* • *Are water and soap currently available at the place where you normally wash your hands?*	Urban					
			Basic	Limited	No facility		
		Camp					
			Basic	Limited	No facility		

SNFI

			Sectoral Composite does not indicate need		Sectoral Composite indicates need		
Indicator	**Question(s)**	**Response options**	**Severity level 1**	**Severity level 2**	**Severity level 3**	**Severity level 4**	**Severity level 4+**
Shelter type							
% of households living in safe and dignified dwellings (A structure that provides safety & security, protection from the elements, access to basic services, and adequate privacy % of households reporting type of shelter they currently live in	What type of shelter does the household currently live in?	List of shelter types	Adequate shelter		Inadequate shelter		
Shelter issues							

% of households living in safe and dignified dwellings (A structure that provides safety & security, protection from the elements, access to basic services, and adequate privacy % of households reporting issues with enclosure, privacy & dignity, access to basic services & domestic activity	Are there any adequacy issues with your shelter, and if so, what are the issues? (In the case of several shelters, households should report on their primary shelter.)	List of shelter issues	None	More than 12% of issues selected (1-5 out of 12)	More than 50% of issues selected (6-9 out of 12)	More than 87% of issues selected (10-12 out of 12)	
Security of Tenure							
% of households living in safe and dignified dwellings % of households by occupancy status	What is the occupancy arrangement in your current dwelling?	List of occupancy arrangements	Low risk	Medium risk	High risk		
Functional Domestic Tasks							
% of households reporting they cannot cook in their dwelling	Are members of your household able to cook where you live?	Yes, without any issues Yes, with issues No, cannot do Prefer not to answer	Cannot perform 1-2/5 tasks	Cannot perform 2-3/5 tasks	Cannot perform 4/5 tasks	Cannot perform 5/5 tasks	
% of households reporting they cannot store food and water in their dwelling	Are members of your household able to store food and water where you live?						
% of households reporting they cannot sleep in their dwelling	Are members of your household able to achieve quality sleep where you live?						
% of households reporting they cannot perform personal hygiene in their dwelling	Are members of your household able to perform personal hygiene where you live?						
% of households reporting they cannot maintain an adequate living space and warmth in winter	How would you rate your ability to maintain an adequate living space and warmth during winter?						

Protection

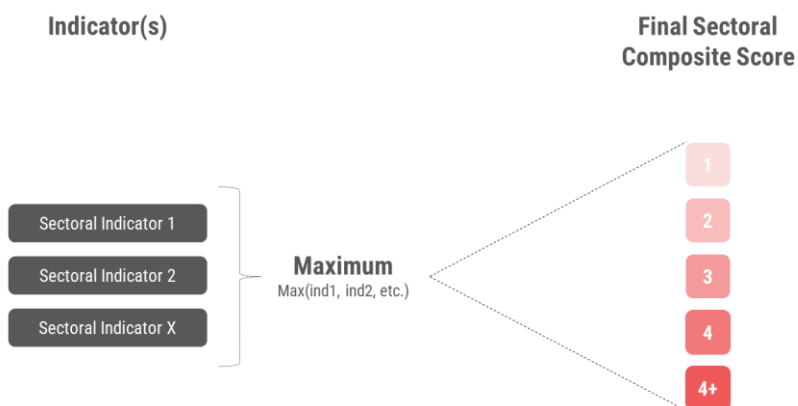| Indicator	Question(s)	Response options	Sectoral Composite does not indicate need		Sectoral Composite indicates need		
			Severity level 1	Severity level 2	Severity level 3	Severity level 4	Severity level 4+
Explosive Ordnance							
% of households having been affected by explosive ordnance in the 12 months prior to data collection	• *Are you aware of Explosive Ordnance from recent or past conflict (for example, landmines, bombs, missiles, bullets or other explosive weapons (or their metal casings and remains) from conflict) in your area that has affected you in the last 12 months?* • *How has the presence of Explosive Ordnance affected you?*	Yes, Don't know, Prefer not to answer List of explosive ordnance effects	Household is unaware of explosive ordnance in their area		Reported awareness of EX in areas but household has not been affected by it in the last 12 months	Reported awareness of EX in areas and freedom of movement affected in last 12 months	Reported awareness of EX in areas and household has been affected by it through injury or death in the last 12 months
Documentation							
% of HH where all members have official, GoS issued documentation	*Do you or any of your HH members currently need but lack any of the following GoS-issued documents?*	List of GoS-issued documents	All members of the household have all the	Lack a document and cannot afford to obtain it because of administrative fees	Lack a document because it is lost or stolen or GoS services are non-	Lack a document because it was confiscated OR they have been	

			documents they need OR Lack a document but have applied and still need to collect them	or transport costs to GoS services OR procedure too lengthy OR lack of time	functional or far or due to security concerns of entering GoS areas /facilities	denied the right to have it OR there are barriers in procedures for female members	
Reasons for not having civil documentation	*What are the reasons for not having these document(s)?*	List of reasons					
Child Separation							
% of households with at least one child (<18) not residing in the household	*Does your household have any child, son or daughter (below 18 years) not currently living in the household?*	Yes, girl(s) Yes boy(s) No Don't know Prefer not to answer	No separated children	At least one child separated because left house to study		At least one child separated for reasons indicating severe child protection concerns	At least one child separated for reasons indicating very severe child protection concerns
% of households with at least one child (<18) not residing in the household, by reason	*What are the reason(s) for why your children/child are/is not living in the household?*	List of reasons					
Perceived Protection Risks							
% of households reporting at least one member of the household felt concerned about their safety or security in the last 3 months, by	• *Kidnapping, detention, or abduction, either for exploitation or for any other purpose, including being recruited by armed or criminal groups against your will*	Never Just once or twice Several times Always	Total score between 0 and 1	Total score between 2 and 3 AND no Always response	Total score between 4 and 8 OR One Always response	Total score of 9 and above	

| frequency and type of protection risk | • *Persecution and discrimination, including the denial of the access to basic services due to any reason, such as nationality, ethnicity, religion, association with any social group, disability, age, or gender*
• *Having any member of the household engaging in risky activities due to the economic needs of the household, which may be harmful to their well-being and safety*
• *Being forced to flee home to other areas of the countries or to other country other than this one* | Don't know
Prefer not to answer | | | | | |

Annex 4: Sectoral Composites − Aggregation

With the exception of the Food Security Sectoral Composite[5], the final sectoral severity score of a household will always be the <u>maximum severity level</u> reached by the sectoral indicators (or combination of indicators) included in the Sectoral Composite framework (see Table 3 below as an example).

Figure 2: Aggregation of indicators into a final Sectoral Composite score

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Annex 5: Multi-Sectoral Needs Index – Aggregation

The final 'multi-sectoral severity level' or Multi-Sector Needs Index (MSNI) is obtained for each household as the maximum severity level the household scored across all Sectoral Composite (see **Error! Reference source not found.** below):

MSNI = max(Food Security Composite, Livelihoods Composite, WASH Composite, Health Composite, Education Composite, Protection Composite, SNFI Composite)

Table 3: Example of MSNI calculation per household

	Sectoral LSG severity score						MSNI
	Food sec	Health	WASH	Protection	Education	Etc.	
HH1	4	4	4	4	3	3	4
HH2	2	2	4	2	1	1	4
HH3	3	3	3	4+	2	1	4+
HH4	2	3	1	1	2	1	3

Annex 6: List of partners (terms of reference, data, dashboards)

Funded by:
- USAID's Bureau for Humanitarian Assistance (BHA)
- The Swiss Agency for Development and Cooperation (SDC)

Research design/tool development, consulting partners:
- The United Nations Office for the Coordination for Humanitarian Affairs (OCHA)
- Whole of Syria (WoS) country clusters

Data collection partners:
- Ashna Seydo Sherzad
- ASO
- Awda Organization
- EFS Engineering for Services Aplicant
- Hand-in-Hand
- Jasmine Association
- Jsoor Alsalam
- Lights for development
- Nawras
- Sam for development
- Snabel
- Tara for Development
- Totol
- Violet

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