

Food Security Needs Assessment

Grant Proposal for the United Nations Office for the Coordination of Humanitarian Affairs (OCHA)

May 2025

Executive Summary

This comprehensive food security needs assessment presents findings from multiple assessments conducted in the region, including detailed analyses from Jnah and Bourj al Barajneh camp areas, as well as critical wartime data collected during October-January. The assessment reveals significant food security challenges across the assessed areas, with varying levels of severity before, during, and after the conflict period.

Key findings indicate that while 57.4% of households have acceptable food consumption patterns under normal conditions, 84.3% exhibit high Coping Strategy Index values, indicating severe food insecurity stress. During the conflict period, food needs escalated dramatically with 98.8% of individuals requiring food assistance. The assessment identified vulnerable demographic groups, including 31.4% children and adolescents (0-18 years) and 4.6% elderly (65+ years).

This assessment provides a strong evidence base for humanitarian interventions in the region, with recommendations focusing on immediate food assistance, cash-based interventions, livelihood support, and long-term resilience building. The proposed interventions align with OCHA's humanitarian principles and the broader objectives of the Humanitarian Programme Cycle.

Executive Summary Dashboard

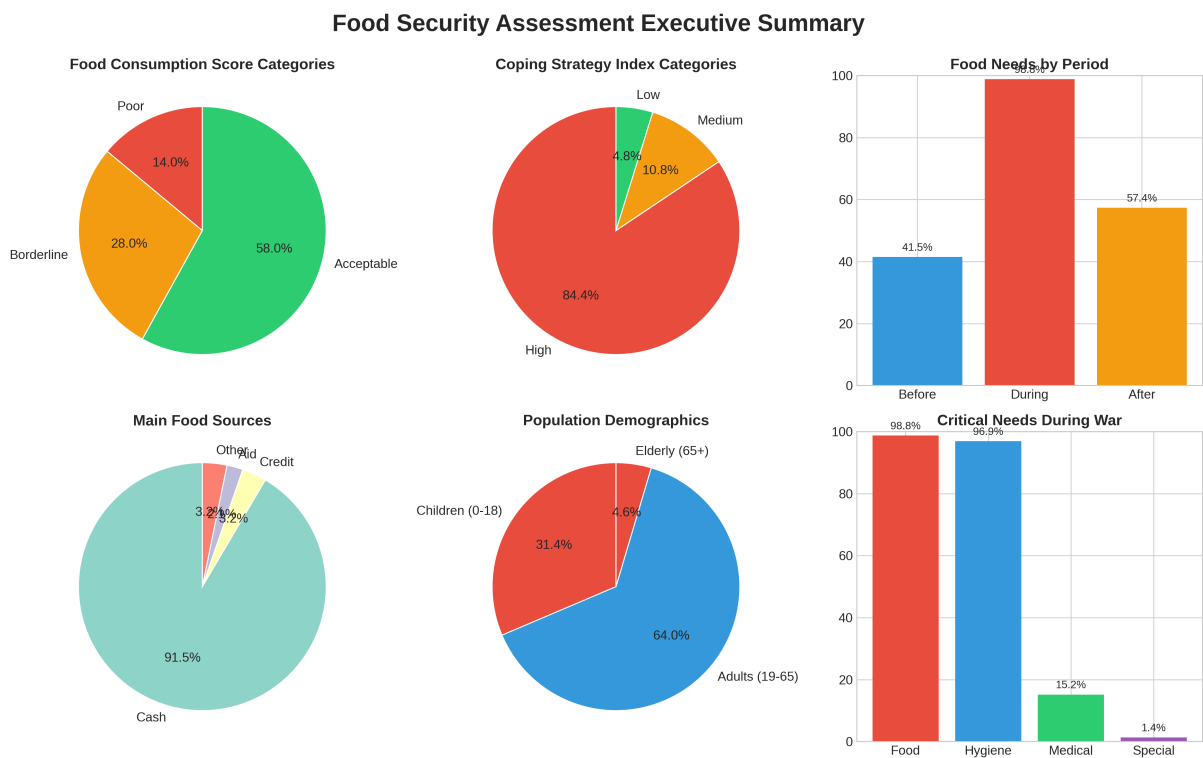


Figure 1: Executive Summary Dashboard of Key Food Security Indicators

Context and Background

The assessed region has been experiencing increased vulnerability due to various socioeconomic factors, further exacerbated by conflict during the October-January period. This assessment was conducted as part of a broader initiative to understand the humanitarian needs in the region and to inform a comprehensive grant proposal to OCHA.

The assessment follows OCHA's Humanitarian Needs Overview (HNO) standards and methodologies to ensure alignment with international humanitarian frameworks. It specifically focuses on food intake patterns, sources of food, consumption of different food groups, and coping strategies employed by households when facing food shortages.

Methodology

The assessment utilized complementary data collection approaches across different time periods:

- **Regular Assessment:** Structured household surveys collecting detailed food security data from households in Jnah and Bourj al Barajneh camp areas. The surveys captured information on food sources, consumption of food groups, and coping strategies.
- **Wartime Assessment (Oct-Jan):** A rapid assessment conducted during the conflict period, covering 525 households (2,416 individuals), focusing on basic demographic information and critical needs identification.

The data was analyzed using internationally recognized food security measurement tools:

- **Food Consumption Score (FCS):** A composite score based on dietary diversity, food frequency, and nutritional importance of different food groups. Households were categorized as having Poor (≤ 21), Borderline (>21 to ≤ 35), or Acceptable (>35) food consumption.
- **Coping Strategy Index (CSI):** A measure of the severity and frequency of coping strategies employed by households when facing food shortages.

Households were categorized as having Low (≤ 3), Medium (> 3 to ≤ 9), or High (> 9) coping strategy indices.

Key Findings

Food Consumption Patterns

Analysis of food consumption patterns revealed varying levels of dietary diversity and frequency across the assessed areas:

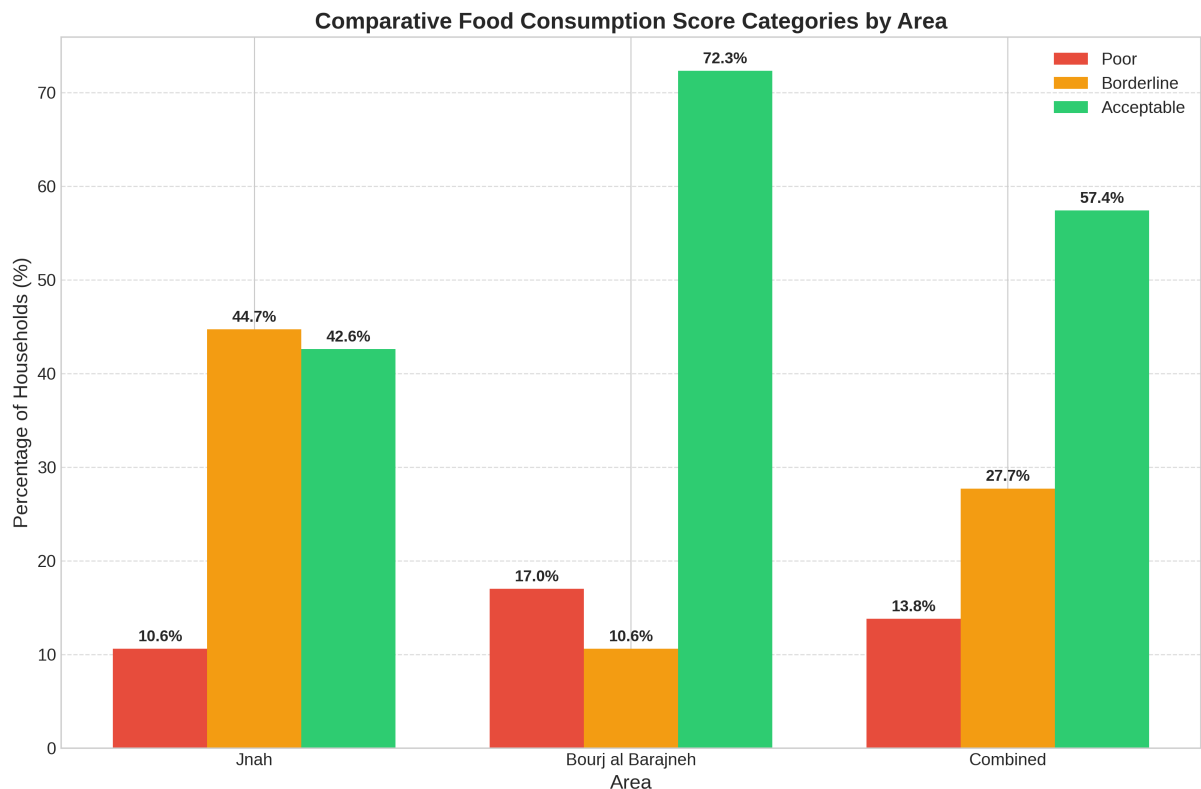


Figure 2: Comparative Food Consumption Score Categories by Area

The most frequently consumed food groups are cereals, oils and fats, and spices, while the least frequently consumed are meat, fish, eggs, fruits, and legumes. This pattern indicates a diet heavily reliant on carbohydrates and fats, with limited consumption of protein-rich foods and micronutrient-dense fruits and vegetables, suggesting potential nutritional deficiencies.

Coping Strategies

The assessment identified widespread use of negative coping strategies among households in the region:

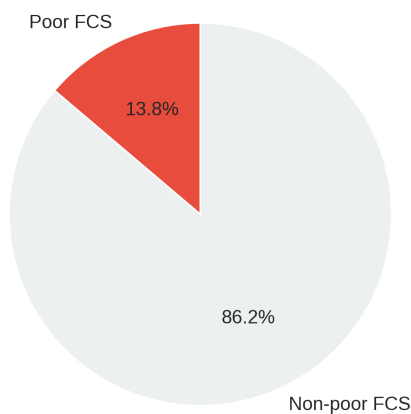
Average Coping Strategy Index: 19.0 (indicating high levels of food insecurity)

CSI Categories: Low (4.8%), Medium (10.8%), High (84.3%)

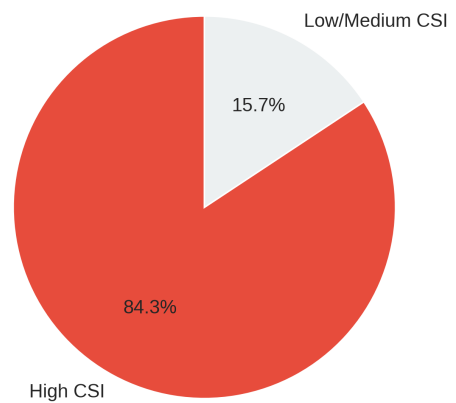
The most commonly employed coping strategies include reducing the number of meals eaten in a day, relying on less preferred and less expensive foods, reducing portion sizes, borrowing food, and restricting adult intake so children can eat. The high prevalence of these strategies indicates severe food access challenges.

Key Food Security Findings

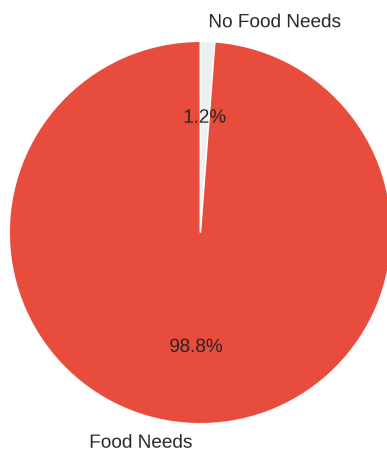
Households with Poor Food Consumption



Households with High Coping Strategy Index



Population with Food Needs During War



Main Source of Food

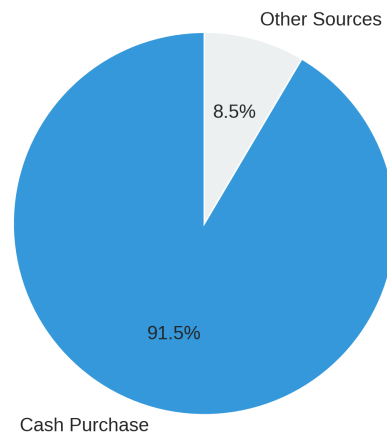


Figure 3: Key Food Security Findings Infographic

Wartime Assessment Findings (Oct-Jan)

The wartime assessment provides critical insights into the population's needs during the conflict period:

Demographic Profile

Total households assessed: 525

Total individuals: 2,416

Average household size: 4.6 persons

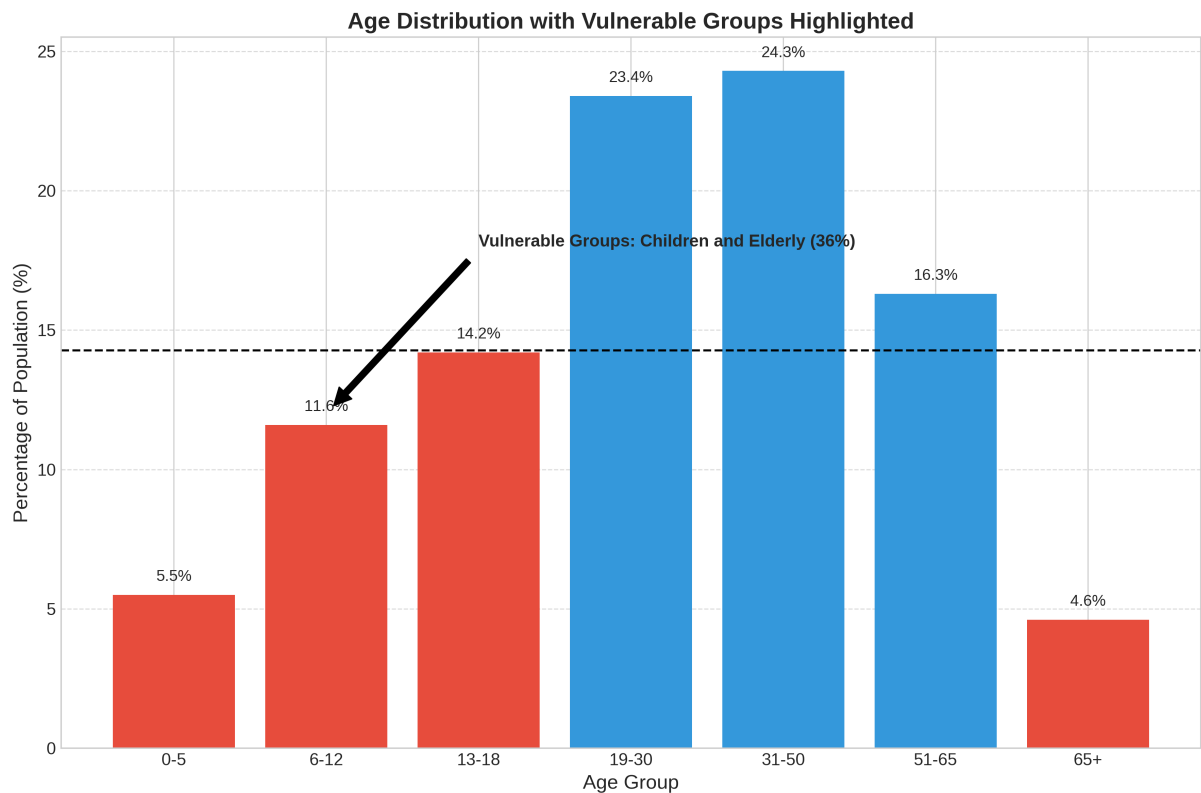


Figure 4: Age Distribution with Vulnerable Groups Highlighted

Critical Needs

Food needs: 98.8% of individuals

Hygiene needs: 96.9% of individuals

Medical needs: 15.2% of individuals

Special needs: 1.4% of individuals

Comparative Analysis: Before, During, and After War

The comparison between regular and wartime assessments provides valuable temporal context on how food security needs evolved throughout the crisis:

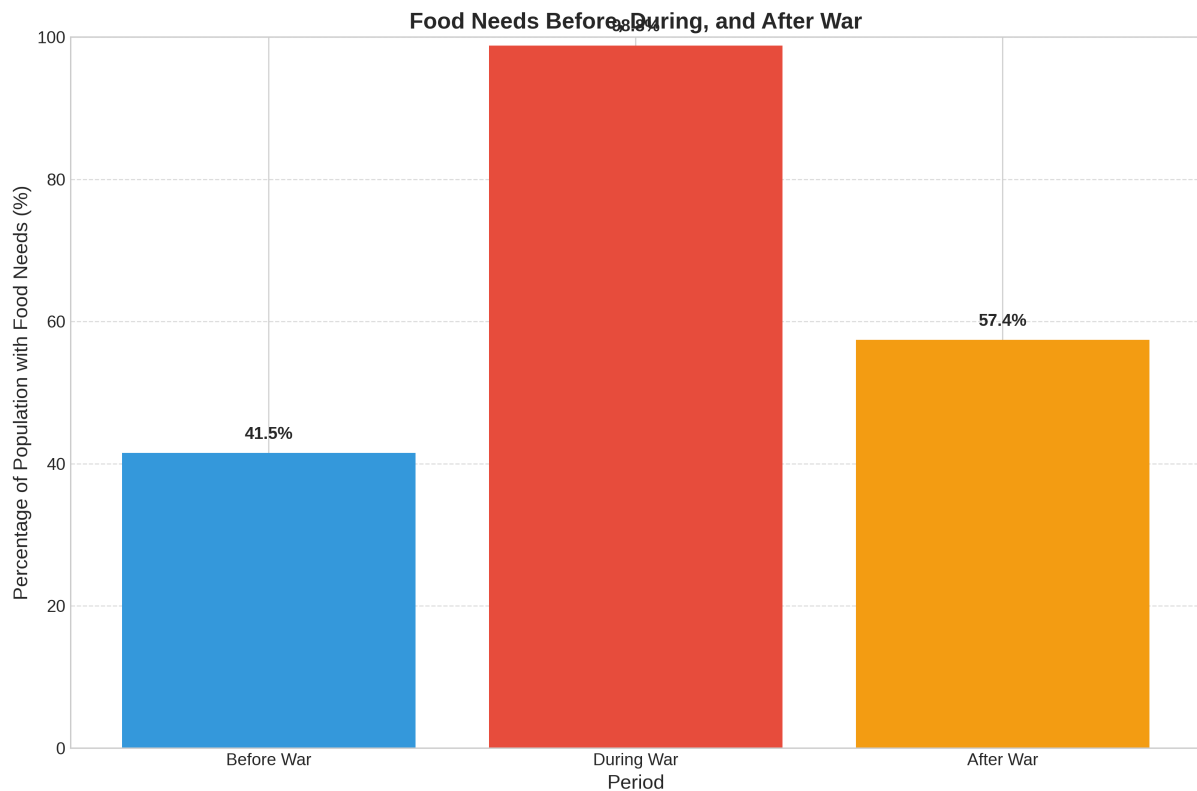


Figure 5: Food Needs Before, During, and After War

Key observations from the comparative analysis:

- **Increased vulnerability:** The wartime data shows a dramatic increase in food needs (98.8%) compared to the regular assessment, where 41.5% had poor or borderline FCS.
- **Demographic insights:** The wartime assessment reveals that 31.4% of the affected population are children and adolescents (0-18 years), highlighting the significant impact on vulnerable age groups.
- **Multiple needs:** The high prevalence of both food and hygiene needs during the conflict period (>96%) demonstrates the compounding nature of crises, where multiple basic needs are compromised simultaneously.

- **Recovery challenges:** Post-war data shows improvement from crisis levels but remains worse than pre-war conditions, indicating the long-lasting impact of conflict on food security.

Severity of Needs

Based on the combined assessment findings, the severity of food security needs in the region can be categorized as follows:

Critical Needs (High Severity)

Households with Poor FCS and High CSI (approximately 13.8%): These households demonstrate both inadequate food consumption and severe coping strategies, indicating acute food insecurity requiring immediate intervention.

Households with High CSI (84.3%): The extremely high proportion of households employing severe coping strategies indicates widespread food access challenges that require urgent attention.

Wartime food needs (98.8%): The near-universal need for food assistance during the conflict period represents an acute crisis requiring immediate response.

Significant Needs (Moderate Severity)

Households with Borderline FCS (27.7%): These households are at risk of slipping into poor food consumption if their situation deteriorates, requiring preventive interventions.

Households relying on credit for food (3.2% primary, 4.3% secondary): Dependence on credit indicates economic vulnerability that may worsen over time if not addressed.

Wartime medical needs (15.2%): The significant proportion of individuals requiring medical assistance during conflict represents an important secondary need requiring attention.

Recommendations

Based on the combined assessment findings, the following recommendations are proposed for humanitarian interventions in the region:

Immediate-Term Recommendations (0-3 months)

Emergency Food Assistance: Provide targeted food assistance to households with poor FCS, high CSI, and those identified in the wartime assessment, focusing on nutritionally balanced food baskets that address identified dietary gaps.

Cash-Based Interventions: Implement cash or voucher programs to enhance food purchasing power, particularly for households relying on credit for food purchases and those with borderline FCS.

Hygiene Kits Distribution: Address the high prevalence of hygiene needs (96.9% during conflict) through distribution of hygiene kits to prevent public health crises.

Medium-Term Recommendations (3-6 months)

Livelihood Support: Develop and implement livelihood enhancement programs to increase household income and reduce dependence on cash purchases as the sole food source.

Community Food Systems: Establish community gardens or cooperative food production initiatives to increase access to fresh vegetables and fruits, addressing the identified dietary diversity gaps.

Age-Appropriate Interventions: Develop targeted programs for vulnerable age groups identified in the wartime assessment, including supplementary feeding for children and specialized support for the elderly.

Long-Term Recommendations (6-12 months)

Resilience Building: Implement comprehensive resilience-building programs that address the underlying economic vulnerabilities contributing to food insecurity.

Social Protection: Advocate for and support the development of social protection mechanisms that provide safety nets for vulnerable households.

Preparedness Planning: Develop community-based emergency preparedness plans to mitigate the impact of future crises on food security and basic needs.

Conclusion

The combined food security assessment in the region reveals a concerning situation characterized by borderline food consumption patterns and widespread use of negative coping strategies during normal periods, with dramatically increased needs during conflict. While 57.4% of households maintain acceptable food consumption under normal conditions, they do so through unsustainable coping mechanisms that may lead to deteriorating conditions over time.

The wartime assessment data provides critical temporal context, demonstrating how quickly food security can deteriorate during crisis, with 98.8% of individuals requiring food assistance during the October-January conflict period. The demographic profile highlights the significant impact on vulnerable groups, with 31.4% of the affected population being children and adolescents.

The findings highlight the need for a multi-faceted response that addresses immediate food needs while also tackling the underlying economic vulnerabilities that drive food insecurity. By implementing the recommended interventions and establishing robust monitoring systems, humanitarian actors can effectively support the community in achieving sustainable food security, even in the face of periodic crises.

This assessment provides a strong evidence base for the OCHA grant proposal, demonstrating both the severity of needs and a clear pathway for effective humanitarian response. The proposed interventions align with OCHA's humanitarian principles and the broader objectives of the Humanitarian Programme Cycle.

Annexes

Annex 1: Methodology Details

Food Consumption Score (FCS) Calculation:

The FCS is calculated by multiplying the frequency of consumption of each food group by its corresponding weight, then summing these scores:

$$\text{FCS} = (\text{starches} \times 2) + (\text{pulses} \times 3) + (\text{vegetables} \times 1) + (\text{fruits} \times 1) + (\text{meat/fish} \times 4) + (\text{milk} \times 4) + (\text{sugar} \times 0.5) + (\text{oil} \times 0.5)$$

Coping Strategy Index (CSI) Calculation:

The CSI is calculated by multiplying the frequency of each coping strategy by its severity weight, then summing these scores:

$$\text{CSI} = (\text{frequency of strategy 1} \times \text{weight 1}) + (\text{frequency of strategy 2} \times \text{weight 2}) + \dots + (\text{frequency of strategy n} \times \text{weight n})$$

Annex 2: Additional Visualizations

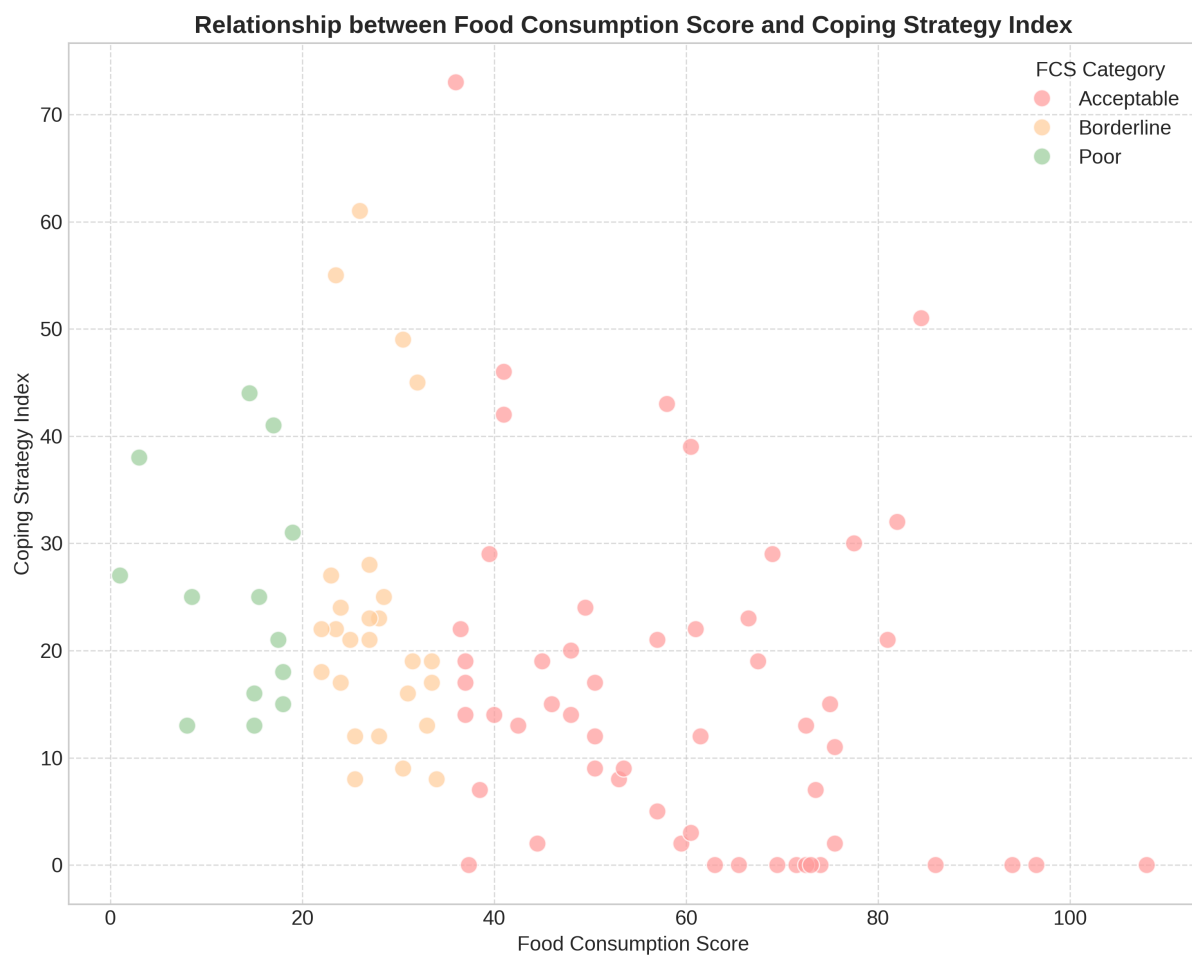


Figure A1: Relationship between Food Consumption Score and Coping Strategy Index

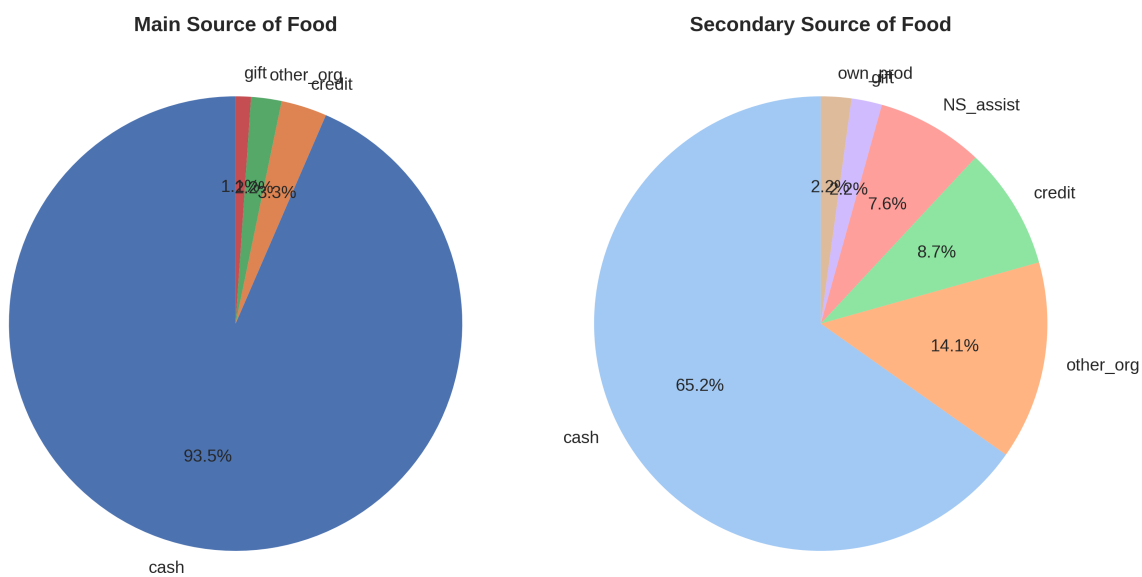


Figure A2: Main and Secondary Food Sources