REACH Lebanon Multisector Needs Assessment (MSNA) 2021

January 2022

1. Methodology
2. Sectoral key results

1.
Methodology

Methodology

Geographic coverage

- Data collected from 19th October until 4th December
- Households (HHs) level surveys
- Some specific indicators at individual level, based on HHs composition

Population group	Targeted number of surveys	Total number of surveys	Sampling strategy	Generalizability of data
Lebanese	3,918	4,232	2-stage stratified clustered sampling	Level of confidence : 95% Margin of error : 10% District level
Migrants	586	712	Snowball sampling	Indicative
PRL	565	668	Random sampling and snowball sampling	Indicative

The targets and total number of surveys include a 10% buffer.

Access restrictions:
- Districts of El Nabatieh and Bent Jbeil
- Dahiyeh area

- PRL samples • MIG samples • LBN samples — Districts ☐ Governorates
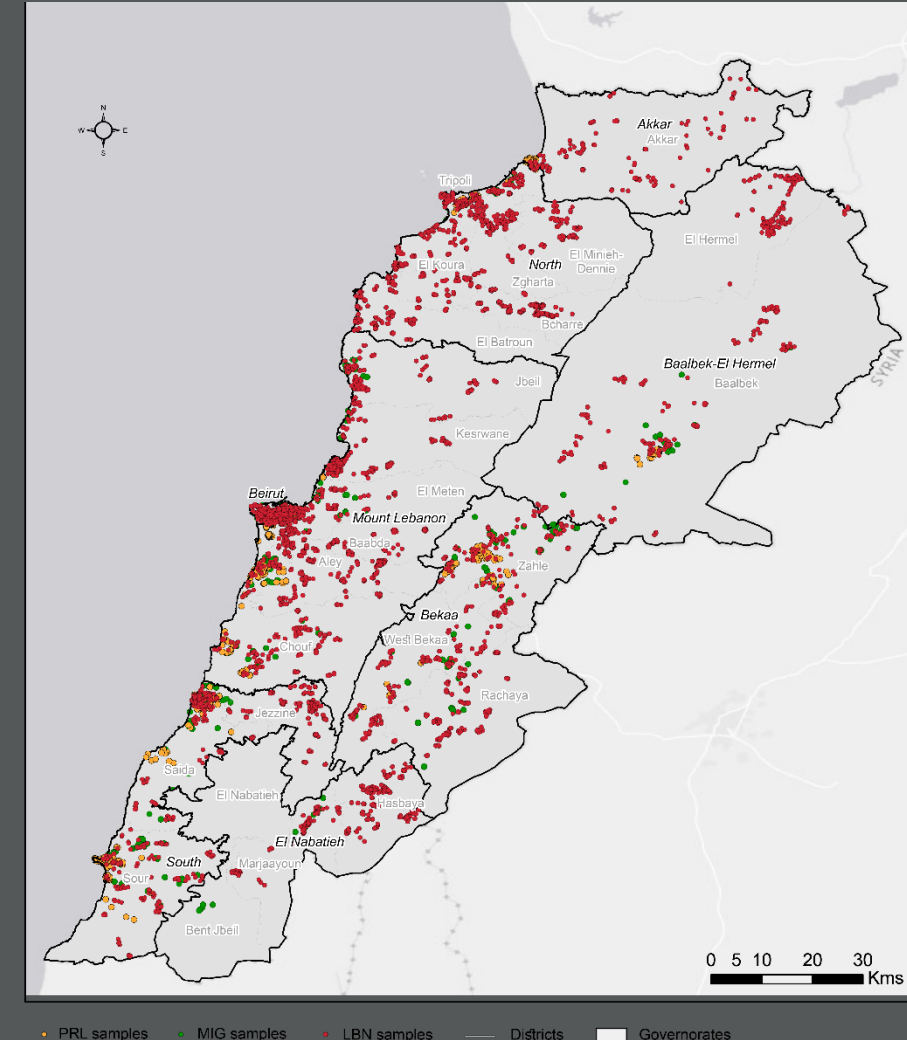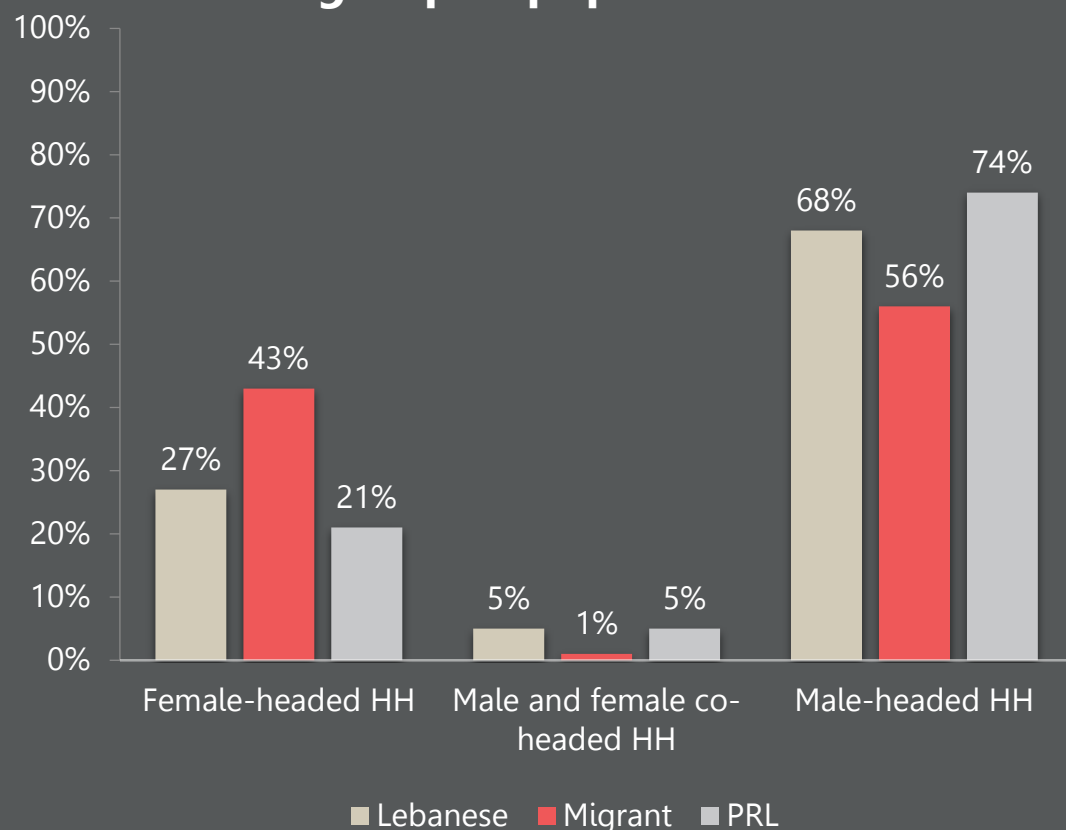
2. MSNA results

Remarks and limitations

MSNA results

1. The following results concern Lebanese, migrant and PRL HHs in covered areas only.

2. PRL and migrants' results should be considered as indicative. Findings concerning only a **subgroup** (i.e. children with disabilities, results disaggregated by gender or age, etc.) should also be considered as **indicative**, for the three assessed population groups.

3. During data collection, we received a disproportional amount of surveys refusal in high-income areas. **This might have an impact on the MSNA results,** through a potential over-representation of low and medium-income HHs in certain areas.

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Demography

% of assessed HHs by gender of head of HH, per group of population

Average age of respondents:
Lebanese: **54 years old**
Migrant: **32 years old**
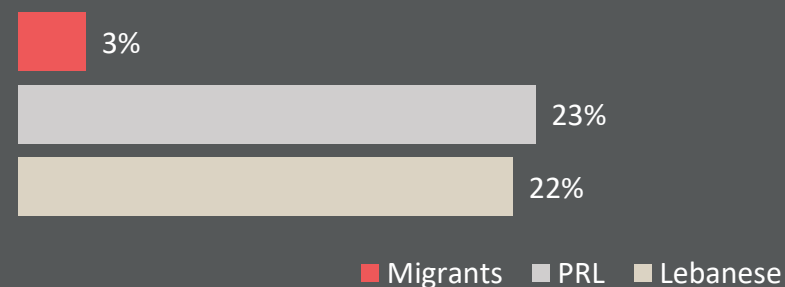PRL: **50 years old**

Average number of members in the HH:
Lebanese: **3.86**
Migrant: **1.75**
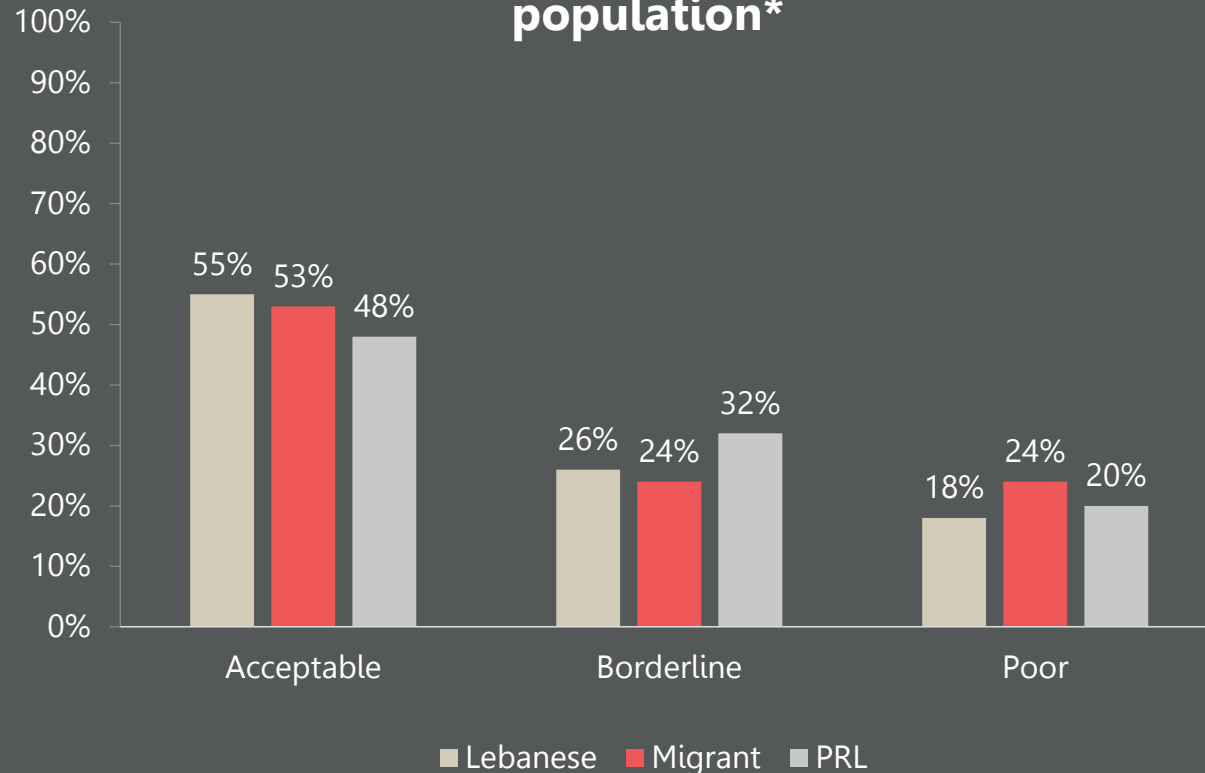PRL: **4.18**

Washington group

% of HHs reporting at least one member with disabilities, per population group

MSNA results

Food security and nutrition

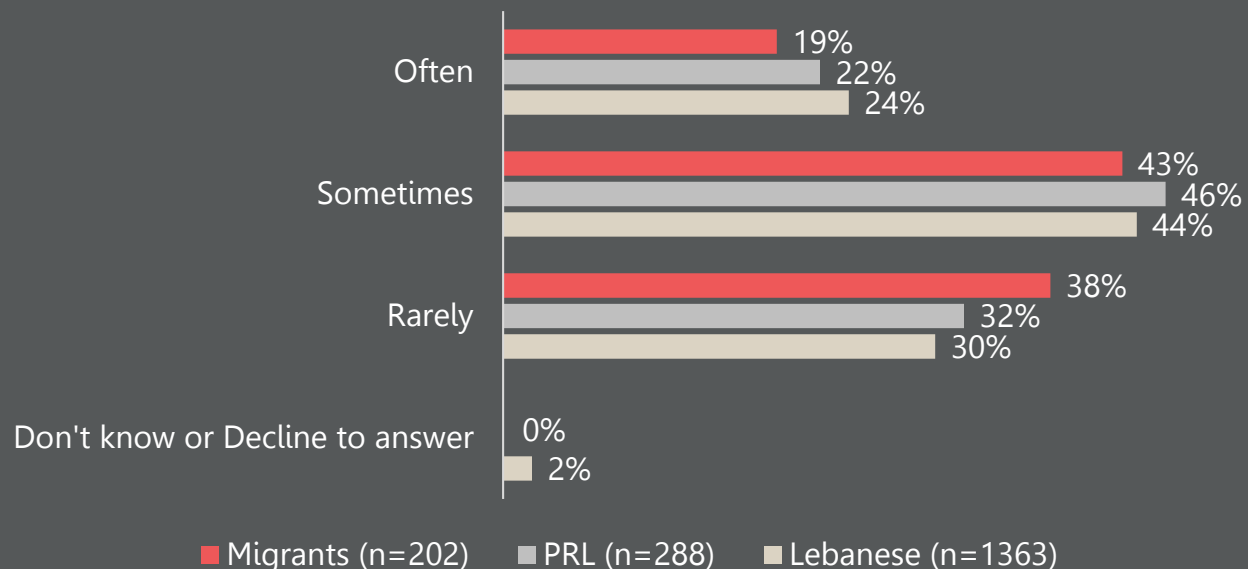**% of assessed HHs per food consumption score, per group of population***

- **43%** of PRL, **34%** of Lebanese and **25%** of migrant assessed HHs reported at least one member **bought food on credit or borrowed money to buy food** in the 30 days prior to data collection.

- **23%** of Lebanese, **22%** of PRL and **8%** of migrant assessed HHs reported at least one member **sold productive assets and/ or means of transportation to buy food** in the 30 days prior to data collection.

*The Food consumption score was calculated based on the WFP guidance: *Comprehensive Food Security & Vulnerabilities Analysis Guidelines*, January 2009.
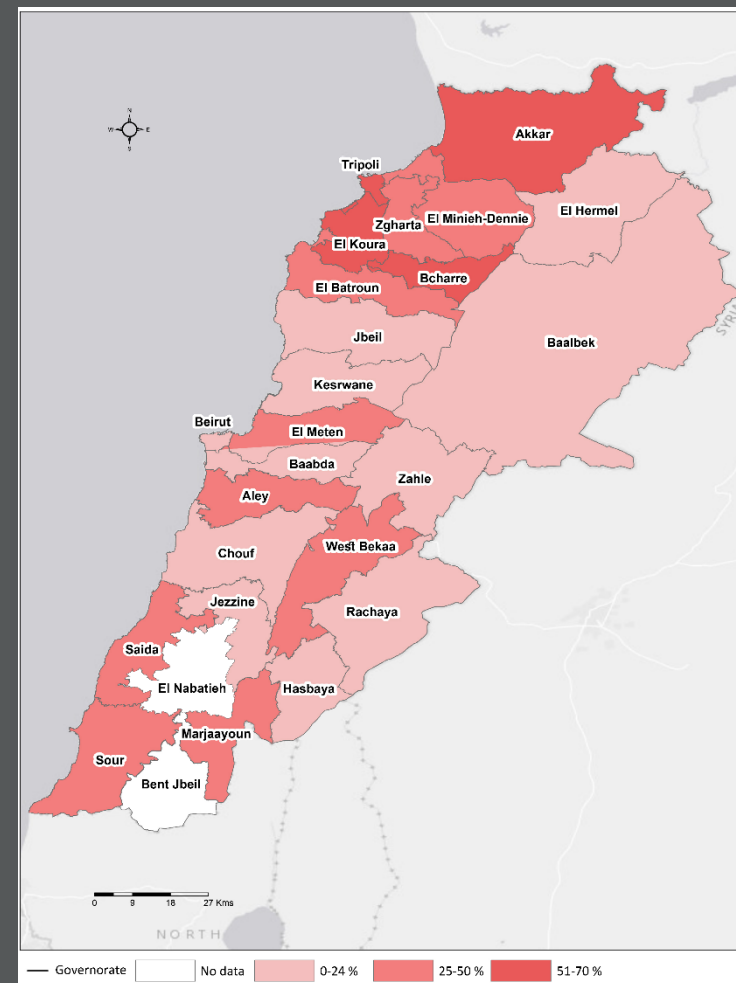
MSNA results

Food security and nutrition

32% of Lebanese, **22%** of migrant and **46%** of PRL assessed HHs reported cases when there was **no food to eat of any kind** in their house because of **lack of resources** to get food in the 30 days prior to data collection.

% of assessed HHs reporting no food of any kind to eat by recurrence of the event in the 30 days prior to data collection, by group of population*

Often
- Migrants: 19%
- PRL: 22%
- Lebanese: 24%

Sometimes
- Migrants: 43%
- PRL: 46%
- Lebanese: 44%

Rarely
- Migrants: 38%
- PRL: 32%
- Lebanese: 30%

Don't know or Decline to answer
- Migrants: 0%
- Lebanese: 2%

■ Migrants (n=202) ■ PRL (n=288) ■ Lebanese (n=1363)

% of **Lebanese** HHs reporting no food to eat of any kind in the 30 days prior to data collection, by district

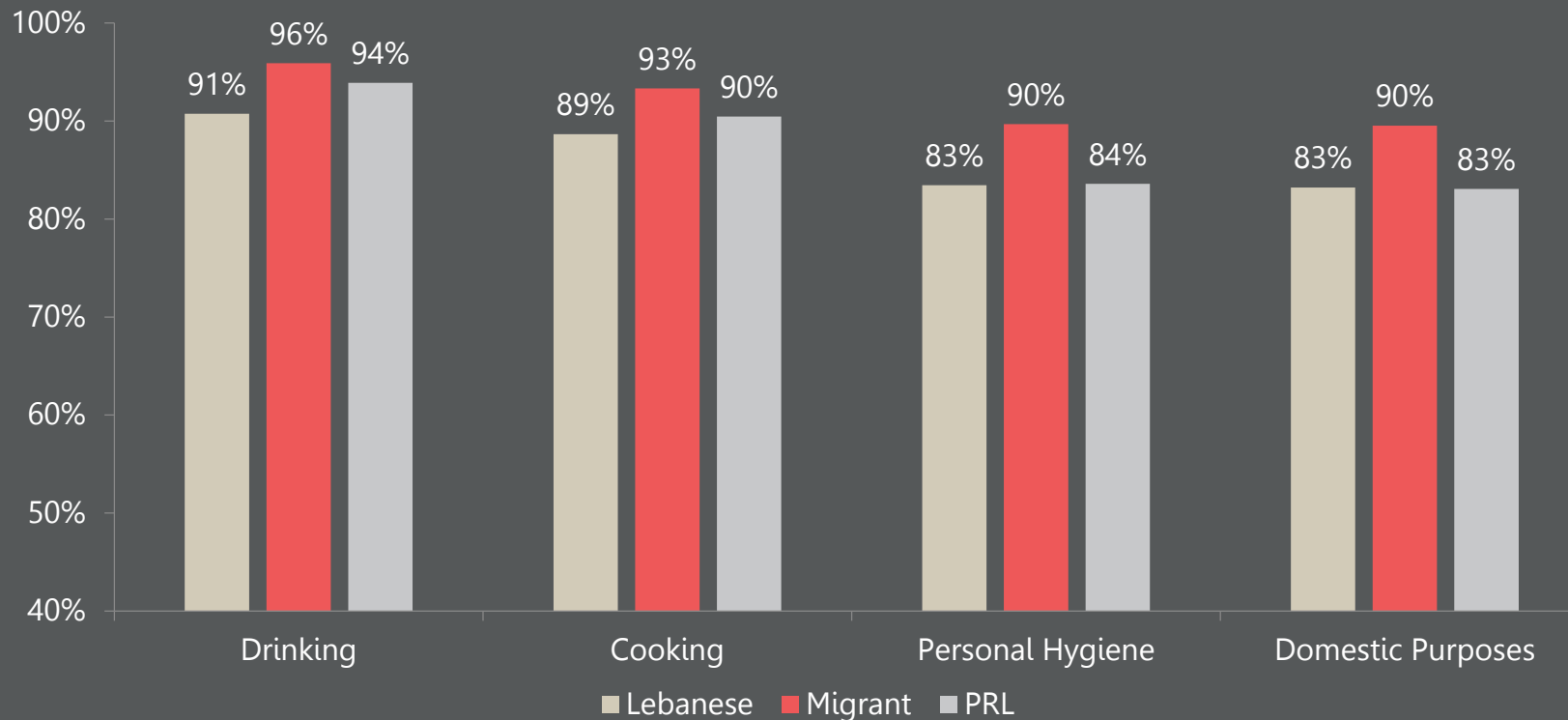Legend:
— Governorate | No data | 0-24 % | 25-50 % | 51-70 %

* Subgroup : Among HHs reporting no food to eat of any kind in their house because of a lack of resources; results should be considered as indicative.

MSNA results

WASH

% of assessed HH reporting having access to sufficient water to cover basic needs, per type of water basic needs and population groups


- The highest WASH vulnerabilities have been found for male and female co-headed households, with respectively 16%, 21%, 25% and 25% of assessed HHs reporting not enough water to drink, cook, and for personal hygiene and domestic purposes.

- In the 6 months prior to data collection, **36%** of migrant, **35%** of Lebanese and **20%** of PRL assessed HHs have spent money usually spent on other things to buy **water to cope with lack of water*.**

*Among HHs reporting they were unable to access enough water to cover all their basic water needs; findings concerning only a subgroup should also be considered as indicative, for the three assessed population groups. Lebanese= 475 HHs, Migrant= 80 HHs and PRL= 107 HHs.

MSNA results

Hygiene

% of Lebanese HHs reporting not enough water to cover personal hygiene needs in the 30 days prior to data collection, by district
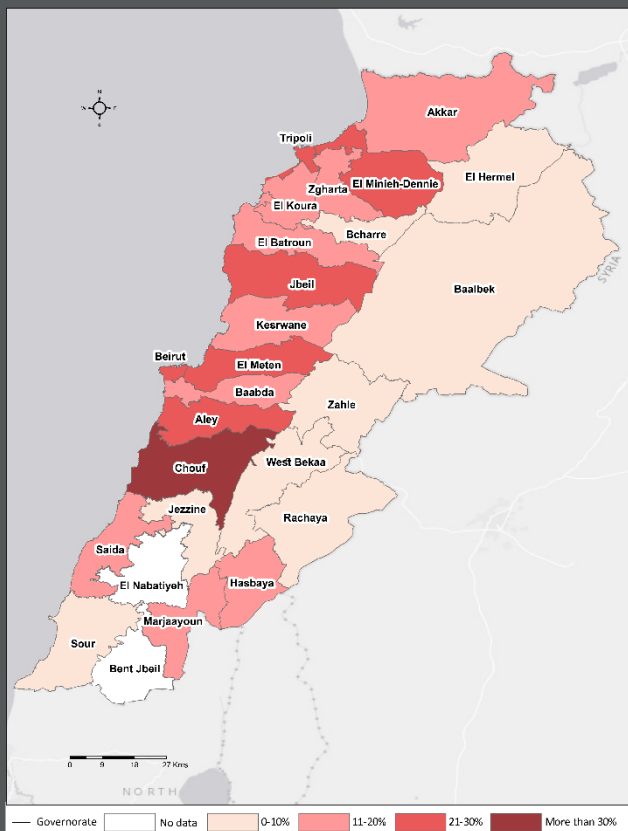
- 16% of migrant, 11% of Lebanese and 9% of PRL assessed HHs reported the **reduction of NFI consumption for personal hygiene** as their main coping strategy to issues related to hygiene items in the 30 days prior to data collection.
- 53% of PRL, 44% of Lebanese and 20% of migrants assessed HHs reported relying on **less preferred types of menstrual items** as their main coping strategies to issues related to menstrual items, in the 30 days prior to data collection.
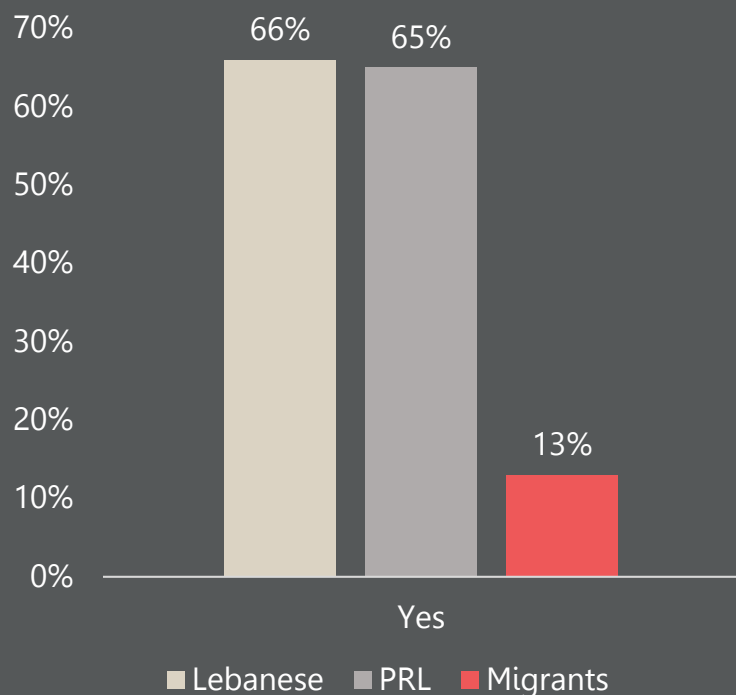
Sanitation

- 14% of Lebanese HHs reported a **hand-dug hole in the ground** as their main draining system for toilet/latrine wastewater.
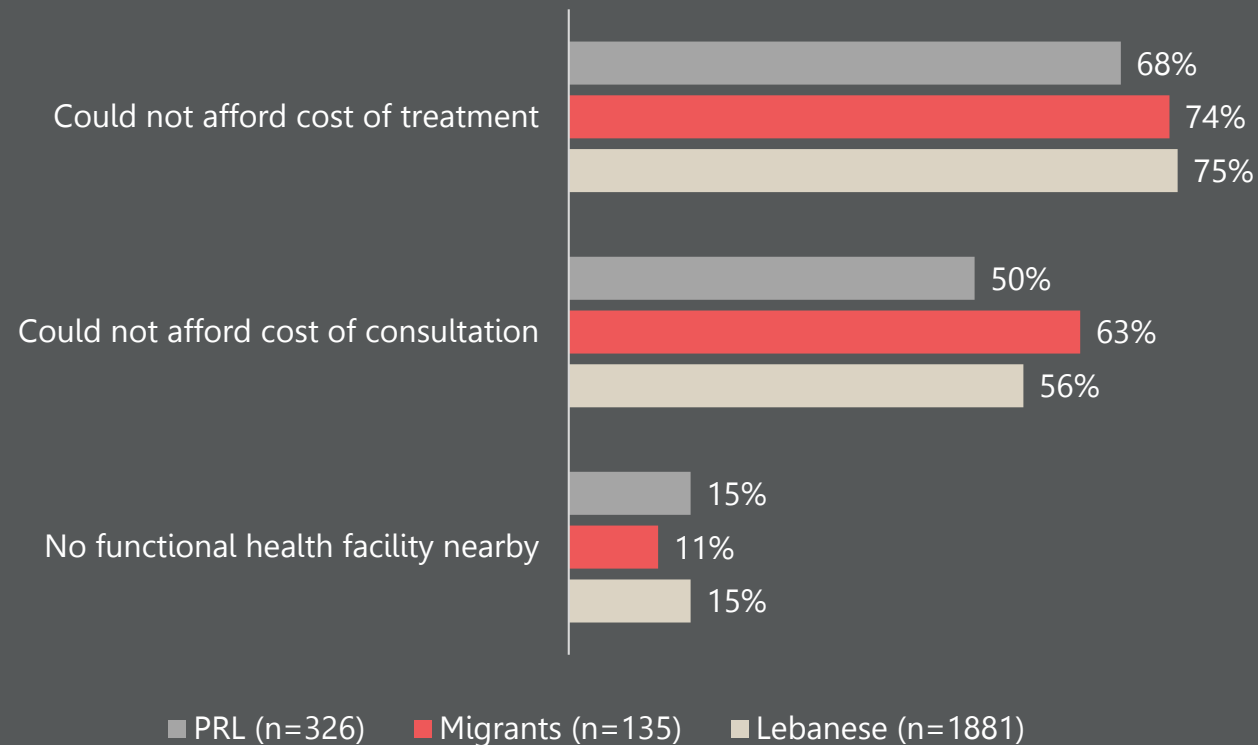
MSNA results

Health

% of assessed HHs reporting at least one member with a chronic illness

- Lebanese
- PRL
- Migrants

Main barriers reported by assessed HHs that prevented them from accessing health care in the 3 months prior to data collection*;**

Could not afford cost of treatment
- 68%
- 74%
- 75%

Could not afford cost of consultation
- 50%
- 63%
- 56%

No functional health facility nearby
- 15%
- 11%
- 15%

- PRL (n=326)
- Migrants (n=135)
- Lebanese (n=1881)

*Multiple choices; the total of percentages can exceed 100%
**Subgroup: HHs reporting at least one member needed to access health care in the 3 months prior to data collection; results should be considered as indicative.

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Health

Main coping mechanisms reported by HHs who encountered barriers to access health care in the 3 months prior to data collection*;**

Went to the pharmacy instead of the doctor or clinic
- 10%
- 25%
- 18%

Borrowed money to afford medical care
- 10%
- 9%
- 7%

Delayed or canceled doctors visit or other treatment
- 4%
- 15%
- 17%

■ Migrants (n=128) ■ PRL (n=312) ■ Lebanese (n=1833)

- **87%** of Lebanese, **86%** of PRL and **50%** of migrant HHs reported having experienced **barriers that prevented them from accessing medication** when needed during the 3 months prior to data collection.

% of Lebanese HHs reporting the inaccessibility of medication in health facility as main barrier to access medication, per district

— Governorate   No data   20-40 %   41-60 %   More than 61%

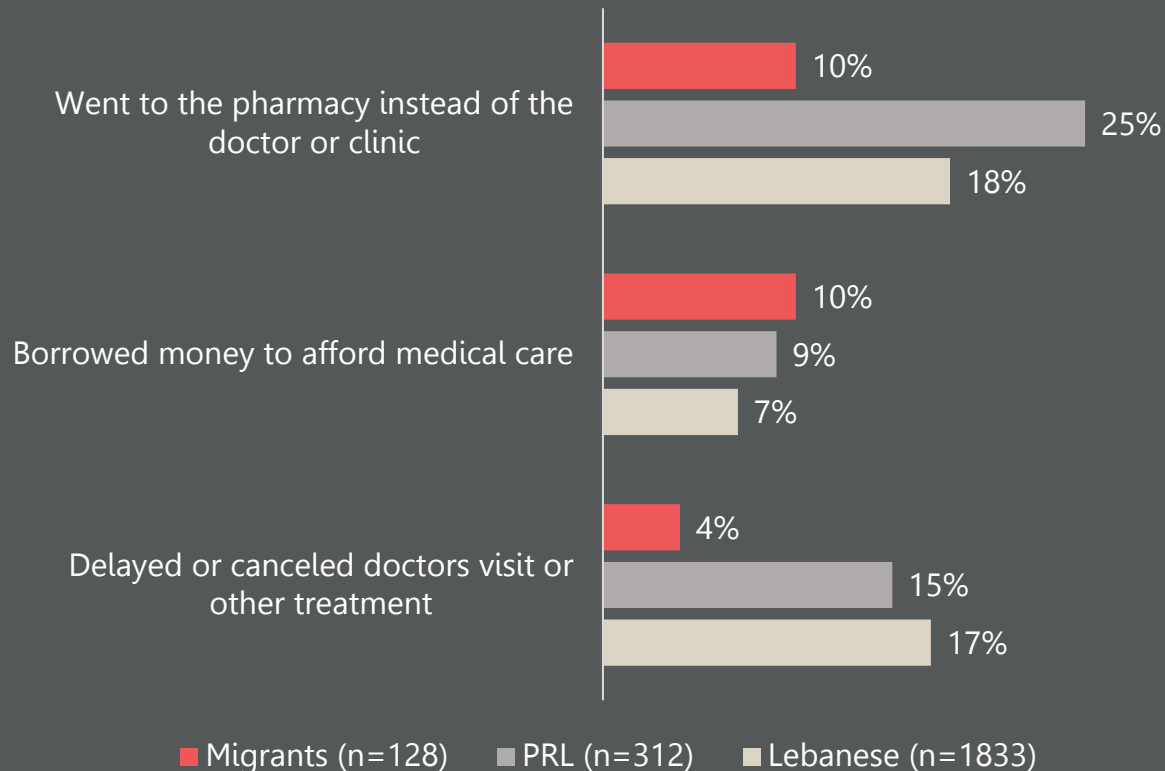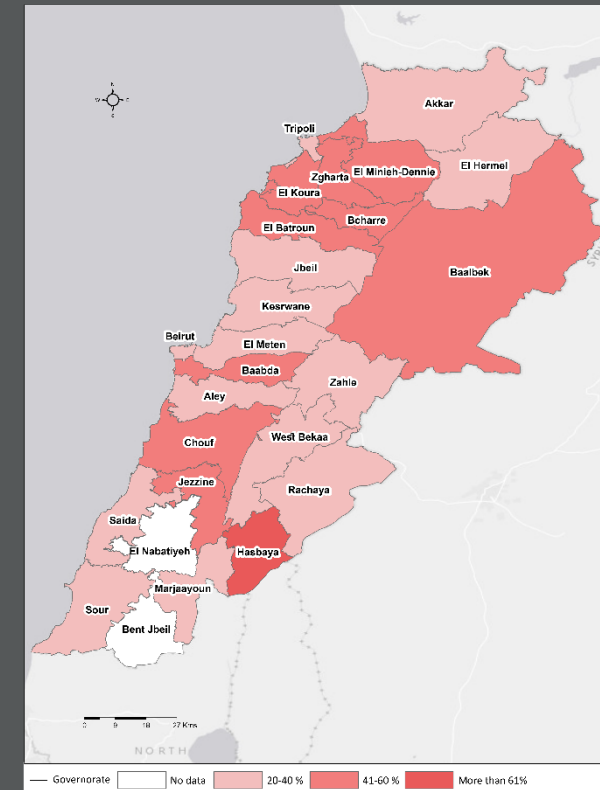*Multiple choices; the total of percentages can exceed 100%
**Subgroup: HHs reporting at least one member needed to access health care in the 3 months prior to data collection; results should be considered as indicative.
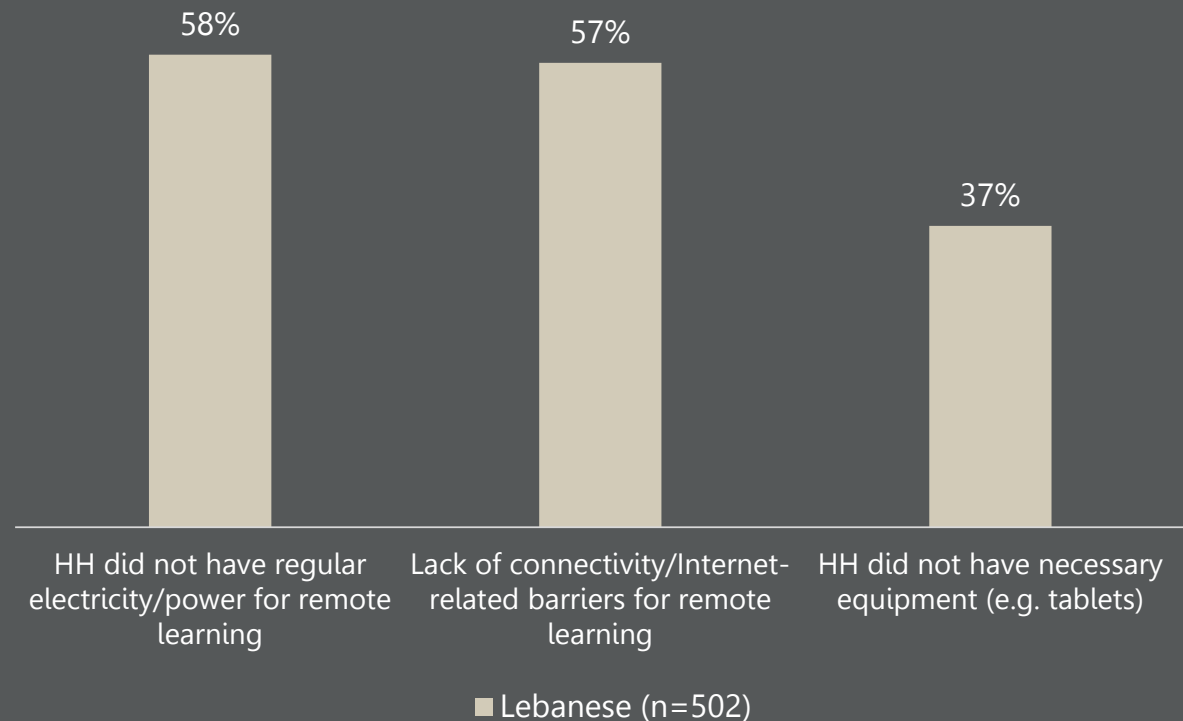
MSNA results

Education*

This section contains findings on 3 555 Lebanese, 774 PRL, and 185 migrant children in the assessed HHs.

- 88% of Lebanese, 81% of PRL, and 57% of migrant school-aged children **were reportedly enrolled** during the 2020-2021 school year.

- Among the enrolled children, 90% of Lebanese, 91% of PRL, and 85% of migrant children **reportedly had access to distance learning** when schools had been closed during the 2020-2021 school year**.

- Among the children reported as not regularly attending school in presence or at distance, 14% of Lebanese, 4% of PRL, and 1% of migrant children **had reportedly dropped out of school** during the 2020-2021 school year***.

Among children reported as dropping out of school, main to explain their drop out during the school year 2020-2021*;******

HH did not have regular electricity/power for remote learning	Lack of connectivity/Internet-related barriers for remote learning	HH did not have necessary equipment (e.g. tablets)
58%	57%	37%

■ Lebanese (n=502)

* Only households with children aged between 4 and 18 years old were asked questions; results should be considered as indicative for this section
** All question related to attendance (psychical or distant) were only asked to respondents who reported children enrolled in formal schools for the school year 2020-2021; the data mentioned is only indicative. Lebanese n= 3147; PRL n= 624; Migrant n= 104.
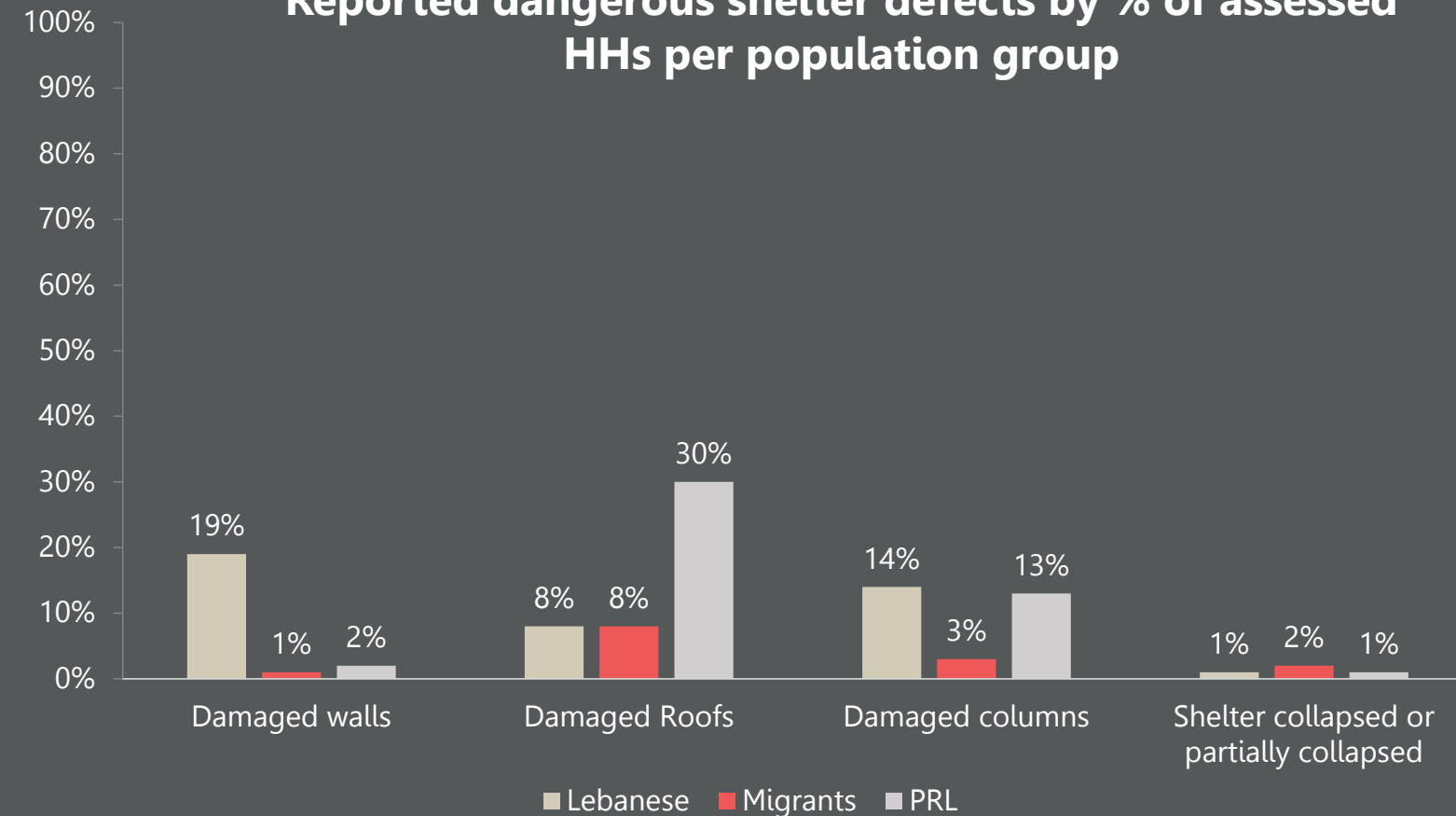*** The sample for PRL and migrants was not big enough to obtain reliable data (PRL n=94; Migrants n=94), reason why only Lebanese results are being shared.
****Multiple choices question, the total of percentages can exceed 100%

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Shelter

Reported dangerous shelter defects by % of assessed HHs per population group

Legend: ■ Lebanese ■ Migrants ■ PRL

Categories and values:
- Damaged walls: 19% (Lebanese), 1% (Migrants), 2% (PRL)
- Damaged Roofs: 8% (Lebanese), 8% (Migrants), 30% (PRL)
- Damaged columns: 14% (Lebanese), 3% (Migrants), 13% (PRL)
- Shelter collapsed or partially collapsed: 1% (Lebanese), 2% (Migrants), 1% (PRL)

- 98% of Lebanese, 98% of PRL and 89% of migrant assessed HHs reported living in an apartment, house or room, which are considered as **sustainable shelter types.**

- 26% of PRL, 19% of Lebanese and 15% of migrant assessed HHs reporting renting their apartment* had an **informal verbal lease agreement.** This may include increasing risks of eviction as the country is currently facing an considerable inflation.

*Subgroup: HHs reporting renting their apartment/house. Lebanese HHs n=836; PRL HHs n=214; Migrant HHs n=254. Results should be considered as indicative.

MSNA results

Livelihoods

- **63%** of PRL, **62%** of Lebanese and **37%** of migrant assessed HHs reported facing **challenges affording basic needs** as a result of lost or reduced employment.

- **23%** of Lebanese, **16%** of PRL, and **6%** of migrant assessed HHs reported **savings as their primary income source** in the 30 days prior data collection to afford basic needs.

- The main reason reported by assessed HHs* from the three population groups for owing debts was to cover **basic household expenditures** (Lebanese HHs 48%, PRL and migrant HHs 50%).

Category of income reported by HHs in the 30 days prior to data collection, per population group**

From 12 million Lebanese Pound (LBP) to less than 25 million LBP
- PRL: 1%
- Migrant: 1%
- Lebanese: 2%

From 2,4 million LBP to less than 12 million LBP
- PRL: 36%
- Migrant: 24%
- Lebanese: 44%

From 300,000 to less than 2,4 million LBP
- PRL: 51%
- Migrant: 59%
- Lebanese: 44%

■ PRL ■ Migrant ■ Lebanese
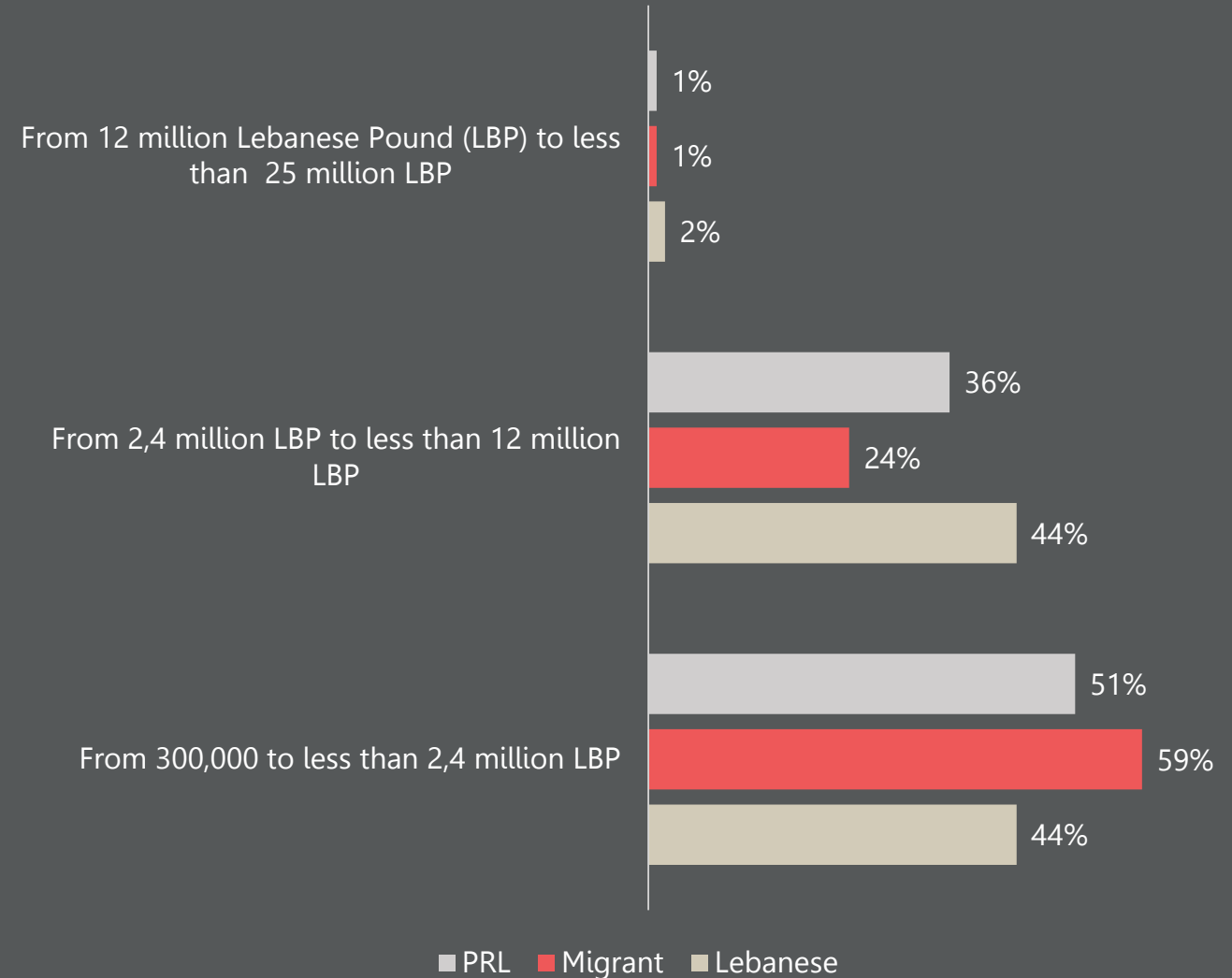
*Subgroup: HHs reporting owing debts. Lebanese HHs n=1805; PRL HHs n=317; Migrant HHs n=206. Results should be considered as indicative.
**The graph does not include results for "Decline to answer" and "Do not know" options; the total of the percentages can differ from 100%

MSNA results

Protection

Gender-Based Violence (GBV)

More than half of assessed HHs among the three population groups reported no main safety and security concerns for women and girls.

89% of migrant, 87% of Lebanese and 79% of PRL HHs reported no area where women and girls from their community feel unsafe.

- 49% of PRL, 38% of Lebanese and 31% of migrant HHs reporting women feeling unsafe in their community reported that **women feel unsafe in markets*.**

Child protection

2% of Lebanese and 1% of PRL assessed HHs reported school aged children working inside or outside of home, whose **work disrupted their education** for the school year 2020-2021**.

Information

4% of migrant assessed HHs reported information to **assistance to return to their country of origin** as their preferred type of information to be received from humanitarian aid actors.

*Subgroup: HHs reporting women feeling unsafe. Lebanese HHs n=4088; PRL HHs n=648; Migrant HHs n=423. Results should be considered as indicative
**Subgroup: Asked to respondents who reported children enrolled in formal schools for the school year 2020-2021. Lebanese n=502;PRL n=94; Migrants n=17. Results should be considered as indicative

MSNA results

Accountability to Affected Populations (AAP)

34% of PRL, 14% of Lebanese and 5% of migrant HHs **reported having received some assistance** from a formal governmental or non-governmental actor in the three months prior to data collection

Three main types of assistance received by HHs who reported having received assistance in the 3 months prior to data collection, per population group*
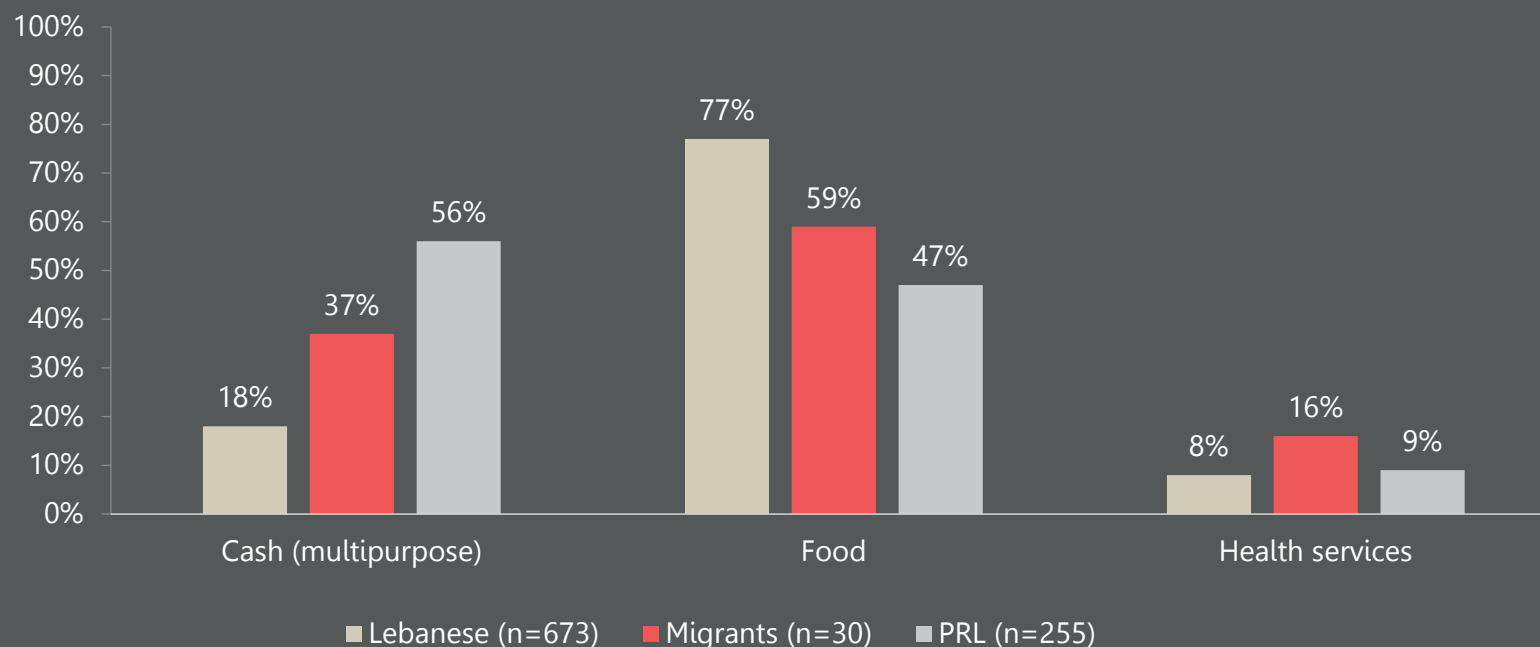
* Subgroup: HHs reporting having received assistance in the 3 months prior to data collection; results should be considered as indicative

MSNA Timeline

Funded by
European Union
Humanitarian Aid

JUNE - SEPTEMBER 2021

OCTOBER – NOV 2021

NOV 2021 – JAN 2022

JAN – MARCH 2022

Research design

Data collection

Analysis

Reporting

- Definition of research questions, methodology and scope of the assessment
- **Consultation with sectors** to identify key indicators to collect
- Development of tools and constitution of the MSNA team

- **National coverage** (24/26 districts)
- **3 population groups** assessed (Lebanese, PRL and migrants
- **9 partners** helping REACH collecting data

- Consultation with all sectors to build a severity scale
- Creation of scripts for People in Need (PiN) calculation, analysis and complex indicators
- Joint analysis and interpretation of results, notably through stakeholders' workshops

- Preliminary results presentation
- Factsheets / static dashboard and maps
- Final report

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THANK YOU FOR YOUR ATTENTION

Annex: SMART Surveys

Annex: SMART Surveys

Malnutrition in children & women in Lebanon, 2021

- 5 % of Mothers had MAM
- 42% of WRA with Anemia
- 1.8% GAM highest in Palestinian (4%)
- Stunting in Syrian (25%) vs 7% national
- 70% of stunted children are Syrian
- 41.3% of children with Anemia

Mothers Acute Malnutrition
WRA Anemia
Child anemia
Prevalence of Overweight
Prevalence of Stunting
Prevalence of wasting

■ Palestinian (299) ■ Syrian (329)
■ National (2592)
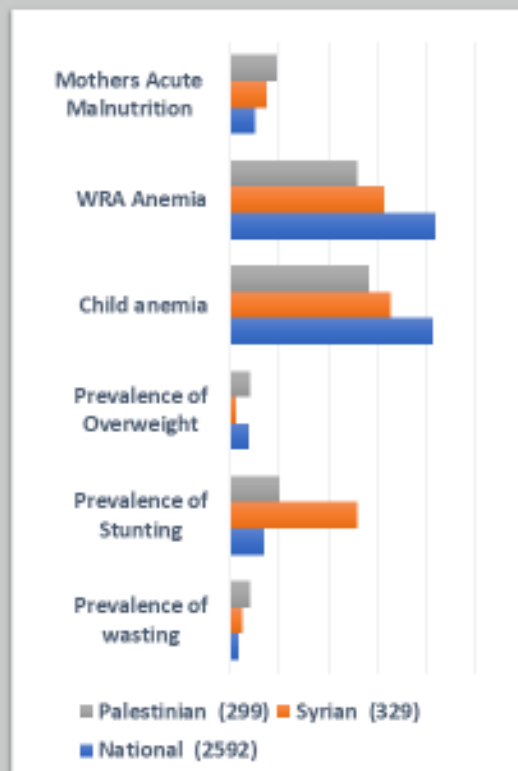
Diets of young Children

70% missing the Exclusive Breastfeeding

90% deprived of MAD

80% missing MMF, and 70% deprived of MDD

The Vit A and Protein sources are missing the diets of all children

Minimum acceptable diet 6-23...
Minimum dietary diversity 6-23...
Minimum meal frequency
Introduction of solid, semi- solid...
Continued breastfeeding 12-23...
Exclusive breastfeeding
Early initiation (EIBF)

FOOD GROUPS CONSUMED

Dairy products
Grains, roots, tubers...
Breast milk
Other fruits and...
Vitamin-A rich fruits...
Eggs
Flesh foods
Pulses

CHILDREN (%)

■ National ■ Palestinian ■ Syrian