Multi-Sector Needs Assessment (MSNA) 2025

Key WASH Findings

Lebanon, November 2025











01

Scope & Methodology

Objectives

01

Provide detailed overview of the current humanitarian needs and gaps of the crisisaffected population by sector and across sector

03

Enhance current humanitarian response plans and provide input for future collective planning. Inform the 2026 humanitarian response planning and sectoral and overall People in Need (PiN) and severity calculations.

02

Identify variations in need amongst population groups - Lebanese, Palestinian Refugee in camps (PRL, PRS), Migrants (live out) - and geographical areas – Baalbeck, Bekaa, South and Nabatyeh

04

Conduct a thorough inter-sectoral analysis to assess the magnitude and severity of humanitarian needs; and identify differences in needs among geographical areas, population groups, and vulnerability profiles.

Population Coverage and Data Collection



REPRESENTATIVE COMPLETED SURVEYS

4,277

Data in South Lebanon's 10-km border belt was collected by REACH and Nabaa under a traffic-light access system co-reviewed with ACTED Security Department: Red (no-go), Orange (go with adjustments), and Green (go). Sampling points were filtered by access status; Red cadasters were excluded, Orange ones were reached with controlled, while Green followed standard GPS-based selection. Quality and safety were safeguarded via same-day go/no-go approvals and paired teams with check-ins with all substitutions logged for transparent analysis.

- 2,177 Surveys with Lebanese HHs
- 707 Surveys with PRL HHs
- 489 Surveys with PRS HHs
- 904 Surveys with Migrant HHs



DATA COLLECTION

From 11 August 2025 to 23 September 2025



POPULATION OF INTEREST

The population of interest is households living in Lebanon across three groups: Lebanese nationals, Palestinian refugees (PRL/PRS) in official camps, and live-out migrant households.

Focus is on areas covered by the MSNA (South, Nabatieh, Bekaa, and Baalbek-Hermel), including communities within ~10 km of the southern border affected by insecurity and service disruptions.

All analysis is household-based with some indicators on individual level, with disaggregation by sex of head of household and other vulnerability characteristics where possible.

Coverage and Sampling

- Lebanese data collected in 11/12 districts in 4 governorates. (Not in Hermel district)
- In-camp Palestinian Refugee (PRL & PRS) data collected in 7 camps in 4 governorates.
- Migrant data collected in 8 governorates.
- Data is **representative** at a 90% confidence level and a 7% margin of error for Lebanese populations at district level and for Live-out Migrants at governorate level. And at a 90% confidence level and a 7% margin of error at the In-camp Palestinian population.

Challenges:

Security risks in South Lebanon and Nabatieh limited field movement. Daily changes in access permissions required close coordination with partners and governors. Enumerators faced movement restrictions and disruptions in highly affected areas.

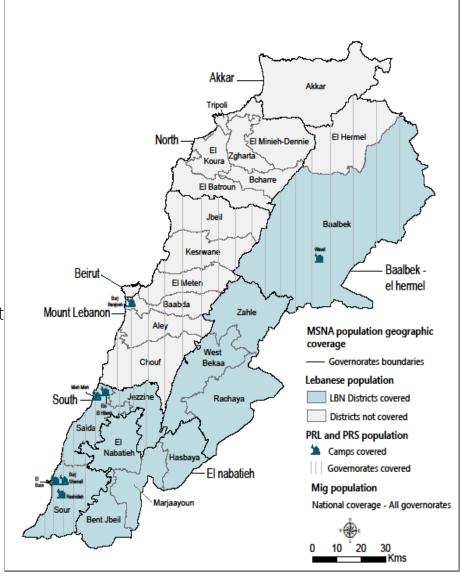
Limitations:

Non-response among well-off households may have slightly skewed results.

Individual findings should be considered indicative as information was provided by the head of household rather than individual members.

For migrants, data collection often took place at employers' premises, which may have influenced response accuracy.

For Baalbek Hermel governorate data is missing Hermel district, should read the results considering this limitation



Partners

MSNA 2025 won't be completed without partner's support







Demographics

Demographics

Household Composition



3.35 Average Lebanese HH size

3.31 Average PR HH size



7,165 Lebanese HH members

4,023 PR HH members

Le	banese Hi	H PR HH	
4	37%	43%	of HHs have children (under 18 of age)
Ťı	42%	41%	of HHs have older persons (60+)
	18%	29%	of female-headed HHs
3	16%	23%	of HHs have disabled persons*
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	Lebanese HH	PR HH
	52 %	56%
Ť	48%	44%

Demographics

Household Composition



1.7 Average Migrant HH size



1,552 Migrant HH members





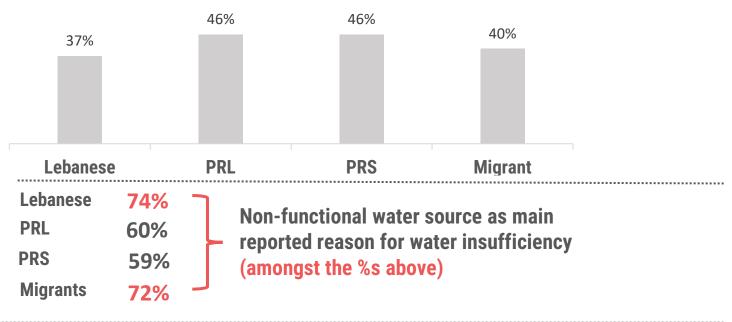
- FHHs are smaller on average than MHHs (1.53 vs 1.78 members). Smaller FHHs may have fewer working-age earners and thinner informal support networks.
- MHHs include more adults 18–64 (1.45 vs 1.28). MHHs may have relatively higher labor-market engagement potential—but also higher exposure to job/income shocks.
- Heads with a reported disability are more common among FHHs (6%) than MHHs (4%). Targeted accessibility and cash/in-kind support may be especially relevant for FHHs..
- FHH share peaks in South (46%) and Mount Lebanon (42%), and is lowest in Baalbek–Hermel (0%) in this sample. Prioritize FHH-sensitive programming and outreach in South & Mount Lebanon.

^{*} Using Washington Group Questions

03 WASH Findings

Water Access and Availability

% of HHs reporting water insufficiency in the 30 days prior to DC:



Main coping mechanisms for water insufficiency	Lebanese	PRL	PRS	Migrants
Reduce water consumption (non-drinking)	17%	15%	22%	24%
Spend money on water instead of other purposes	15%	1%	1%	5%
Fetch water at a further source	11%	7%	10%	5%
Rely on less preferred drinking water	7%	10%	8%	5%
Reduce water consumption (drinking)	4%	6%	2%	6%

% of Lebanese HHs reporting water insufficiency in the 30 days prior to DC in 2023 vs 2025:

District	2023 (%)	2025 (%)	
Baalbek	37%	50%	13 %
Jezzine	19%	18%	1%
Saida	35%	42%	1 7%
Sour (Tyre)	18%	35%	17 %
West Bekaa	12%	20%	1 8%
Zahle	11%	36%	25%
Rachaya	15%	60%	45%
Hasbaya	33%	45%	12 %
Marjaayoun	27%*	46%	1 9%
Nabatieh	27%*	58%	1 31%
Bint Jbeil	27%*	36%	1 9%
Total (All HHs)	27%	41%	

^{*} Data for these districts were not collected in 2023; national averages from MSNA 2023 were used as reference values.

Water Access and Availability

% of HHs by type of primary source of drinking water	Lebanese	PRL	PRS	Migrants
Improved drinking water sources	92%	99%	99%	98%
Bottled water (incl. water refilling shop)		27%	26%	63%
Bottled water	31%	15%	17%	45%
Water refilling kiosk/shop	20%	12%	9%	18%
Piped	32%	52%	57%	28%
Protected well	■ 5%	13 %	■ 8%	1 2%
Unimproved drinking water sources	8%	1%	1%	2%

Areas with the highest % of HHs reporting drinking from non-improved source of water:

Very low subset

Lebanese HHs: Baalbek district (20%)

PRL HHs: Wavel camp (5%)

PRS HHs: Wavel and Rachidieh camps (7%)

Migrant HHs: Baalbek Hermel governorate (7%)

Areas with the highest % of HHs reporting drinking from bottled water:

Lebanese HHs: Marjaayoun district (54%)

PRL: Burj El Barajneh cámp (57%) PRS: Burj El Barajneh camp (51%) Migrants: Akkar governorate (69%)

Drinking water

Between 2023 and 2025, water access patterns shifted noticeably across groups:

- For Lebanese households, reliance on **bottled water** (incl. refilling shops) remained high but slightly decreased (54% → 51%), while piped water use increased marginally (29% → 32%), and unimproved sources increased from 3% to 8%, signalling growing affordability and infrastructure challenges.
- Among PRL households, piped water remained but bottled water use decreased (45% → 27%), suggesting lower affordability to purchase bottled water; unimproved sources also increased (0% → 1%), though still minimal.
- For live-out migrants, bottled water reliance decreased (71% \rightarrow 63%), while piped water slightly increased (24% \rightarrow 28%), reflecting persistent exclusion from public networks and growing costs. Overall, the trend shows greater dependence on piped water and a rise in unimproved sources, pointing to worsening affordability and service reliability.

Water Access and Availability

Drinking water



Areas with the highest proportion of HHs reporting collecting water for drinking:

Lebanese HHs: Hasbaya district (92%) PRL HHs: Burj EL Barajneh camp (92%) PRS HHs: Burj El Barajneh camp (86%)

Live-out migrant HHs: Nabatieh governorate (100%)

Areas with the highest average of time needed to collect water for drinking:

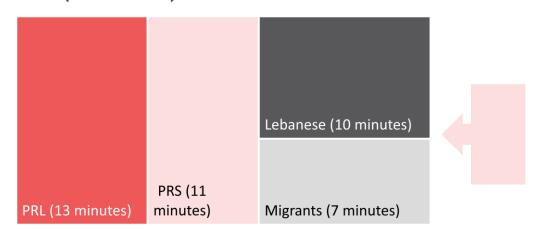
Lebanese HHs: Baalbek district (17 minutes)

PRL HHs: Burj El Chemali (24 minutes)

PRS HHs: Wavel camp (17 minutes)

Live-out migrant HHs: Nabatieh Governorate (20 minutes)

% of HHs reporting a need to collect water for drinking*, by average time (in minutes) needed:



While a relatively high proportion of households still report the need to collect water for drinking — particularly among Lebanese (36%) and migrant (50%) households — the average time required remains limited (7–10 minutes), suggesting that distance or waiting time are not the main barriers. Instead, the findings indicate structural and supply-related constraints, as water simply does not reach premises in many areas, especially in Hasbaya, Burj el Barajneh, and Nabatieh. This points to gaps in infrastructure and reliability rather than physical access time.

^{*}round trip by walking, queuing and time needed to fetch water.

Sanitation facility



None of HHs across all population groups reported using unimproved sanitation facility

% of HHs sharing sanitation facility, <u>among HHs with pit latrine</u> <u>or septic tank</u>

	Lebanese	PRL	PRS	Migrants
2025	5%	2%	2%	35%
2023	< 1%	4%	NA	33%

- Of the 5% that share sanitation facilities among Lebanese households,
 22% are located in Nabatieh district, pointing to localized infrastructure challenges in that area.
- Of the 35% that share sanitation facilities among Migrant households, an overwhelming 91% reside in Baalbek El Hermel governorate, indicating severe localized vulnerability.

% of HHs by TOP 3 reported using pit latrine or septic tank as main sanitation facility used

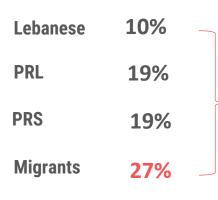
Lebanese	PRL	PRS	Migrants
31%	15%	8%	7%
(n=662)	(n=122)	(n=68)	(n=75)

% of HHs <u>with pit latrine or septic tank</u>, by having them not emptied (not at all or only covered and left undisturbed)

Lebanese	PRL	PRS	Migrants
56%	47%	57 %	25%

A considerable 31% of Lebanese households use flush/pour to septic tanks, which require regular emptying. Combined with the fact that over half of these facilities are never emptied, this represents a critical gap in safe sanitation management.

Access to hygiene items



HHs reported issues in accessing hygiene NFI

However, relying on less preferred type of items was top common reported coping mechanism used to cope accessing hygiene NFI, as reported by 6% of Lebanese HHs, 10% of PRL HHs, 6% of PRS HHs and 17% of Live-out migrant HHs

Areas with the highest proportion of HHs reporting issues with accessing hygiene NFI:

Lebanese HHs: West Bekaa district (37%)

PRL HHs: Wavel camp (37%)

PRS HHs: Burj El Chimali camp (33%)

Migrant HHs: Baalbek el Hermel governorate (61%)

Access to hygiene NFIs has stabilized overall, but inequality across districts and population groups has deepened.

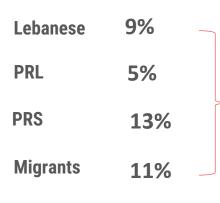
Support should prioritize districts with an increase in the % of HHs with issues accessing NFIs (Nabatieh, Baalbek) and migrant communities, while maintaining market-based interventions that sustain recent gains in urban hubs like Saida and Zahle.

% of HHs reporting having issues accessing NFIs in 2023 vs in 2025

District	2023 (%)	2025 (%)	
Baalbek	18%	21%	1 3%
Jezzine	16%	2%	1 4%
Saida	18%	7%	11%
Sour (Tyre)	33%	3%	30%
West Bekaa	37%	3%	34 %
Zahle	42%	7%	35 %
Rachaya	34%	2%	32 %
Hasbaya	26%*	13%	13%
Marjaayoun	26%*	14%	12 %
Nabatieh	26%*	29%	1 3%
Bint Jbeil	26%	10%	1 6%
Total (All HHs)	26%	21%	

^{*} Data for these districts were not collected in 2023; national averages from MSNA 2023 were used as reference values.

Access to menstrual materials



HHs reported NO issues in accessing menstrual materials*

However, The most often reported reason behind not having access to menstrual materials was their high price, as reported by 6% of Lebanese households, 5% of PRL households, 12% of PRS HHs and 7% of live-out migrant households

Areas with the highest % of HHs reporting having access to menstrual materials:

Lebanese: Hasbaya and Rashaya districts (100%)

PRL: Burj el Chimali, Rashidieh and Wavel camps (100%)

PRS: Mieh Mieh, Rashidieh and Wavel camps (100%)

Migrant: Nabatieh governorate (100%)

*Among HHs with at least one woman 15-49 y/o, interviewed by a female enumerator

% of HHs reporting having issues accessing menstrual materials in 2023 vs in 2025

District	2023 (%)	2025 (%)	
Baalbek	6%	10%	1 4%
Jezzine	7%	5%	2 %
Saida	25%	8%	17%
Sour (Tyre)	27%	5%	22%
West Bekaa	33%	6%	1 27%
Zahle	16%	25%	1 9%
Rashaya	18%	0%	18%
Bint Jbeil	13%***	2%	11%
Nabatieh	13%***	2%	11%
Hasbaya	9%	0%	9 %
Marjaayoun	13%***	1%	12 %
Total (All HHs)	13%	9%	4 %

^{**}Data for these districts were not collected in 2023; national averages from MSNA 2023 were used as reference values

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Spending on water/hygiene

% of HHs income spent on water and hygiene products:

	Lebanese	PRL	PRS	Migrants
% of monthly HH income spent on water	11%	2%	2%	5%
% of monthly HH income spent on hygiene items	10%	11%	10%	7%

- Lebanese HHs spend 11% on water (up from 5% in 2023) vs. 2–3% for PRL/PRS with UNRWA support.
- Hygiene spending steady (9–12%) across groups.
- Interestingly, the only population group that reported spending money on water that should be used for other purposes as a coping mechanism were Lebanese households (15%), with the highest % in Marjaayoun district (41%). This highlights a key inequity: some population groups do not have the privilege or financial capacity to consider paid water access as a coping strategy, underscoring disparities in economic resilience and service availability.

All HH income was collected in USD

The proportion of income was calculated only on those HHs that reported an income >1 USD

The highest and lowest values in spending were transformed into averages closest to them to prevent skewing the results.

The proportion of expenses is calculated considering all expenses of the household

% of monthly HH income spent on water, as reported by Lebanese HHs by district

District	2025 (%)
Baalbek	11%
Jezzine	4%
Saida	7%
Sour (Tyre)	2%
West Bekaa	4%
Zahle	7%
Rashaya	8%
Bint Jbeil	9%
Nabatieh	8%
Hasbaya	7%
Marjaayoun	14%
Total (All HHs)	11%

Conclusion

- WASH services in assessed areas show critical gaps impacting water, sanitation, and hygiene:
- Water insufficiency is rising sharply, with app 42% of assessed households reporting shortages in the past month of data collection (up from 27% in 2023). Districts like Nabatieh (58%), and Baalbek (50%) are most affected.
- Structural issues dominate: 36% of Lebanese households and 50% of migrants must collect drinking water because supply does not reach premises, while reliance on unimproved sources among Lebanese rose from 3% to 8%, signaling affordability and infrastructure decline.
- Sanitation and hygiene access remain uneven and risky:
- While most households use improved facilities, 31% of Lebanese and 15% of PRL households depend on septic tanks or pit latrines, with over half never emptied, posing major health hazards.
- Migrants face increased challenges in accessing WASH services: 35% share sanitation facilities, mostly in Baalbek-Hermel, where also report difficulty accessing hygiene items in this district, highlighting gaps in service coverage
- Coping strategies include relying on less preferred items, especially among migrants (17%).
- Economic strain compounds WASH challenges:
- Lebanese households spend 11% of income on water (up from 5% in 2023), while PRL/PRS spend only 2–3% due to UNRWA support.
- Around 15% of Lebanese households reported diverting money from other essentials to buy water, peaking at in Marjaayoun (41%). These trends highlight growing inequities in affordability and access, requiring urgent sectoral coordination to address infrastructure gaps, affordability barriers, and localized vulnerabilities.

Thank you for your attention





