Lebanon
m-VAM Vulnerability and Food Security Assessment
March April 2021
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¹ Employment is defined as the share of those working on a farm, for an employer or for oneself among all respondents.

Unemployment is defined as the share of those currently not working and looking for employment among those in the labour force;

Out of Labor force is defined as the share of those not working and not looking for employment among all respondents.
Acknowledgment

This report is the outcome of a collaborative process and would not have been possible without the contribution of many individuals. The World Food Programme (WFP) and the World Bank (WB) are grateful to the people of Lebanon for the support and participation provided during the entire exercise, especially during data collection across the country.

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Highlights

- A continuous deterioration in the ability of the Lebanese households to access food and other basic needs was noted during March-April 2021. Forty seven percent of the households reported having challenges in comparison to 43 percent reported in November-December 2020, nationally.

- Lack of money and travel restrictions were two major barriers for accessing markets during this round. This can be explained by the nationwide lockdown and the state of medical emergency imposed during the period of January-March 2021, in addition to the deeper deterioration of the economy and currency depreciation.

- Nationally, food insecurity among Lebanese households is found to be 22 percent during the period of March-April 2021. At the governorate level, the North is found to have the highest level of food insecurity (27 percent), followed by Akkar (26 percent), Baalbek El hermel, and El Nabatieh (25 percent each).

- Women-headed households, households having members with chronic diseases, and those who are unemployed were found to be more food insecure.

- The proportion of Lebanese households facing food shortage continues to increase during the reporting period. 58 percent reported facing food shortages in the 14 days prior to the survey compared to 55 percent in November-December 2020.

- At the governorate level, Akkar recorded the highest significant proportion of food shortages (71 percent, up from 66 percent in the previous round) followed by North (63 percent up from 56 percent). Bekaa, North, and South governorates have the highest increase during the current round in comparison to November December 2021 period (up by 8 percent 7 percent 8 percent, respectively).

- The share of households adopting food consumption coping strategies is continuously increasing over time. Restricting the consumption of adults in favour of children – the most severe consumption-based coping strategy – continues to increase where half of the households reported using this coping strategy during the current round compared to 48 percent in the previous round. Consuming less expensive food remains the strategy adopted by most of the respondents (86 percent).

- During March-April 2021, more than 60 percent of the Lebanese households were applying crisis coping strategies, while 17 percent adopted stress coping methods and 5 percent applied emergency coping strategies.

- In specific, more than half of the Lebanese households are reducing health and educational expenses while 44 percent are purchasing food on credit and 41 percent are borrowing cash.

- The proportion of households facing challenges to access healthcare slightly decreased during March-April 2020 to 33 percent (down by 3 percent in comparison to November-December 2020 round). Lack of money and lack of availability of medications were two major barriers.

- Employment was down by 7.9 percentage points in March-April 2021 compared to the first half of January 2021 while unemployment was up by 10.2 percentage points over the same period, reflecting the volatile labor market conditions and potential adverse impact of the latest lockdown on employment prospects.

- More than half of wage earners had the same (nominal) monetary income over the past year while about 41 percent experienced a decrease which further implied an erosion in purchasing power given rapidly rising prices over this period.

- About a third of households receive some form of social assistance with food from non-government sources being the primary form (52.7 percent) followed by cash assistance (30.8 percent).

- Most respondents considered their households as poor or very poor (47.2 percent) while a small fraction declared that they were financially well-off or wealthy (3.3 percent).
Background and Methodology

January 2021 witnessed a further deterioration of the economic conditions in Lebanon. Besides the ongoing problems related to the exchange rate depreciation, discontinuation of food subsidies, and liquidity constraints, the country witnessed a total lockdown and a health emergency state for a period of three months. Preventative measures such as curfews and travel restrictions to combat the COVID-19 outbreak have deepened the daily stressors and struggles that the Lebanese population is facing to secure their basic needs and livelihoods. Under the pressure of the pandemic, the Lebanese health system was cracking, with an average of over 5,000 new cases per day. In intensive care, the occupancy rate was close to saturation during the period of January to March: 90% in most of the country and 100% in Beirut, according to the World Health Organization.

This report is jointly produced by WFP Lebanon and the World Bank (WB). Remote data collection through phone surveys for this report started on 1 March 2021 and the findings presented are obtained from data collected between March and April 2021, along with a comparison conducted with the data previously presented in November-December 2020 report. The data collection methodology consists of a countrywide survey covering the eight governorates of Lebanon using RDD. The survey targeted Lebanese nationals only and reached a total of 2848 households (refer to map 1).

In 2021, WFP Lebanon aim to assess the food security status of Lebanese households which is measured using the remote CARI (r-CARI). rCARI is an approach used to aggregate different food security indicators into one index to report on population’s overall food security status using remote surveys. The indicator combined three dimensions of food security (Annex 1):

1. Current consumption as determined by the food consumption score.
2. Livelihood coping strategies which indicate the long-term coping capacity of households’ livelihoods to shocks.
3. The economic vulnerability which is based on the main income source and change in income.

Based on this methodology, households are classified into three main categories: food secure, marginally food secure and food insecure (moderately food insecure+ severely food insecure).

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3 Details on methodology and selection strategy were described in the first July-August report and can be accessed through this link
Remote Data Collection in Lebanon:

Given the unstable situation, difficult physical access to households due to COVID 19 restrictions, and to benefit from the high mobile phone and broadband penetration rate, WFP started monitoring Lebanese and refugees’ food security status and access to basic needs through remote assessments (web-based and phone surveys) in 2020.

To obtain more regular and specific household-level information on food security, vulnerability, and livelihood situation of the Lebanese population, WFP, and the World Bank agreed to implement a nationwide remote monitoring system based on phone surveys (mVAM). This report summarizes the key results of the fourth round of the mVAM phone surveys that were conducted in March and April 2021.

Key Figures

### HH Characteristics

- **5 Members**
  Average household size

- **47 Years**
  Average respondent age

- **12% of households**
  are female headed

- **32%**
  are renting their homes

### Socio-Economic Indicators

- **43% of respondents**
  are unemployed

- **22% of households**
  are food insecure

- **47% of households**
  are unable to access food and other basic needs

- **34% of households**
  are unable to access healthcare
Access to Food and other Basic Needs

In terms of ability to access food and other basic needs, a continuous deterioration was observed during March-April 2021. Forty seven percent of households across the country reported having challenges in accessing food and other basic needs compared to 43 percent reported in November-December of 2020.

All governorates showed an increase in having challenges to access food compared to those reported in November-December of 2020, except for Bekaa (46 percent) and Beirut (42 percent) governorates which showed a minor decrease when compared to November-December 2020. Akkar and Mount Lebanon remain constant and stable when compared to the previous round.

Among households unable to make ends meet, lack of money remains the primary obstacle yet the rate was lower than that of November-December 2020 (57 percent versus 65 percent), while travel restrictions due to the complete COVID 19 lockdown measures implemented (15 percent up by 4 percent from the previous round) and high prices (13 percent) are found to be among the top three barriers for accessing goods and basic needs (Figure 2).

Figure 1: Prevalence of households facing challenges in accessing food and other basic needs, (comparing the duration of November December 2020 and March April 2021)

<table>
<thead>
<tr>
<th>Governorate</th>
<th>November December 2020</th>
<th>March April 2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>National</td>
<td>43%</td>
<td>47%</td>
</tr>
<tr>
<td>Beirut</td>
<td>44%</td>
<td>42%</td>
</tr>
<tr>
<td>South</td>
<td>45%</td>
<td>46%</td>
</tr>
<tr>
<td>El Nabatieh</td>
<td>49%</td>
<td>46%</td>
</tr>
<tr>
<td>Bekaa</td>
<td>51%</td>
<td>49%</td>
</tr>
<tr>
<td>Mount Lebanon</td>
<td>49%</td>
<td>50%</td>
</tr>
<tr>
<td>North</td>
<td>51%</td>
<td>47%</td>
</tr>
<tr>
<td>Baalbek-El Hermel</td>
<td>45%</td>
<td>51%</td>
</tr>
<tr>
<td>Akkar</td>
<td>54%</td>
<td>54%</td>
</tr>
</tbody>
</table>

Figure 2: Main reasons why accessing food and other basic needs was challenging, March April 2021

- **Lack of Money**: 57% (March 2021) vs 65% (November December 2020)
- **Travel restrictions**: 11% (March 2021) vs 15% (November December 2020)
- **High prices**: 9% (March 2021) vs 13% (November December 2020)
- **Market Far**: 4% (March 2021) vs 4% (November December 2020)
- **Disease Outbreak**: 6% (March 2021) vs 6% (November December 2020)
- **Market Closed**: 3% (March 2021) vs 3% (November December 2020)
- **Others**: 1% (March 2021) vs 1% (November December 2020)
- **Security Issues**: 1% (March 2021) vs 1% (November December 2020)
Households’ Food Shortage

Nationally, a continuous increase in the prevalence of households facing food shortages in the 14 days prior to the survey was reported compared to November-December 2020. Fifty-eight percent of the surveyed respondents stated having food shortages during the period of March-April 2021 compared to 55 percent reported in the previous round.

At the governorate level, Akkar, similar to previous rounds, recorded the highest proportion of food shortages (71 percent, up from 66 percent in previous round) followed by North (63 percent up from 56 percent). Bekaa, North, and the South governorates have the highest increase during the current round in comparison to November-December 2020 period (up by 8 percentage point and 7 percentage point, respectively).

Map 2: Prevalence of households facing food shortage in the 14 days prior to the survey, March April 2020

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Fig 3. Prevalence of households facing food shortages in Lebanon, by governorates (comparing the period of November-December and March April 2021)

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Footnote: 4 Food shortage is defined as households not having sufficient quantities of food needed during the past 14 days, prior the survey.
Food Security in Lebanon (remote CARI)

Twenty two percent of Lebanese households at the national level were found to be food insecure (moderately or severely food insecure) during the period of March-April 2021. The share of food-insecure households didn’t vary significantly across all governorates. The North had the highest level of food insecurity (27 percent), followed by Akkar (26 percent), and Baalbek El Hermel and El Nabatieh (25 percent each). Mount Lebanon was better off in terms of food security in comparison to other governorates, having the lowest share of food insecurity (16 percent) and the highest share of food security (13 percent).

![Fig 4. The prevalence of food insecurity among Lebanese households on a national and governorate level](image)

Sociodemographic Analysis of Food Security indicator

**Individual characteristics**

In terms of employment status, food insecurity was found to be highest among unemployed respondents seeking jobs (29.7 percent), those who have private work (30.1 percent), and farmers (28.3 percent). Conversely, food security was highest among those who work for others (19.9 percent). Among those who have marginal food security, the percentage was highest for those who receive cash for work (82.7 percent) and those who work for others (71.2 percent).

Respondents who are member of food insecure households had an average age of 47, slightly higher than that of food secure households (no statistical significance).

**Household’s characteristics**

Female-headed households were more likely to be food insecure (27 percent) than their male counterparts (21 percent). More male-headed households were food secure and marginally food secure (10.4 percent and 68.4 percent respectively) in comparison to female-headed ones (8.4 percent and 64.5 percent respectively).
Food insecure households had an average household size of 5.2, higher (with significance) than food secure households (4.1). Households with family members suffering from chronic diseases were more likely to be food insecure (23 percent), compared to those who do not (20 percent).

Table 1. Food security groups by sociodemographic characteristics

<table>
<thead>
<tr>
<th></th>
<th>Food secure</th>
<th>Marginally food secure</th>
<th>Food insecure</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Average</td>
<td>46</td>
<td>47</td>
<td>47</td>
</tr>
<tr>
<td><strong>HH size</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Average</td>
<td>4.1</td>
<td>4.8</td>
<td>5.2</td>
</tr>
<tr>
<td><strong>HOH Gender</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Men</td>
<td>10.4%</td>
<td>68.4%</td>
<td>21.1%</td>
</tr>
<tr>
<td>Women</td>
<td>8.4%</td>
<td>64.5%</td>
<td>27.0%</td>
</tr>
<tr>
<td><strong>HH with Chronic Diseases</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>8.6%</td>
<td>68.5%</td>
<td>22.9%</td>
</tr>
<tr>
<td>No</td>
<td>13.0%</td>
<td>67.1%</td>
<td>19.9%</td>
</tr>
<tr>
<td><strong>Employment status</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash for work</td>
<td>2.2%</td>
<td>82.7%</td>
<td>15.0%</td>
</tr>
<tr>
<td>No job, not seeking</td>
<td>10.1%</td>
<td>66.3%</td>
<td>23.5%</td>
</tr>
<tr>
<td>No job, seeking job</td>
<td>3.8%</td>
<td>66.5%</td>
<td>29.7%</td>
</tr>
<tr>
<td>Private work</td>
<td>8.6%</td>
<td>61.4%</td>
<td>30.1%</td>
</tr>
<tr>
<td>Work for others</td>
<td>19.9%</td>
<td>71.2%</td>
<td>8.9%</td>
</tr>
<tr>
<td>Farmer</td>
<td>3.2%</td>
<td>68.4%</td>
<td>28.3%</td>
</tr>
</tbody>
</table>
Food Consumption

During March-April 2021, the percentage of households consuming inadequate diets (i.e. poor and borderline food consumption score, FCS) is 19.5 percent, slightly lower than that of the previous round in November December 2020. Generally, there are no major changes in the percentage of those who consume inadequate diets at the national level.

At the governorate level, Akkar reports the highest percentage of inadequate diet consumption among all governorates (34 percent), yet this proportion decreased when compared with November-December (40 percent). The North was found to be next in terms of inadequate diet intake (28 percent) (up by 2 percent from November-December 2020). The South remains to have the lowest proportion (13 percent) when compared to other governorates.

Figure 6: Prevalence of households with poor and borderline food consumption by governorate

Fig 5. Food consumption groups during the period of July 2020 and April 2021
Food consumption-based coping strategy

An upwards trend of the use of consumption-based coping strategies has been observed between the rounds of data collection. The proportion of households reducing the number of meals consumed each day slightly increased from 35 percent in November-December 2020 to 37 percent in March-April 2021. The trend is similar for borrowing food, from 28 percent in July-August to 31 percent in March-April 2021. Restricting the consumption of adults in favour of children – the most severe consumption-based coping strategy – continues to increase where half of the households reported using this coping strategy. Consuming less expensive food remains the strategy adopted by the most respondents (86 percent) (see figure 6).

Similar to previous round, Akkar recorded the highest reduced Coping Strategy Index (rCSI) (25), followed by Baalbek- El Hermel (21) and the North (21) (Map 5). The national average rCSI reported in March-April has slightly increased compared to previous round; yet, a slight decrease was only observed in the South governorate when compared to November-December round (figure 7). The increase in the adoption of the coping strategies is mainly due to the major depreciation of the Lebanese currency and consequently increase in the prices of food and basic needs.
Livelihood Coping Strategies

In order to further assess households’ coping capacity, livelihood-based coping strategies are utilized, which are also known as asset depleting coping strategies. The coping strategies are categorized into three categories according to their severity: stress, crisis and emergency coping.

The most adopted livelihood coping strategies to cope with the lack of food in the thirty days prior to the survey, were reducing expenditures on health and education (57 percent), purchasing food on credit (44 percent), and borrowing cash (41 percent). Moreover, it is important to highlight that a quarter of the Lebanese households are selling domestic assets (24 percent) to generate badly needed financial resources that would allow covering food needs. This can be justified by the major currency depreciation and price inflation that happened during March 2021, where the Lebanese households were facing major challenges in securing their basic needs due to the deterioration of their purchasing power.

Nationally, only 15 percent of the Lebanese households were not adopting any coping strategy, while 62 percent were found to be applying crisis coping strategies in March-April 2021. Moreover, the share of households who applied the stress coping strategies was 17 percent and the rest of the respondents (5 percent) were applying emergency coping strategies.

All governorates witnessed a similar trend: crisis coping strategies were found to have the highest share, having Akkar (71 percent) and Baalbeck-El Hemel (67 percent) with the highest percentages. Mount Lebanon was found to have the highest percentage of applying the stress coping strategies (20 percent) while emergency coping strategies were the highest in Baalbeck el Hermel (10 percent) followed by the North and Akkar (7 percent each). The results are alarming showing the severity and the struggle that the Lebanese households are facing amid the collapse of the economy and deterioration of the currency.

Fig 9. Livelihood based coping strategies by governorate
Sociodemographic characteristics for the livelihood coping strategies adopted by the households.

Individual Characteristics

The results of the survey didn’t show any trend in terms of age and severity of the livelihood coping strategies. The average age of respondents belonging to households adopting crisis and stress coping strategies (46) was younger than those of households adopting emergency strategies (48), while respondents belonging to households not applying any strategy were the eldest (49 years).

In terms of employment, members of a household who have private work were mostly not applying any strategy (25 percent) when compared to other categories. The highest share of stress coping strategies was found among respondents working for others (19 percent) while crisis strategies were adopted mostly by farmers (79 percent) and members who receive cash for work (76 percent). The emergency strategies were mostly applied by the unemployed (8.7 percent)

Household Characteristics

Female headed households were more likely to adopt the crisis and stress coping strategies (19.5 percent and 63.7 percent, respectively) compared to male headed household (18.8 percent and 59.1 percent). On the other hand, the results showed that male headed households applied the emergency coping strategies (6.5 percent) more than women (4.1 percent).
In terms of household size, the average size didn’t differ across the different coping groups (5), yet it was lower for those not applying any strategy (4). Moreover, households with family members having chronic diseases showed to apply more the crisis and emergency strategies in comparison to those who don’t have chronic diseases.

Table 2. Livelihood coping strategies by sociodemographic characteristics

<table>
<thead>
<tr>
<th></th>
<th>Stress Coping</th>
<th>Crisis Coping</th>
<th>Emergency Coping</th>
<th>Not adopting coping</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Average (years)</td>
<td>46</td>
<td>46</td>
<td>48</td>
<td>49</td>
</tr>
<tr>
<td>HH size</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Average</td>
<td>5</td>
<td>5</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>HoH Gender</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Men</td>
<td>16.5%</td>
<td>62.1%</td>
<td>5.9%</td>
<td>15.5%</td>
</tr>
<tr>
<td>Women</td>
<td>19.5%</td>
<td>63.7%</td>
<td>3.7%</td>
<td>13.1%</td>
</tr>
<tr>
<td>HH with Chronic</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diseases Yes</td>
<td>15.8%</td>
<td>64.1%</td>
<td>6.5%</td>
<td>13.6%</td>
</tr>
<tr>
<td>No</td>
<td>18.8%</td>
<td>59.1%</td>
<td>4.1%</td>
<td>18.1%</td>
</tr>
<tr>
<td>Employment status</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash for work</td>
<td>12.3%</td>
<td>75.5%</td>
<td>6.5%</td>
<td>5.7%</td>
</tr>
<tr>
<td>No job, not seeking</td>
<td>17.6%</td>
<td>58.3%</td>
<td>5.0%</td>
<td>19.1%</td>
</tr>
<tr>
<td>No job, seeking job</td>
<td>16.2%</td>
<td>70.6%</td>
<td>8.7%</td>
<td>4.6%</td>
</tr>
<tr>
<td>Private work</td>
<td>15.1%</td>
<td>55.4%</td>
<td>4.6%</td>
<td>24.9%</td>
</tr>
<tr>
<td>Work for others</td>
<td>19.0%</td>
<td>58.6%</td>
<td>4.3%</td>
<td>18.1%</td>
</tr>
<tr>
<td>Farmer</td>
<td>13.4%</td>
<td>78.9%</td>
<td>3.0%</td>
<td>6.5%</td>
</tr>
</tbody>
</table>
Access to Healthcare

Authorities in Lebanon had imposed a nationwide lockdown in January 2021 and extended the state of medical emergency until March 31. The state of emergency granted the government broad powers to implement preventative measures such as curfews and travel restrictions to combat COVID-19 outbreak. Under the pressure of the pandemic, the Lebanese health system was cracking, with an average of over 5,000 new cases per day.\(^5\)

Despite the aforementioned facts, the proportion of households facing challenges to access healthcare has slightly decreased to 33 percent in March-April 2021 (down by 3 percent in comparison to November-December 2020 round). At the governorate level, no significant differences were observed in March-April round compared to the November-December round. The Beirut governorate saw the highest percentage of households facing challenges to access healthcare facilities (40 percent) when compared to other governorates. Moreover, Baalbek el Hermel was the only governorate reporting a considerable increase in the proportion of households reporting this issue (36 percent, up from 31 percent in November-December).

Nationwide, 65 percent of the respondents stated that at least one household member suffers from a chronic condition (up from 60 percent reported in November-December). The need to access the current overstretched health system remains critical, yet lack of money remains a major barrier for seeking and accessing healthcare in Lebanon. Lack of availability of medications was reported as the second challenge being faced by the Lebanese households (29 percent). The fragile public health system, which was already facing regular shortages of drugs and other medical supplies due to the financial crisis, has been further impacted.

Covid 19 Vaccination Perceptions

The Ministry of Health received its first batch of Covid-19 vaccine supplies in February 2021 and the vaccination campaign has started based on a planned criteria and priority groups.

The current round of mVAM aimed to explore the perceptions of the Lebanese respondents towards the vaccination and their willingness to get it if given the chance at no-cost to them. The results showed that 67.4 percent of the households would have the vaccine while 23.7 percent would refuse to have it and the rest were uncertain. At the governorate level, Mount Lebanon (75.4 percent), Beirut (73.5 percent), and El Nabatiyeh (72.2 percent) showed the highest percentage of acceptance while Akkar governorate had the lowest percentage (48.3 percent).

Among the respondents who would refuse to have the vaccination, 44 percent of them were concerned about the side effects while 22 percent thought that it was not safe. Also, 12 percent of the respondents don’t trust vaccinations and 10 percent didn’t think that they are at risk of contracting COVID 19 virus.
Employment

Labor Force Participation

The March-April 2021 round of mVAM phone surveys collected information on respondents’ work status in the week preceding the survey, as well as for the first half of January 2021, prior to the announcement of the new set of lockdown measures in response to the COVID-19 pandemic. Figure 16 shows a distinct decrease in the employment rate and an increase in unemployment for respondents in March-April, compared to their self-reported labor force participation status in January.

Fig 16. Labor force Participation Status\(^6\) last week and pre-January 2021 lockdown

Further disaggregation of the unemployment rate across groups shows that the increase is more pronounced among male respondents and respondents with lower levels of education (no education, primary and complementary), but does not vary much by age (Figure 17).

Fig. 17. Increase in Unemployment Rate between January and March-April 2021, by Group; % points

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\(^6\) Employment is defined as the share of those working on a farm, for an employer or for oneself among all respondents; Unemployment is defined as the share of those currently not working and looking for employment among those in the labor force; Out of Labor force is defined as the share of those not working and not looking for employment among all respondents.
We further examine respondents’ work status in the week preceding the interview compared to their pre-January lockdown status. We find that among respondents that were employed in the first half of January, around 75 percent remained employed in the same job (including working for the same job from home – about 7 percent). About a-fifth of the respondents employed pre-lockdown reported to be currently experiencing unemployment, with more than half ‘temporarily not working nor getting paid but expecting to return to work.’ The majority of those who were unemployed pre-lockdown remained so (85 percent), while 3 percent of them report to have exited the labor market. Among those reporting being unemployed in pre-January lockdown, 7 percent reported to have found a job currently. Approximately 93 percent of those not in the labor force pre-lockdown continued to remain inactive, while 4 percent of them enter the labor market but were unemployed in March-April.

*Fig. 18 Current Employment by Pre-Lockdown Labor Force Participation Status*
Income Sources

Monthly wage income

As in previous survey rounds, the respondents employed at the time of the surveys were further asked details about the take-home amounts in the month prior to the survey month.\(^7\) The median take-home income was 1,000,000 LBP (or 256.4 USD)\(^8\) in both December 2020 and February-March 2021. Wages have not kept up with rising prices: overall monthly inflation increased by 17 percent and food inflation, by 27 percent between December 2020 and March 2021.

Employed respondents who reported their take-home incomes for the past month\(^9\) were asked whether they saw these monetary earnings increase, decrease or stay the same, compared to 12 months prior to the interview.\(^10\) More than half of these saw their take-home amounts stay the same (52.7 percent), while two-fifths (40.6 percent) experienced a decrease in these amounts. A higher proportion of women reported having their take-home amounts stay the same or increase when compared to men (63.1 and 8.8 percent versus 49.4 and 5.4 respectively).

Those with more schooling seem to fare better in this respect, as do younger respondents. A higher percentage of the employed respondents having at least secondary level of education reported having either the same or an increased take-home amount compared to their less educated counterparts: 55.7 and 7.3 percent compared with 47.8 and 4.6 percent respectively. A higher percentage of those aged 17-40 experienced an increase in their take-home amount compared with their older counterparts (10.4 percent and 3.6 percent respectively), while a similar percentage from both cohorts reported having experienced no changes (52.2 and 53.0 percent respectively).

Main source of income for the past 12 months

When asked about the household’s main source of income during the last 12 months, almost three-quarters of respondents mentioned labor income, irrespective of the sector or type of jobs.\(^11\) Another 5.5 percent of households relied mainly on remittances either from abroad (2.3 percent) or from Lebanon (3.2 percent), while 6 percent of families depended on assistance from the government. Additionally, 7.7 percent of the households relied mostly on ‘incomes from properties, investments or savings’, and 4 percent – did not have any income source.

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\(^7\) The employed respondents either reported the amount they were paid in the reference month or reported not having been paid (and in this case we consider the income as 0), or refused to answer / did not know the amount. We exclude the third category from the analysis. In this way we exclude 11 percent of the employed respondents for January and 7.5 percent of the employed respondents in March-April.

\(^8\) The USD figures for June and July are computed using the exchange rate of 1 USD = 3,900 LBP.

\(^9\) Approximately 80 percent of those who worked the week prior to the survey.

\(^10\) The respondents were instructed to not consider the value of the currency at the time of the interview.

\(^11\) Notably, 10.9 percent of respondents mentioned “high risk activities (such as exploitative work, begging, scavenging)” as their household’s main source of income in the prior year.
Social Assistance and Self-Reported Wealth Status

**Social Assistance**

The survey also inquired about the various sources of assistance (cash or in-kind) at household level in the past 3 months. In this respect, more than two-thirds of households (67.9 percent) received no assistance, ranging from 61.3 percent in Akkar to 77.3 percent in Baalbek-El Hermel. Of these households, 18.7 percent are classified as food insecure and 69.4 – as marginally food secure.

Of the households receiving at least one type of social assistance (32.1 percent), 17.4 percent received assistance from more than one source. The most widespread form of assistance received is food from non-government actors (62 percent of recipient households), followed by cash assistance (36 percent), food from government actors (11.7 percent), and other types of assistance (7.5 percent).\(^1^2\)

**Self-Reported Wealth Status**

When asked to categorize their households as one of the following: very poor, poor, average-to-poor, average, financially well-off, and wealthy, almost half of the respondents (47.2 percent) characterized their households as *poor* or *very poor*, and an additional 30.7 percent depicted their households as *average-to-poor*. Only 3.3 percent of the respondents considered their households as *financially well-off* or *wealthy*. There are regional disparities: across the regions, a higher percentage of households in Akkar and Baalbek-El Hermel was categorized as very poor/poor, whereas a higher percentage of households in Beirut and Mount Lebanon are categorized as average-to-poor than their other regional counterparts.

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\(^1^2\) The shares are not mutually exclusive as households may receive more than one form of assistance.
Fig. 20 Self-assessed household wealth status
Conclusions

• Lebanon witnessed a total lockdown and a health emergency status for a period of three months, starting from January 2021. This deepened the daily stressors and struggles of the Lebanese community which is still facing a continuous deterioration in the economy and further currency depreciation. These facts are reflected in the results of the March-April mVAM survey which showed that an additional increase in the percentage of households facing challenges in accessing food and other basic needs. Forty seven percent of the households reported having challenges in comparison to 43 percent reported in November-December 2020, nationally. The results also show that Akkar and Baalbeck-Hermel are still the most fragile governorates in Lebanon.

• The proportion of Lebanese households facing food shortage continues to rise, where 58 percent reported facing food shortages was reported compared to 55 percent in November-December 2020. Lack of money and travel restrictions remain two key barriers.

• Nationally, food insecurity among Lebanese households is found to be 22 percent during the period of March-April 2021. At the governorate level, there was no major variability observed across the different governorates in terms of food security.

• The survey showed that adopting coping strategies including food consumption and livelihood related coping strategies are being majorly adopted by the households to be able to generate the needed financial resources. An upwards trend of the use of consumption-based coping strategies has been observed between the rounds of data collection across all governorates, reflecting that all areas across Lebanese are facing the same challenges equally.

• Nationally, only 15 percent of the Lebanese households were not adopting any coping strategy, while 62 percent were found to be applying crisis coping strategies in March-April 2021. All governorates witnessed a increasing trend in terms of adopting the coping strategies, having crisis coping strategies with the highest share. The highest rates were found in Akkar and Baalbeck-Hermel.

• Despite the pandemic and nationwide lockdown measures taken during January-March 2021, the proportion of households facing challenges to access healthcare has slightly decreased to 33 percent in March-April 2021. Yet, lack of money and unavailability of medications were major obstacles for healthcare seekers.

• The share of unemployed among respondents moved up after the latest lockdown in January while employment rates fell by almost 8 percentage points. Wage earners continued to experience a decrease in their purchasing power amidst rising prices with monetary wages remaining stagnant or falling.

• Almost 47 percent of respondents considered their families to be either very poor or poor, reflecting the stark conditions in the country where about a third of households were receiving some form of assistance.

Next Steps

WFP and the WB will continue to collect and monitor data for a timely analysis and assessment of households’ vulnerability, food security and livelihood status through mVAM. The next data collection round is planned for June-July 2021.

The World Bank, in partnership with WFP and UNHCR, is launching the Lebanon Vulnerability Assessment Panel (LVAP), which is a representative household survey for Lebanese and non-Lebanese residents (at governorate and district level). The LVAP will enable in-depth assessments of the changing economic and social situation, allowing WFP and WB to estimate households poverty rates using international poverty lines as well as evaluate the opportunities, vulnerabilities, and risk facings households to inform social protection programs.

WFP and the World Bank continue coordinating with the Government of Lebanon and partners - to assess and further monitor the impact of the crisis on households (including access to adequate and nutritious diets and healthcare services). As stated in previous mVAM reports, most households continue to require financial resources to urgently meet their basic needs, including food, and to access increasingly unaffordable services, such as healthcare.
WFP with the GoL and the World Bank are also expanding the NPTP activities as well as setting up the Emergency Social Safety Network (ESSN), which aims to provide assistance to 147,000 extreme poor Lebanese households.
Disclaimer: This guidance note is for limited use only until proper testing and face to face comparisons are possible. A final rCARI methodology and guidance will be developed shortly. This guidance is an internal document for the use of WFP staff only.

Introduction

In situations where access to affected populations is limited or non-existent, such as in case of conflict or epidemics, face to face interviews are not possible. In these circumstances, regular assessments are often replaced or complemented by remote data collection through call centres, Computerized Assisted Telephone Interviews (CATI), or web-based surveys. Remote surveys are short in length and do not include all the standard food security indicators that are normally used to assess food security and estimate the number of people in need. This note aims to provide a methodology to calculate CARI using proxy indicators currently collected through remote surveys. Examples of analysis outputs, syntaxes and data collection modules are also provided. The note is based on the best practices up to date but will be further reviewed and updated as further learnings will become available.

What is the remote-CARI?

Remote-CARI or rCARI. This composite indicator is used to determine the number of food insecure people when data from regular assessments are not available due to access issues.

Other purposes of the rCARI include the monitoring of the food security situation over time and for profiling and classifying the food insecure to inform programme responses and targeting decisions.

Similar to the original CARI, r-CARI assesses two dimensions:

1) The **current status** of households’ food consumption (assessed based on food consumption patterns)
2) The **current coping capacity** of households to meet future needs (assessed based on economic vulnerability and adoption of livelihood coping strategies)

What are the indicators collected through remote surveys?

Regular CARI assesses the current status in the consumption pattern using food consumption score and the coping capacity through livelihood coping strategies and food expenditure share (the latter being a proxy for economic vulnerability). Remote surveys have some limitations in collecting several of these indicators, due to length and complexity.

1) mVAM usually collects the following indicators that are relevant for rCARI indicator computation:
   1. Food consumption score
   2. Consumption based coping strategy (rCSI)
   3. Livelihood coping strategy (usually shorter version of the original)
   4. Income sources
   5. Changes in income

2) Web-surveys can collect the following indicators:
   1. Consumption based coping strategy (modified version)
   2. Number of meals
   3. Worry about running out of food

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13 The remote CARI guidance is developed by WFP Needs Assessment and Targeting Unit (RAM) in close collaboration with significant inputs from the regional VAM units.
4. Livelihood coping strategy (short version)
5. Income sources
6. Change in income

The below table includes CARI indicators and some of the proxy indicators that could be used to calculate remote-CARI and its recommended thresholds.

<table>
<thead>
<tr>
<th>Domain</th>
<th>Indicator</th>
<th>Food Secure (1)</th>
<th>Marginally Food Secure (2)</th>
<th>Moderately Insecure (3)</th>
<th>Severely Insecure (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Status</td>
<td>Preferred option</td>
<td>Acceptable</td>
<td>Acceptable consumption + using 'severe' food coping $^{14}$</td>
<td>Borderline</td>
<td>Poor</td>
</tr>
<tr>
<td></td>
<td>Alternative if preferred option not available (web survey)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Food consumption score</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Number of meals consumed</td>
<td>3 meals</td>
<td>2 meals</td>
<td>1 meal</td>
<td>0 meal</td>
</tr>
<tr>
<td></td>
<td>Worry about food availability/food coping</td>
<td>Not worried</td>
<td>Worried</td>
<td>Worried + skipping meals</td>
<td></td>
</tr>
<tr>
<td>Current Coping Capacity</td>
<td>Only available option to measure economic vulnerability remotely as expenditure cannot be collected (classification needs to be contextualized)</td>
<td>Main income source and change in income</td>
<td>Regular employment (formal labour or self-employed) – no change/ no decrease</td>
<td>Regular employment but reduced income or informal labour/ remittances, no change/ no decrease</td>
<td>No income dependent on assistance or support Or informal labour with complete loss of income</td>
</tr>
<tr>
<td>Livelihood coping</td>
<td>Preferred option (classification of strategies needs to be contextualized)</td>
<td>Neutral</td>
<td>Stress strategies</td>
<td>Crisis strategies</td>
<td>Emergency strategies (or do not have the capacity to do anything)</td>
</tr>
<tr>
<td></td>
<td>Alternative if preferred option not available (web survey)</td>
<td>Livelihood-based coping strategy categories</td>
<td>No strategies</td>
<td>1 strategy</td>
<td>2 strategies</td>
</tr>
</tbody>
</table>

Guidance on the prioritization of use of indicators and aggregation of remote-CARI:

1) Current food security status (50% of total score):
   a. Preferred option (recommended for CATI):
      ✓ Two indicators (food consumption score and reduced coping strategy) will be used to classify households:
         o HH with acceptable consumption will take a score of 1,
         o HH with borderline consumption will take score of 3,
         o HH with poor consumption will take score of 4.
      ✓ Reduced coping strategy index will be used to classify HH as 2 if the HH has acceptable consumption but has been using severe food coping strategies$^{2}$.
   b. Alternative (recommended for Web-surveys):
      ✓ Three indicators will be used to classify HH into 4 categories (number of meals, worry about food availability and reduced coping strategies)
      ✓ Number of meals consumed in the day prior to the survey will be used to classify HH into 4 categories as mentioned in the table
      ✓ Worry about availability of food in addition to the use of food-based coping strategies (short version of the original module) will be used also to classify the HH into 4 categories as mentioned in the table

$^{14}$ Severe food coping refers to using any of the following strategies over the past week at least one time: reduced number of meals, reduce meals portion, reduce consumption by adults in order for children to eat. Further testing is required for the definition of severe coping.
✓ The alternative methodology depends on perception-based indicator and measured at individual level. To reduce biases and strengthen results, the average value of the two classifications will be taken and rounded.

2) Economic vulnerability (25% of total score)
   a. Only available option:
      ✓ Two indicators will be used in the classification of households (income sources and change in income)
        - HH will be classified based on current income sources where HH with income coming from regular employment will be given a score of 1,
        - if the regular income source is accompanied by reduced income or the income is mainly from remittances or informal labour with no change or no decrease in income, the household will be given score of 2,
        - if the HH income source is informal labour and have decreased income, then the HH will be given a score of 3,
        - if the HH has no income, loss all income or mainly depends on assistance then it will be given a score of 4.

3) Livelihood coping (25% of total score)
   a. Preferred option:
      ✓ Livelihood coping strategies (Full module with 10 strategies; 4 stress, 3 crisis, 3 emergency).
   b. Alternative option
      ✓ Livelihood coping strategies are asked in three questions (one combines any of the listed stress strategies, and one for any of the listed crisis strategies and one for any of the listed emergency strategies)
   c. Alternative option (least recommended):
      ✓ If three coping strategies were used, HH will be classified based on the number of coping strategies used as per the table
      ✓ Households has no coping capacities would need to be downgraded (to be tested).

The compositive score is comprised of 50% of the current food consumption domain, 25% of economic vulnerability domain, and 25% of the livelihood coping domain.

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21 The aggregation of the income sources should be contextualized
22 Change in income could be contextualized to include households that experienced more than 25% or 50% reduction in income