



Digital Needs Assessment Report

Through the Eyes of the Community

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OXFAM

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Introduction, Background, and Scope

Lebanon continues to face overlapping crises that have significantly deepened the vulnerability of its population following the recent escalation of Israeli war on Lebanon starting March 2026. The crisis in Lebanon is rapidly escalating amid increasing regional conflict, causing a severe and worsening humanitarian situation.

By April 17, Israeli attacks had killed 2,294 people, including 177 children and 100 health sector workers, and injured 7,544 others, among them 704 children and 233 health workers, and more than 1 million have been displaced since 2 March 2026, many seeking shelter in collective sites, informal settings, or with host communities, resulting in growing pressure on community infrastructure, service points, and humanitarian response capacities. This displacement compounds Lebanon's existing political and economic challenges, further straining public services, infrastructure, and increasing poverty.

This crisis is part of a wider regional context. Across South West Asia and North Africa (SWANA) region, millions of people are living in internal displacement due to protracted conflict, violence, and disasters, with the risk of further escalation creating new waves of displacement within and across borders.

The impact of the crisis is not gender neutral as shown in previous Oxfam studies such as 2025 Protection Analysis, Gender in IPC and Debt study. Women, girls, men, boys and people from various Sexual Orientation, Gender Identity and Expression, and Sex Characteristics (SOGIESC) are likely to experience displacement and access to services differently. Displacement often increases women's and girls' exposure to protection risks, including lack of privacy, harassment, exploitation, intimate partner violence, unsafe access to WASH facilities, and heightened psychosocial distress. At the same time, men and boys may face specific pressures linked to income loss, debt accumulation, social expectations to provide for the household, insecurity, mobility restrictions, and negative coping mechanisms.

Against this backdrop, Oxfam in Lebanon undertook a self-reported digital needs assessment (DNA) to generate an intersectional, and evidence-based understanding of multi-sectoral needs of people affected by the war. The assessment targeted beneficiaries of Oxfam previous or ongoing projects and sought to systematically identify, analyze, and prioritize the needs, vulnerabilities, and coping mechanisms of households impacted by the war on Lebanon.

Findings from the assessment will inform Response activities' design, targeting, and advocacy, supporting evidence-based planning, equitable resource allocation, and strategic influencing efforts.

Methodology and Data Plan

The digital needs assessment applied a mixed-methods approach integrating quantitative data collection method with qualitative tinge. The methodology was designed to ensure statistical reliability, inclusivity, and ethical rigor, in line with Oxfam's feminist and intersectional MEAL principles.

The quantitative component employed a self-reported survey shared with Oxfam in Lebanon current participants/beneficiaries ensuring representativeness across regions, population groups, and programmes. **885 households across four regions willingly participated in this digital needs assessment, accounting for 4616 individuals.** When it comes to the original area of residence before the displacement, 53.67% of the sample came from South Lebanon (such as Bayssarieh, Sour, Nabatieh, Khiam, Zrarieh, Mansouri, Debaal and others), 20.5% from the Bekaa and Baalbeck-Hermel (such as Sohmor, Yohmor, Baalbeck, and others), 9.94% from Beirut and Mount Lebanon (such as Jiyeh, Damour, Dahye, and others) and the remaining percentage (15.89%) from other places. Quantitative data collection ran from mid-April 2026 till end of April.

In addition to the above quantitative sample, **172 key informant interviews** and **observations** were completed by Oxfam team in Beirut and Mount Lebanon, Bekaa, Baalbeck, South and North, as part of the inter-agency emergency rapid needs assessment (ERNA) intended to generate a rapid, comparable, and operationally useful picture of priority needs, service gaps, and protection concerns affecting displaced populations inside and outside collective shelters. The qualitative component was used to triangulate and contextualize the quantitative findings generated through the digital survey. Evidence from observations, key informant interviews with collective shelter focal points, and Oxfam onsite monitoring checklists helped explain why certain needs were reported more strongly across specific population groups, shelter types, and locations. Qualitative data collection ran from beginning until mid-May 2026.

Demographics

The significant majority of the 885 households is Lebanese, accounting for nearly seven in ten individuals (69.94%). Syrian households constitute the second-largest segment, representing approximately one-quarter (24.75%) of the sample, while remaining nationalities combined make up 5.31%. The most predominant of these nationalities are Ethiopian and Sudanese.

Key informants were collective shelters' focal points, Ministry of Social Affairs' (MoSA), local authority representatives (such as mayors and mukhtars) or social activists.

Displacement Status Distribution Analysis

The DNA reveals a significant concentration of individuals currently experiencing displacement.

- **Displaced people:** The overwhelming majority of the population is currently classified as displaced, accounting for over three-quarters of the total group (76.16%).
- **Returned Population:** Individuals who have returned from displacement make up the second-largest segment, representing 12.09% of the sample.
- **Host Community:** Another segment consists of those who were host community and have not moved from their areas of origin, considered as host community and accounting for 11.75% of the total.

Shelter Type by Displacement Status

I- Displaced Population (76.16% of the total):

- **Apartments:** The single largest sample consists of displaced individuals residing in apartments, making up 41.39% of the total population.
- **Formal Collective Shelters:** A highly significant portion of the displaced population is utilizing formal collective shelters, representing 33.23% of the total surveyed group.
- **Host Community shelters:** Reliance on host families is also notable among the displaced, accounting for 17.94% of the total population. This means that IDPs are residing with a family they know – hosted by a family member or a friend.
- 7.44% of IDPs live in other types of shelters such as tents and informal shelters.

II- Returned Population (12.09% of Total):

Individuals who have returned from displacement are primarily split between living in apartments (44.83%) and staying with other families (39.28%). Only a fraction (15.89%) of returnees is in formal collective shelters while the rest reside in tents.

III- Host Community (11.75% of Total):

As expected, those host communities predominantly reside in apartments (93.1%). The remainder resides with another family.

The data highlights a severe housing strain driven by the displaced population. While apartments are the most common shelter type across all statuses, a critical finding is the heavy reliance on "formal collective" shelters (25.31%) and "host families" (13.67%) specifically by displaced individuals. This indicates that standard housing infrastructure (apartments) is either unavailable, unaffordable, or at capacity for nearly half of the displaced sample. From a gender perspective, shelter conditions should be assessed not only in terms of physical adequacy, but also in terms of safety, privacy, and accessibility for women and girls specifically. Overcrowded shelters, shared rooms in collective shelters, mixed-gender sleeping arrangements, poorly lit areas, inadequate

gender separation in latrines and bathing areas, and limited private spaces increases the risk of harassment and gender-based violence. Shelter-level targeting should therefore include gender and protection risk screening, with attention to lockable and gender-segregated WASH facilities, safe lighting, confidential feedback channels, and referral pathways for GBV, MHPSS and legal assistance.

Qualitative findings further show that the category of “formal collective shelters” should not be treated as homogeneous. Conditions vary substantially from one shelter to another. Some sites, such as Deir el Rahbet in Mtolleh and Dar Al Mouaouakin in Damour, were described as relatively well managed, clean, organized, and more dignified for hosting families. In contrast, other shelters, including Al Rayyan School in Jiyeh and Barjein Municipality shelter, showed more serious concerns related to overcrowding, poor sanitation, lack of privacy, damaged or inadequate infrastructure, and pressure on shared facilities. This suggests that shelter-based targeting should not rely only on whether a household is living in a collective shelter, but should also consider the condition of the shelter, the quality of site management, WASH functionality, privacy arrangements, and the level of protection risk.

Limitations

First, the digital needs assessment relied primarily on self-reported surveys, which may have introduced selection bias. Households with limited access to phones, internet connectivity, digital literacy, or stable communication channels may have been less likely to participate. This is particularly relevant in a displacement context, where some of the most vulnerable groups may face barriers to accessing digital tools.

Linked to the above household-level surveys may hide **intra-household gender inequalities**, including those who control assistance, who make spending decisions, who carry unpaid care responsibilities, who face safety risks when accessing services, and who is most likely to be excluded from information and complaint channels.

Second, the data is based on self-reported information, which may be affected by recall bias, or social desirability bias. Respondents may overstate or understate certain needs, coping strategies, or vulnerabilities depending on how they interpret the purpose of the assessment, their expectations of future assistance, or concerns about confidentiality. Given the highly sensitive and rapidly evolving displacement context, some households may also have been cautious in sharing information, particularly around protection concerns, legal status, or household vulnerabilities.

Third, although the assessment aimed to ensure representation across regions, population groups, and programmes, the distribution of respondents shows a strong concentration of households originally from South Lebanon, who represent 53.67% of the sample. This reflects the

displacement patterns and Oxfam programmes' reach at the time of data collection, but it also means that findings may be more strongly shaped by the experiences of households displaced from southern areas compared to those from Beirut and Mount Lebanon, Bekaa, Baalbeck-Hermel, or other locations. Differences between regions should therefore be interpreted with caution, particularly where subgroup sizes are smaller.

Fourth, the assessment captures conditions at a specific point in time (April 2026 to be exact). In a volatile emergency context, displacement status, shelter conditions, access to services, income sources, market prices, and priority needs can change rapidly. Households classified as displaced, returned, or host community at the time of the assessment may experience changes shortly afterward, especially in response to security developments and changes in assistance availability.

Fifth, there may be limitations related to intersectional analysis. Although the assessment is framed in line with Oxfam's feminist and intersectional MEAL principles, the extent to which findings can be disaggregated depends on the availability, quality, and sample size of demographic variables. Smaller subgroups, such as Ethiopian, Sudanese, or other non-Lebanese households, may not be large enough to support statistically reliable comparisons. Similarly, analysis by gender, age, disability, nationality, displacement status, or region should be interpreted carefully where subgroup numbers are limited and keeping in mind that this was a rapid needs assessment.

Sectoral Needs:

Priority 1 Needs as reported by Displacement Status

Across all displacement statuses, "**livelihoods**" is overwhelmingly the most frequently cited priority need. Among all respondent groups, 47.12% of the sample reported Livelihoods as the top need. In segregation, 35.82% of the displaced population reported this as the top need, while the host community accounts for 5.88% and returnees account for 5.42% of the sample.

The data reveals a consensus on primary needs: economic survival. "Livelihoods" and "food" collectively account for the vast majority of the top priority requests, far outweighing other needs like shelter, health, or WASH. While the displaced population drives the massive volume of these requests, it is notable that the rank order of needs (Livelihoods > Food) remains consistent even among "host community" and "returnee" groups, suggesting widespread economic and food security challenges that surpass displacement status.

Qualitative evidence helps explain why livelihoods emerged as the most critical first-priority need. Households are not only facing a loss of income, but also a wider affordability crisis affecting rent, food, household expenses, baby items, medication, transportation, and other essential goods. In several locations, cash assistance was identified as necessary to cover items that are either not

included in distributions or cannot be addressed through a standard in-kind package. For households outside collective shelters, this was particularly linked to rent, gas for cooking, diapers, infant milk, and daily household costs. This indicates that livelihood needs in the digital survey should be interpreted broadly as an economic survival concern rather than only as a request for employment support.

As shown in Oxfam in Lebanon Gender in IPC project and Debt Study, economic survival pressures affect all households, but they are experienced differently by women and men. Women may face reduced access to income-generating opportunities because of childcare responsibilities, restrictions on mobility, safety concerns, and limited control over household resources or decision making. Women-headed households face particular difficulty covering food, and other costs. Men, on the other hand, experience strong social pressure to provide for the family and may resort to larger debts or risky coping mechanisms when employment opportunities collapse.

Priority 2 Needs as reported, provided by Displacement Status

A significant shift in priorities is observed in secondary needs compared to primary needs. "**Food**" emerges as the overwhelming most reported second Priority across all displacement statuses. Within the displaced population, food as a secondary need accounts for 25.76% of the entire dataset. It also represents the highest secondary need for the host community (4.29%) and returned (3.95%) samples. 90.43% of respondents requested food baskets specifically, 6.69% requested ready to eat meals and 2.88% requested hot meals.

While the respondents' absolute primary focus is on securing livelihoods (cash mainly), their immediate secondary concern is overwhelmingly focused on basic sustenance (Food). The substantial percentages for NFI, health, and shelter as secondary needs among the displaced further illustrate a compounding matrix of vulnerabilities where basic survival requirements (food, income, and household items – including WASH) dominate the humanitarian needs profile across all statuses, but most acutely for the displaced.

The qualitative findings confirm that food insecurity is a common concern across regions and displacement settings, but they also show that the form of food support required differs by living arrangement. In collective shelters, food needs are often connected to collective arrangements, meal distributions, cooking capacity, food storage, and kitchen items. Some sites depend heavily on distributed meals and NGOs support, while still lacking practical items such as cooking utensils, storage space, refrigerators, or gas. Outside collective shelters, food needs are more household-based, with families requiring food parcels and flexible support because they may not benefit from organized shelter-level distributions. This distinction is important for response planning, as the same food assistance modality may not be appropriate for all households.

Food insecurity also has gendered dimensions as shown in the Gender in IPC project. Women and girls often carry primary responsibility for food preparation, child feeding, managing scarce household food stocks, and absorbing the emotional burden of not being able to meet family needs. In households with infants, young children, pregnant women, lactating women, older persons, or people with chronic illness, food assistance should consider dietary diversity, nutritional needs, safe food preparation, and access to cooking fuel and storage. Where food is scarce, women are the first ones to reduce their food intake to prioritize children or other household members, including men.

Priority 3 Needs as reported, provided by Displacement Status

When it comes to the third Priority need, **Non-Food Items (NFIs)** remain significant for the returnee and host community groups, as reported by 21.4% of returnees and 20.1% of host community households.

Protection emerges as the largest need among the displaced population specifically, accounting for 16.38% of the total population surveyed. This marks a significant shift in relative importance compared to its lower ranking as a Priority 1 or Priority 2 need. Protection needs were reported by 8.4% of returnee groups and 8.6% of host community groups.

The analysis of Priority 3 needs reveals a shift towards more systemic and foundational challenges once the most acute survival needs (livelihoods and food) are accounted for. The increased prominence of NFI points to a demand for comprehensive basic services. Similarly, the significant rise in "protection", compared to priority 1 and 2, as a primary concern in this tier highlights potential underlying issues related to safety, security, and rights for the displaced community specifically.

The qualitative findings help interpret the increased visibility of protection and NFI needs at the third-priority level. Protection concerns were not always reported as direct incidents but appeared through indirect indicators linked to living conditions and access barriers. These included overcrowding, lack of privacy, inadequate gender separation in bathrooms, poor sanitation, isolation from services, dependency on host communities, and limited psychosocial support in some shelters. Similarly, NFI needs were closely linked to dignity and daily functioning, including mattresses, pillows, kitchen utensils, hygiene kits, MHM kits, diapers, washing machines, food storage items, and seasonal clothing. This suggests that protection and NFI needs should be understood as part of a broader dignity, safety, and household functionality agenda.

The increased visibility of protection and NFI needs at the third-priority level is highly relevant from a gender perspective. Items such as menstrual hygiene materials, dignity kits, diapers, underwear, bedding, clothing, lighting, and kitchen items are not secondary needs; they are directly linked to protection (feeling of safety). For women and adolescent girls, the absence of

menstrual hygiene materials, private washing spaces, safe disposal mechanisms, and clean latrines may increase shame, isolation, infection risks, and exposure to harassment.

Water, sanitation and hygiene (wash)

Water Source Distribution by Displacement Status

Dominant Water Sources

In line with Oxfam WASH practice, there is a difference between safe water for drinking and cooking vs. sufficient water for domestic and hygiene use such as laundry and bathing.

The largest water source category is water trucking, accounting for 39.86% of the entire surveyed population (28.99% displaced, 7.97% host community, 2.90% returned).

Following water trucking, public networks are the most significant source, utilized by 24.64% of the total population (12.32% displaced, 7.25% host community, 5.07% returned).

Following public networks, bottled water is a major source of water, used by 22.46% of the total population households.

The data strongly suggests that the displaced population relies heavily on potentially less stable and more costly water sources like water trucking and bottled water. The high percentage for bottled water for the displaced indicates either a lack of access to piped water or concerns about its safety. The prevalence of water trucking for the displaced further underscores reliance on emergency or costly provision methods. In contrast, 17.39% of "host community" and 9.42% of "returned" populations show reliance on "Public Network/Spring Water".

Qualitative evidence indicates that reliance on water trucking and bottled water is part of a wider WASH vulnerability pattern. WASH needs appear at three interconnected levels. First, inside collective shelters, the main concerns relate to shared facilities, overused bathrooms, lack of cleaning materials, poor maintenance, insufficient hot water, and limited gender separation. Second, at municipal level, several areas are facing increased pressure on water and solid waste systems because of the rising number of IDPs. Third, households outside collective shelters face more dispersed and less visible water access gaps, particularly where families are far from services or dependent on host communities. These qualitative findings suggest that WASH interventions should combine household-level support, shelter-level maintenance, and municipal infrastructure support.

Water Treatment Methods by Displacement Status

66% of displaced households reported using at least one water treatment method to water. The dominant treatment methods are “**boiling**” (22%) which is the single most common reported treatment method overall, reported primarily by the displaced population. “Chlorination” (12%) is another key method, predominantly used by the displaced. It is worth highlighting that usually chlorination is applied at the public source level.

22% of host community population uses water treatment methods. Mainly this population group relies on already existing filtration (8% out of 22%), followed by boiling water (6% out of the 22%). This means there is an additional burden resulting from the high fuel prices.

12% of returned population uses water treatment methods. Mainly this population group relies on filtration, boiling water, chlorination and solar disinfection (2% each). Please keep in mind that the solar disinfection treatment method works best with clear water (not very muddy/turbid). It does not remove chemicals nor heavy metals and requires sufficient sunlight and proper exposure time. If not handled properly it could cause harm.

This reveals critical differences in water treatment practices across displacement statuses. While boiling is the most prevalent method for the displaced, a significant proportion also relies on “chlorination.” The lower overall share of reported treatments from the displaced population, relative to their size, suggests that community level water sources are being treated on a regular basis. The “host community” group, while smaller, appears to be proportionally more active in water treatment, relying heavily on “filtration” methods. The returned population group relies on a wider range of water treatment methods before consuming water.

Water Quality Assessment by Displacement Status

When it comes to the Water quality concerns, a significant portion (35.51%) of the surveyed population reports experiencing “bad/not acceptable” WASH quality. This indicates a widespread challenge in WASH provision for these vulnerable groups.

While the majority of the displaced population reports “acceptable” WASH quality (47.10% of the total surveyed population), a substantial segment, representing 26.09% of the total surveyed population, experiences “bad” WASH quality.

When considering the displaced group alone, approximately 35.6% of displaced individuals rate their WASH quality as bad.

Among “host community”, 62.5% of the total surveyed population report “acceptable” WASH quality, while the remaining reported it being acceptable.

Proportionally, this means that about 37.5% of the "host community" individuals perceive their WASH quality as bad. This is a notably high proportion for a non-displaced group, suggesting broader systemic issues beyond displacement.

For the "returned" population, approximately 30.8% perceive their WASH quality as bad, indicating still a high percentage of dissatisfaction and still a significant challenge.

The data reveals a critical and pervasive issue with WASH quality across the surveyed population, affecting over a third of individuals overall. This suggests that poor WASH infrastructure and services are a widespread problem, not solely confined to those impacted by displacement, although displacement exacerbates the situation for a greater number of people. These findings underscore the urgent need for comprehensive WASH interventions that address both the specific vulnerabilities of displaced and returned communities, as well as the broader structural deficiencies affecting the general population.

The qualitative findings reinforce that WASH quality concerns are not limited to the perceived quality of drinking water. In collective shelters, WASH quality was also shaped by the condition, cleanliness, and management of shared sanitation facilities. Reported concerns included unclean toilets, overused bathrooms, poor maintenance, lack of hot water, insufficient cleaning materials, shortages of washing machines, and limited or unclear gender separation. Kfar Habou was particularly concerning, with reported toilet flooding or leakage, poor cleanliness, lack of tissue paper, and shortage of cleaning and disinfection materials. These findings show that WASH quality should be understood as a combined issue of water safety, sanitation functionality, maintenance, hygiene supplies, dignity, and infection prevention.

Reasons for Perceived Bad water Quality by Displacement Status

I- For displaced households:

The most frequently cited combination of issues for the displaced is "taste + color + visible impurities" (as this was a multiple option question) representing 22.45% of all reported reasons. This indicates severe, multi-sensory water quality problems.

"Taste" is the second most common complaint for the displaced population group, as reported by 18.37% of displaced households.

Other significant reasons for the displaced households include "color" (10.20%).

It is worth highlighting that displaced respondents residing in collective shelters reported higher acceptance levels of water quality in comparison to displaced respondents residing outside of

collective shelters (76.92% vs. 52.08% respectively). This can be attributed to the close and timely focus of ministries and Humanitarian Organizations on supporting collective shelters in WASH and deprioritizing the WASH work outside of collective shelters during the first weeks of the emergency response.

II- For Host community Population

For the "host community" population, "taste" is by far the most dominant reason for bad WASH quality, accounting for 55.52% of all reported reasons.

Color and smell are equally reported at minor levels (11.1% each). This group reports no issues with "visible impurities".

III- For Returned Population:

The "returnee" population primarily cites "taste" (75%) as the main reason for bad quality. They report no issues related solely to smell, color, or other singular impurities.

The analysis clearly indicates a profound and multifaceted water quality crisis, predominantly affecting the displaced population. While "taste" is a common complaint across all groups, its high prevalence, along with other physical indicators like "color" and "visible impurities" for the displaced, points to significant contamination and lack of treatment.

The differences in reported reasons between the groups are notable: the displaced experience a broader and more severe range of issues, particularly those involving multiple sensory perceptions of contamination. The "host community" and "returned" populations, while reporting issues, tend to focus more on "taste" as a primary concern. This suggests that while all groups face WASH quality challenges, the severity and complexity of these issues are significantly elevated for those who are displaced. Interventions must prioritize comprehensive water treatment and quality monitoring, especially for displaced communities, to address these critical health risks.

Qualitative findings also suggest that WASH risks differ between displaced households inside and outside collective shelters. Collective shelters may receive more immediate attention from ministries, municipalities, and humanitarian actors, particularly during the first phase of the emergency response. However, WASH conditions inside shelters remain uneven and depend heavily on-site management, maintenance capacity, and the condition of shared facilities. By contrast, households outside collective shelters may be less visible and may face more household-level barriers, including limited water access, affordability constraints, distance from services, and dependency on host communities. This distinction is important when interpreting WASH quality data, as households outside shelters may require more proactive outreach and community-based WASH support.

Water Quantity Sufficiency by Displacement Status

A significant portion (52.9%) of the sampled population reports that the quantity of Water (quantity) available to them is not enough. This indicates a widespread issue of inadequate WASH provision across all population groups.

Approximately 54.5% of displaced individuals find the WASH quantity to be insufficient. Among "host community", 70.8% of the total surveyed population state that WASH quantity is not enough. Finally, among "returned" group, 7.64% of the total surveyed population state that WASH quantity is not enough.

The digital needs assessment findings reveal a critical and widespread issue of insufficient WASH quantity, affecting over half (52.9%) of the total surveyed population. An interesting finding was linked to the fact that most reported insufficient quantity of water came from host community group, suggesting that the problem of inadequate WASH quantity is a systemic issue impacting the general population even more severely and beyond the war. The "returned" population stands out as the group with significantly better access to sufficient WASH quantities. There are not enough data points to know why but this is worth exploring.

These findings suggest that WASH interventions need to address not only the specific needs of displaced populations but also the broader, systemic deficits in WASH quantity that are affecting a substantial majority of the "host community" population. The contrast between the "host community" and "returned" groups also warrants further investigation to understand factors contributing to better WASH quantity access for returnees.

Qualitative data provides further explanation for the reported insufficiency of WASH quantity. In Bekaa, WASH needs were closely linked to pressure on municipal infrastructure and services. Al Ain was reported to be struggling with increased solid waste due to the high number of IDPs, while Saaide village faced a disruption to its main water source after the electrical cable connected to the water borehole was reportedly stolen. In the South and North, households outside shelters reported major water access concerns for drinking and daily use. These examples show that water quantity gaps are not only the result of household-level shortages, but also reflect wider pressures on municipal infrastructure, service continuity, and community-level systems.

Latrine Conditions by Displacement Status

The analysis of latrine conditions across population groups (displaced, host community, and returned) reveals clear disparities in both the quality and usability of sanitation facilities, with displaced populations facing the most significant challenges.

Among all sampled households, the most prominent issue is the functionality of latrines, with 56.93% of facilities reported as not functional. This represents the single largest condition observed across all groups and variables. It suggests that while sanitation infrastructure is often present in displacement settings, it is frequently unusable due to breakdowns or lack of maintenance as reported by some key informants.

Cleanliness is the second most significant issue, affecting 15.33% of facilities, further indicating gaps in routine operation and upkeep. In addition, 8.03% of all respondents report concerns related to privacy and 10.22% report safety issues, highlighting deficiencies in dignity and protection standards. By contrast, accessibility concerns are relatively minimal at 3.65%, suggesting that access to latrines is not the primary issue; rather, it is their condition and usability that are problematic.

Privacy and safety concerns, while less frequently reported overall, are significant in displacement settings (each at 8.03%). These findings highlight that dignity-related aspects of sanitation are inconsistently met, particularly for the most vulnerable populations.

Overall, the data indicates that the most urgent sanitation needs are not related to expanding access, but rather to improving the functionality and maintenance of existing facilities. Oxfam Programming is recommended to prioritize repair and rehabilitation, given the high proportion of non-functional latrines, especially among displaced populations. Strengthening operation and maintenance systems will also be critical to addressing cleanliness gaps. In parallel, targeted improvements to enhance privacy and safety, particularly in displacement settings, will be essential to ensure that sanitation services meet minimum standards of dignity and protection.

Qualitative findings strongly support the conclusion that sanitation challenges are less about the physical presence of latrines and more about whether facilities are functional, clean, safe, private, and dignified. Taken together, these findings point to the need for a strategic shift from infrastructure expansion toward service quality enhancement, with a strong emphasis on sustainability, maintenance, and user-centered design.

Food security

Household Food Stock Duration across Population Groups

The analysis of household food stock duration across population groups, displaced, host community, and returnees, highlights important differences in food security statuses, with displaced households facing the greatest constraints and variability in access to sufficient food supplies.

Among displaced households, food stock levels are highly uneven and, in many cases, limited to short durations. The one-week range indicates that 74.06% of displaced households operate with very limited food reserves lasting up to 7 days maximum and are therefore highly vulnerable to shocks or disruptions in supply.

In contrast, host community groups demonstrate generally higher levels of food stock lasting up to 30 days, with half (48.82%) reporting stock lasting 7 days. This indicates a relatively more sufficient and less extreme distribution of food. Overall, this suggests that while food stocks are not abundant, households in this group are less likely to be in acute short-term scarcity compared to displaced populations.

Returned households exhibit a pattern broadly similar to the host community group, though with slightly higher concentrations in certain short- and medium-term categories. For example, 52.05% of returnee households indicated having food stocks lasting at least one week, indicating some degree of short-term vulnerability.

Overall, these findings suggest that displaced households face the greatest food security challenges, characterized by both acute short-term shortages and unequal distribution of available resources. Host community and returned populations demonstrate relatively more stable conditions yet this remains volatile, though still with limited long-term food reserves. The data underscore the need for targeted food assistance interventions that prioritize households with critically low food stocks, particularly among displaced populations, while also supporting more consistent and predictable access to food across all groups.

Qualitative findings confirm that food insecurity is widespread but expressed differently depending on shelter type. Inside collective shelters, food support is often connected to collective meal arrangements, food storage, shared kitchens, and cooking materials. For example, some shelters were receiving daily meals but still lacked sufficient refrigerators, freezers, plates, cups, trays, pots, or other basic kitchen items. In Kfar Habou, the absence of a fridge or freezer reportedly forced residents to buy ice to preserve food. In Al Hosayniyeh/Metrit, only one refrigerator was available despite daily meals being received from humanitarian actors. Outside collective shelters, food needs were more household-based, with families in areas such as Ezel and Bqarsouna reporting difficulty securing food and other basic needs. This suggests that food security support should consider not only food availability, but also storage, preparation, household composition, and living arrangement.

Preferred Food Assistance across Population Groups

Among displaced households, the demand for food assistance is both substantial and concentrated around in-kind support, particularly food baskets. Nearly half of displaced

households (49.50%) report a need for food baskets, making this by far the most dominant form of assistance required across all categories and groups. This finding is justified as 74.69% of this assessment's respondents reside outside of collective shelters and most Humanitarian assistance prioritized collective shelters. An additional 5.53% report needing food baskets in combination with other forms of support, further reinforcing the centrality of this modality. There is also notable demand for ready-to-eat (RTE) food assistance among displaced populations residing inside of collective shelters. Approximately 6.32% of households report a need for RTE food, making it the second most requested modality after food baskets. Requests for hot meals are comparatively limited, with 3.23% of households reporting a need for standard hot meals – as this is a multiple option question, the hot meals were reported as a need in combination with other services. This might be interpreted to the fact that this is looking low because the minority of respondents are displaced households residing inside of collective shelters.

In contrast, host community households by displacement report significantly lower levels of food assistance needs across all categories. Food baskets are still the most reported food assistance needed by this population group as reported by 67.45% of host community households.

Returned households display a similar pattern to host community populations, though with slightly higher needs in certain categories. As with host community households, food baskets are the most reported modality with 65.8%. Overall, the scale of assistance required among returned households remains relatively low but suggests some residual vulnerability.

Across all population groups, food baskets clearly emerge as the primary modality of assistance, but the scale of need varies dramatically. The contrast between displaced households (49.50%) and both host community and returned households (each 7.94%) underscores the disproportionate burden faced by displaced populations. Ready-to-eat food assistance also plays an important secondary role, particularly among displaced households (9.22%), reflecting the need for flexible and immediately consumable food options.

Hot meal assistance, by comparison, represents a very small share of reported needs across all groups, consistently remaining below 2%. This suggests that while hot meal programs may be appropriate in specific contexts and specifically inside of collective shelters, they are not the preferred or most widely needed form of assistance in this setting.

Overall, the findings highlight a clear prioritization for food assistance interventions. Displaced populations require urgent and large-scale support, primarily through food basket distributions, identified for both households inside and outside of collective shelters, complemented by Ready-to-Eat (RTE) kits specifically for households residing inside of collective shelters. In contrast, needs among host community and returned populations are significantly lower and more limited in scope, suggesting that targeted or transitional assistance approaches may be more appropriate

for these groups. Oxfam in Lebanon cross-checks the Food Security Sector guidance before intervening but eventually serving the households in need in the best way possible.

The qualitative findings suggest that food assistance modalities should be adapted to the practical realities of each displacement setting. Food baskets are most relevant for households outside collective shelters and for families who are responsible for preparing their own food (host community) - this is a recommendation for Oxfam to reconsider its outreach and targeting approach. Ready-to-eat food and hot meals are more appropriate in collective shelter settings where cooking space, privacy, utensils, or fuel are limited. However, in shelters where meals are already being distributed, complementary support may be equally important, including gas for cooking, kitchen utensils, food storage items, and hygiene measures for safe food preparation. This means that food assistance should not be designed only around the type of food provided, but also around whether households have the means to store, prepare, and consume food safely and with dignity.

These results point to the importance of aligning food assistance strategies with both the scale and type of need, ensuring that interventions for displaced populations are sufficiently robust while maintaining flexibility to address smaller, residual needs among other groups.

protection

Protection Threats by Household Status

In this digital needs assessment, 32.26% of households reported financial negative coping mechanisms “debt” as the most prevalent to protection concerns. This challenge is overwhelmingly concentrated among displaced households, which account for roughly 75% of all cases of financial negative coping. Host community and returnee households account for 12.5% each. The prominence of financial negative coping indicates widespread economic stress at household levels disregarding the displacement status, while displaced households bear the largest burden. This means that households are increasingly relying on debt as a negative coping mechanism to cover essential basic needs, including rent, and food. While borrowing may temporarily help families avoid immediate harm, it can quickly create or deepen protection risks when households are unable to repay. In particular, rent-related debt, as reported by 59% of key informants, triggers disputes with landlords, threats of eviction, informal pressure, harassment, or legal action, especially where tenants lack written rental agreements, legal documentation, or access to legal aid.

Debt also increases psychosocial distress, as reported by 54% of key informants. Families facing repeated payment demands often experience heightened stress, anxiety, shame, family tension,

and reduced sense of safety. The IASC MHPSS Guidelines recognize that emergencies expose affected populations to severe distress and require coordinated responses to protect and improve mental health and psychosocial well-being.

Oxfam in Lebanon Gender in IPC study shows that women shoulder the shame of debt and small loans while caregiving responsibilities bring fatigue and anxiety, while men take larger loans. This is tightly linked to the societal pressures imposed on genders.

The second most reported protection threat was the limited (perceived) physical insecurity status as reported by 12.09% of households overall. Displaced households represent the vast majority of this group at approximately 90% of insecurity cases. No insecurity was recorded among households classified as host community. This finding is significant regarding the ongoing safety and protection vulnerabilities, particularly for people who remain displaced.

Eviction or lack of access to shelter affects 7.26% of households in total. Displaced households account for 66.7% of all cases of eviction. Housing insecurity is therefore primarily a displaced-household problem, though some instability is also evident among households described as host community which might be recently affected by the escalating war.

Access-to-services issues appear in two main categories. In the first access-to-services measure, 3.23% of households overall reported problems. In the second access/financial-coping access measure, 4.03% of households are affected. Combined, these access-related indicators show modest but meaningful service gaps across household types, with both displaced and returned households demonstrating needs. Although the proportion of households reporting access-to-services challenges remains relatively modest, these findings point to meaningful protection concerns. When households are unable to access essential services, or when they must rely on financial coping mechanisms to do so, this may indicate barriers linked to cost, documentation, mobility, access to information, discrimination, safety, or service availability. These barriers can increase households' exposure to protection risks, particularly for displaced and returned families who may already face insecure housing, disrupted livelihoods, limited social networks, and legal or administrative constraints.

Discrimination was reported by 2.42% of households overall. Displaced households account for about 66.7% of discrimination reports and host community households for about 33.3%. No discrimination was reported among returned households. While a smaller proportion overall, reported discrimination is concentrated among displaced groups and requires monitoring and referral pathways which Oxfam in Lebanon programming can focus on.

Qualitative findings indicate that protection risks may be underreported when they are understood only as direct incidents, complaints, or clearly identifiable threats. Several risks emerged indirectly through the living environment and access constraints. In collective shelters,

overcrowding, lack of privacy, inadequate gender separation in bathrooms, poor sanitation, and limited psychosocial support may increase protection risks, particularly for women, girls, children, older persons, persons with disabilities, pregnant women, and people with chronic illnesses. In Barjein Municipality shelter, limited attention to mental health and psychosocial well-being was specifically noted. Outside shelters, protection concerns were linked to geographic isolation, limited access to services, transportation barriers, and difficulty accessing medication, particularly in areas such as Kharayeb El Hermel. This suggests that protection monitoring should include environmental risks, service access barriers, and household-level vulnerabilities, not only reported protection incidents. The findings also show that relations between IDPs and host communities were described as respectful and positive in some locations, including Marj and Deir El Ahmar. However, in parts of Bekaa, municipalities reported that IDPs are heavily dependent on host communities for food, clothes, water, and other daily needs, particularly in Al Ain, Saaide, and Bouday. While this reflects strong community solidarity, it also creates a risk of exhaustion or future social tension (similar to what happened in previous crises) if support is directed only to displaced households and does not also consider the capacity of host families, municipalities, and local services. This reinforces the need for conflict-sensitive targeting that includes both displaced households and vulnerable host communities. In summary, the needs assessment shows that 32.26% of households are employing financial negative coping strategies (predominantly displaced households), 8.06% experience insecurity (almost entirely displaced), 7.26% face eviction or no shelter access (majority displaced), 4.03% face access-to-services challenges (spread across displaced, returned, and host community groups), and 2.42% report discrimination (mainly displaced). These findings indicate that displaced households carry the largest share of protection risks across economic, safety, and housing dimensions and should be prioritized for targeted cash assistance, shelter support, protection monitoring, and improved access to services.

Non-food items (nfi)

The digital needs assessment findings reveal that 74.79% of the overall households reported the need for cash assistance. This is segregated as follows: 75.78% of displaced households, 75.05% of host community households and 68.17% of returned households. The findings point to a widespread and systemic level of economic vulnerability indicating that hardship is not confined to a specific group but affects the population broadly. The minimal variation between displaced households (75.78%) and host community households (75.05%) suggests that displacement status is not the primary determinant of need; instead, the crisis appears to be affecting entire communities in Lebanon, including those hosting displaced populations, likely due to shared pressures such as rising living costs and limited income opportunities. Although returned

households report a somewhat lower level of need (68.17%), the fact that more than two-thirds still requested cash assistance shows that return does not equate to recovery, and that reintegration conditions remain fragile.

In parallel, 10.25% of the overall households reported the need for winter items, while 7.20% of the overall households reported the need for fuel. These figures suggest that seasonal needs are present but not widespread, especially when compared to more universal demands like cash assistance. The data indicates that the majority of households are either already equipped for winter conditions or are prioritizing other, more immediate needs. Mostly the displaced households reported the need for winter items and fuel and fairly so.

The slightly higher demand for winter items compared to fuel may imply that basic cold-weather goods (e.g., clothing, blankets) are a more common gap than ongoing energy needs, or that households are finding alternative coping mechanisms for heating, such as reducing usage or relying on shared resources. At the same time, the relatively lower percentage for fuel could mask hidden vulnerability, as fuel is often expensive and households may underreport this need or adapt by limiting consumption rather than expressing demand. In parallel, the regional insecurity level increased the prices of fuel by more than 50% (between January and May 2026) which would increase the vulnerability of households and their ability to cover the fuel costs. Add to that, the fuel price increase impacts other services (such as transportation, electricity, and others).

Qualitative findings strongly support the high preference for cash assistance reported in the digital survey. Households described cash as necessary not only for general income support, but also for rent, household expenses, gas for cooking, transportation, medication, diapers, infant milk, and items not included in standard distributions. In Marj, for example, concerns were raised about the lack of cash support for items such as diapers, infant milk, and internet access needed for children's online schooling. This indicates that cash assistance is valuable because it allows households to respond to diverse and changing needs that cannot be fully anticipated through fixed in-kind packages, particularly where markets remain functional, but affordability is the main barrier.

Accountability to affected populations

Accountability Awareness by Household Status

A significant majority (69.3%) of households surveyed do not know how to file a complaint, leaving only 30.7% aware of complaint mechanisms. 68.84% of the sample households are displaced and unaware, and 31.26% are displaced and aware. Host community households represent 63.46% unaware and 36.54% aware, while returned households represent 77.57%

unaware and 22.43% aware. These findings indicate a critical gap in accountability and access to protection services, especially among displaced populations, and call for urgent targeted outreach, accessible feedback channels, and monitoring to raise overall awareness toward at least 50% of households affected by the Israeli war within 6–12 months of Programming.

Accountability Mechanisms by Household Status

The preferred feedback mechanism is overwhelmingly **WhatsApp** as reported by 78.98% of all households (segregated as follows: 59.89% of displaced households, compared with 9.38% of host community and 9.71% of returned households). Face-to-face reporting is a distant second, with 11.98% of overall answers (segregated as follows: 9.60% of displaced, 1.24% of host community, and 1.13% of returned households preferring this in-person channel). SMS and other mechanisms are less preferred as reported by households themselves (less than 9%). These data points indicate that any complaint and feedback system investment should prioritize accessible, secure WhatsApp-based channels, especially to reach displaced populations who might face more limited movement, while retaining limited in-person options for those without reliable digital access, limited connectivity and less trust in digital solutions.

While WhatsApp is the preferred feedback channel, it should not be assumed to be equally accessible or safe for all groups. Some women and girls may not own personal phones, may share phones with male relatives, may lack privacy to report sensitive issues, or may fear that messages will be seen by others. Migrant women may face language barriers, while older persons and persons with disabilities may prefer verbal or face-to-face channels. Oxfam should therefore maintain multiple safe feedback options, including WhatsApp, phone calls, in-person reporting, outreach through trained women staff, community focal points, and confidential referral pathways.

Qualitative findings reinforce the importance of strengthening accountability systems. During several collective shelter visits, Oxfam accountability cards were distributed and staff actively encouraged participants to share feedback. However, the absence of complaints in some locations should not be interpreted as evidence that problems do not exist, especially where significant unmet needs were observed. Low complaint reporting may reflect limited awareness, lack of trust, fear of consequences, preference for verbal communication, short engagement periods, or uncertainty about whether feedback will lead to action. This is consistent with the digital survey finding that most households do not know how to file a complaint and highlights the need for repeated, accessible, and trusted communication on available feedback channels.