

2025 Vulnerability Assessment of Syrian Refugees (VASyR)

Executive Summary

INTRODUCTION

The Vulnerability Assessment of Syrian Refugees (VASyR) in Lebanon provides a multi-sectoral overview of Syrian refugees at the individual and household level. The 2025 assessment marks the thirteenth annual survey evaluating the living conditions of Syrian refugee in the country. The contents of this report are jointly issued by the United Nations High Commissioner for Refugees (UNHCR), the United Nations Children's Fund (UNICEF) and the United Nations World Food Programme (WFP).

METHODOLOGY

Data for the 2025 VASyR was collected during 15 May to 28 June 2025 across the country. Data was collected from over 3,546 randomly selected Syrian refugee households through face-to-face interviews, providing data representative at the district and governorate levels. The questionnaire, administered to the head of households or another adult household member, consisted of around 750 conditional and unconditional questions. Data was collected at the household and individual levels, and included details pertaining to general demographics, legal documentation, safety and security, shelter, water, sanitation and hygiene, health, food security, livelihoods, expenditures, food consumption, debt, coping strategies and assistance.

DEMOGRAPHICS

Overall, key population-level demographics, namely age and sex distributions, in the Syrian refugee population have remained stable over the past several years. In general, there was an even distribution of males and females. Individuals under 18 accounted for almost half of the population (48 per cent).

The average household size was 4.6 individuals per household, almost similar to last year. Female-headed households were, on average, smaller than male-headed households (3.9 individuals compared to 4.8). The share of households headed by a woman increased slightly from 17 per cent in 2024 to 20 per cent, with regional variation. The governorates with the highest proportion of female-headed households were Akkar (36 per cent), Baalbek Hermel (26 per cent), and Bekaa (25 per cent). Those with the lowest were Beirut (10 per cent), and Mount Lebanon (12 per cent). Twenty per cent of household heads reported having no education and this proportion was substantially higher among female headed households (36 per cent) as compared to male headed households (15 per cent).

The average dependency ratio¹ in Syrian refugee households was 0.78 (lower than previous year 0.86) indicating an almost even distribution of dependents and non-dependents within a household. The dependency ratio was lower among female-headed household (0.73) than male-headed households (0.8), which reflects higher proportion of dependents among male-headed households.

DISABILITY

Similar to the 2023 approach disability was measured using the Washington Group Short Set – Enhanced for ages five and above which included ten domains: vision, hearing, mobility, communication, remembering, self-care, upper body function, fine motor skills, anxiety, depression and the Washington

¹ Dependents are household members aged 14 or younger or 60 years or above. Dependency ratio is the number of dependents in the household divided by the number of non-dependents in the household.

Group/UNICEF Child Functioning Module for ages 2–4 which included seven domains: vision, hearing, mobility, understanding, cognition, learning, upper body fine motor skills)

Eleven per cent of the Syrian refugee population were found to have difficulties, which indicate a disability, with the lowest rates found among individuals aged 2–4 (4.5 per cent) and the highest rates among individuals aged 60 and above (40 per cent). The prevalence of disability varied across governorates. South Lebanon has the highest rate at 20 per cent, while Mount Lebanon has the lowest at 5 per cent. At the household level, 15 per cent of household heads had a disability, with higher rates among female heads of households (22 per cent) compared to male heads of households (14 per cent).

HEALTH

Demand for and access to health care

Eleven per cent of individuals had a health problem that required access to health care in the last three months (compared to 13 per cent in 2024, 17 per cent in 2023, and 18 per cent in 2022). Of those, 82 per cent were able to access the care needed (compared to 78 per cent in 2024, 79 per cent in 2023, and 83 per cent in 2023). The ability to access the needed care differs by region, with the lowest rates in Mount Lebanon, where only 63 per cent of individuals in need of healthcare reported being able to access it. North Lebanon follows this at 78 per cent. The highest access rates are noted in Akkar (97 per cent) and Beirut (91 per cent).

Among those who needed Primary Health Care (PHC), the most cited needs were access to medications (39 per cent) and a consultation for acute conditions (31 per cent). Other needs included consultations for non-communicable diseases (19 per cent) and Lab and diagnostic services (10 per cent).

Among those who needed Secondary Health Care (SHC), the most frequently cited need was a hospital-based laboratory or diagnostic procedure (40 per cent). Other needs included elective or non-life-saving surgery (19 per cent), emergency life-saving surgery including trauma care (16 per cent), other specialized services (10 per cent), cancer treatment (8 per cent), and safe delivery services (7 per cent).

The share of households that reported knowing where to access emergency medical care or services decreased to 78 per cent compared to 86 per cent in 2023-2024. The regions with the highest proportion of households that knew where to access emergency case were El Nabatieh (89 per cent) and South Lebanon (86 per cent).

Medication barriers and coping mechanisms

Over half of the households (57 per cent) reported that they needed medication similar to 2024. These included 54 per cent in need of acute disease medication, while the remaining 46 per cent were for chronic diseases. In addition, 89 per cent of those in need of medication were able to access the medicines needed, with some variations by region, ranging from 96 per cent in Beirut to 81 per cent in Bekaa.

For those unable to access the required medication, the main barriers cited were cost of the medication (81 per cent) and inability to afford a doctor's visit cost for a prescription (26 per cent). A small proportion of households reported that the medication needed was not available in the health facility (14 per cent). In order to cope with not accessing medication, households were adopting certain coping strategies such as switching to substitutes (40 per cent compared to 37 per cent in 2024), borrowing money (42 per cent similar to 2024), rationing existing medication (23 per cent compared to 29 per cent 2024), and reducing non-medical expenses (13 per cent compared to 5 per cent in 2024).

Women's Health

The rate of women who reported receiving at least four antenatal care visits during their pregnancy increased from 54 per cent in 2024 to 66 per cent. It was lowest in South Lebanon (29 per cent) and highest in Mount Lebanon (90 per cent). For post-natal care, 73 per cent of women reported that they received post-natal care during the first 24 hours after birth, 16 per cent between 48 and 72 hours after birth, 3 per cent between 2 weeks after birth and 2 per cent up to six weeks after birth.

The percentage of women aged 15 to 45 who are not single and perceived they needed contraceptives for family planning was 6 per cent (10 per cent in 2024), of which 100 per cent were able to access the needed contraceptives. Women were mainly seeking family planning and contraceptives from pharmacies (36 per cent), private clinics or private medical facilities (22 per cent), and PHCC, PSU, dispensaries & SDCs (19 per cent).

CHILD HEALTH

Child Sickness

The child health results indicate that childhood illness remains common, particularly among younger children and in more vulnerable shelter types, while care-seeking for diarrhoea is substantial but uneven across locations. Immunization coverage is moderate, with clear variation by age and governorate, and delivery channels differ by shelter context (including greater reliance on outreach/mobile services in non-permanent settings).

Overall, 18 per cent of children aged 0–5 were reported sick in the past two weeks, with similar levels by sex (18 per cent boys; 18 per cent girls). Illness was markedly higher among younger children (25 per cent ages 0–2) than among those ages 3–5 (12 per cent).

Reported sickness was higher among children living in non-permanent shelters (21 per cent) compared with residential shelters (17 per cent) and non-residential shelters (12 per cent). By governorate, reported sickness ranged from 8 per cent in Beirut and Mount Lebanon to 28 per cent in Bekaa.

Diarrhoea-related illness is prominent in the results where 50 per cent of children aged 0–5 were reported with diarrhoea in the past two weeks, and 13 per cent with severe diarrhoea. Caregivers sought professional advice for diarrhoea for 67 per cent of cases.

Geographic variation is substantial. Reported diarrhoea ranged from 31 per cent in South to 60 per cent in Baalbek-Hermel, while care seeking ranged from 39 per cent in Mount Lebanon to 100 per cent in Baalbek-Hermel and Nabatieh (noting smaller population counts in some areas).

Among children reported sick in the past two weeks, the most commonly reported symptoms were fever (88 per cent) and cough (66 per cent), followed by respiratory infection (27 per cent), other symptoms (16 per cent), and skin disease (12 per cent). In non-permanent shelters, symptom burden appears particularly intense among sick children, including fever (95 per cent) and cough (79 per cent).

Immunization Status

Among children under 5 years of age, 67 per cent were fully vaccinated for their age, with higher coverage among boys (70 per cent) than girls (62 per cent). Coverage increases with age: 62 per cent among children 0–2 and 77 per cent among children 3–5. Coverage also varies by governorate, from 53 per cent in South to 81 per cent in Beirut and North.

Vaccinations were most commonly received through Primary Health Care Centers (61 per cent), followed by non-governmental dispensaries (13 per cent), government hospitals (7 per cent), mobile clinics (7 per

cent), and other sources (4 per cent); 3 per cent of caregivers did not remember the source. Service patterns differ by shelter type: in non-permanent shelters, reliance on mobile clinics is higher (22 per cent) and use of PHCCs is lower (37 per cent) compared with residential settings.

PROTECTION

Safety and Security

In addition to the ongoing socio-economic challenges faced by vulnerable households in Lebanon in 2025, several indicators continue to reflect a constrained protection environment for Syrian refugees, with implications for their safety and psychosocial well-being. While some improvements are observed compared to previous years, restrictive measures remain present in several areas, affecting refugees' sense of security and stability. According to VASyR 2025 findings, 6 per cent of households reported that curfews were being imposed in the areas where they live, marking a decrease compared to 10 per cent in 2024 and 12 per cent in 2023.

Despite this overall decline, curfews continue to be reported disproportionately in specific regions, particularly in El Nabatieh (30 per cent) and the Bekaa (12 per cent), compared to other areas. This indicates persistent localized protection risks and movement restrictions, which continue to negatively impact refugees' daily lives and well-being.

The main safety concerns for men, women, boys and girls were reported to be bullying, verbal harassment, and robbery. 2 per cent of households reported that sexual harassment was a safety concern for women and for girls (compared to less than 1 per cent for men and boys). This is substantially higher in Mount Lebanon where 30 per cent of households reported sexual harassment as a concern for women and 41 per cent for girls in Bekaa.

With regards to safety and security for persons with disability, 8 per cent of girls with disabilities reported verbal harassment in public spaces including school. 7 per cent for boy with disabilities. 4 per cent of households reported that women and girls avoid certain places due to feeling unsafe (10 per cent in 2024). This was highest in Bekaa (27 per cent) and Mount Lebanon (24 per cent each).

Legal Residency

While legal residency rates among Syrian refugees remain low in 2025, VASyR findings indicate a further decline compared to the previous year. Only 16.5 per cent of individuals above the age of 15 hold valid legal residency permits, down from 18.4 per cent in 2024. Significant geographic disparities persist, with the lowest residency rates recorded in Akkar and Baalbek-El Hermel (10.4 per cent), while the highest rates are observed in South Lebanon (35 per cent) and El Nabatieh (32.2 per cent), followed by North (26.1 per cent) and Beirut (22 per cent).

At the household level, only 5.4 per cent of households reported that all members above 15 years held legal residency permits (compared to 7 per cent in 2024), while 29.1 per cent had at least one member with legal residency. This leaves nearly three quarters of households (70.9 per cent) without any members holding valid residency, exposing them to heightened risks of arrest, detention, deportation, and exploitation.

In addition, a widening gender gap continues to characterize residency patterns. Residency rates among women declined from 15 per cent in 2024 to 13.1 per cent in 2025, while rates among men decreased slightly from 24.5 per cent to 23.6 per cent over the same period. This persistent disparity underscores ongoing structural barriers faced particularly by women in accessing and maintaining legal residency.

Community Interactions and Tensions

Most households (73 per cent) reported that interactions with host communities were positive or very positive, while 1 per cent stated that interactions were negative or very negative (down from 7 per cent in 2024). At the governorate level, El Nabatieh recorded the highest proportion of households reporting negative or very negative interactions, at 5 per cent.

There was an increase in the proportion of households reporting no tensions between refugees and host communities, from 59 per cent in 2024 to 76 per cent in 2025. In line with trends observed in previous years, competition for jobs (both lower-skilled and higher-skilled positions) remained the most frequently reported source of tension. Political and cultural differences were cited to a lesser extent, although they were reported more frequently in El Nabatieh compared to other areas.

Birth and Marriage Registration

Rates of birth registration at the level of the foreigner's registry continued to increase reaching 51 per cent in 2025, compared to 50 per cent in 2024 and 41 per cent in 2023. Rates were highest in Beirut (83 per cent), following by Mount Lebanon (73 per cent). Lowest rates were found in Akkar (30 per cent).

Among female headed households, the proportion of births registered with the foreigner's registry was lower than their male counterparts (36 per cent compared to 54 per cent). As in 2024, the main barriers to completing registration beyond the Noufous level were cost (52 per cent) and being unaware of procedures (38 per cent).

Similar to birth registration trends, marriage registration also continued to improve, with 47 per cent of marriages that took place in Lebanon reported to be registered at the civil registry (up from 41 per cent in 2024 and 37 per cent in 2023). However, rates in Akkar and Baalbek-El Hermel remain extremely low compared to other areas, at only 24 per cent and 25 per cent, respectively.

CHILD PROTECTION

Findings from the VASyR 2025 child protection results point to high exposure to violent discipline, a non-negligible burden of child labour (often under hazardous conditions), and early marriage affecting a sizable share of adolescent girls, with clear differences by age, schooling status, sex, and geography.

Violent Discipline

Violent discipline remains widespread. Over half of children aged 1–14 experienced at least one form of violent discipline in the past month (54 per cent). Any physical punishment was reported for 45 per cent, while psychological aggression affected 42 per cent. Severe physical punishment was reported for 5 per cent, and only non-violent discipline was reported for 33 per cent.

The most commonly reported caregiver responses included explaining why a behaviour is wrong (70 per cent) and taking away privileges (53 per cent), alongside harmful practices such as shouting/yelling/screaming (41 per cent) and spanking/hitting/slapping (33 per cent). Reported patterns were similar for boys and girls (any violent discipline: 54 per cent for boys vs 54 per cent for girls). Results also show substantial geographic variation in reported violent discipline (any violent discipline ranging from 7 per cent in Beirut to 86 per cent in Akkar, with other high values including Nabatieh 83 per cent and Bekaa 82 per cent).

Despite the levels of reported violence in practice, caregiver attitudes reported far lower endorsement: only 3 per cent of caregivers reported believing a child needs to be physically punished (2 per cent among male-headed households; 3 per cent among female-headed households).

Child Labour

Child labour affected 5 per cent of children aged 5–17, with a marked gender gap: 7 per cent among boys vs 3 per cent among girls. Child labour increases sharply with age, from 2 per cent (ages 5–11) to 9 per cent (ages 12–14) and 9 per cent (ages 15–17). School attendance is strongly associated: 7 per cent among children not attending school vs 2 per cent among those attending. The results are similar to previous years.

By governorate, child labour ranged from 3 per cent in North to 11 per cent in South and 11 per cent in Beirut (with other areas in between). Among children involved in child labour, reported activities were diverse. For economic work, other economic activities (62 per cent) and farm/animal work (22 per cent) were most common. For household chores, shopping for the household (34 per cent), washing dishes (26 per cent), and washing clothes (19 per cent) were prominent. Critically, 63 per cent of children in child labour reported working under at least one hazardous condition, with the conditions worsening among older children.

Early Marriage

Early marriage affects a considerable share of adolescent girls. 13 per cent of girls aged 15–19 were currently married. The prevalence rises steeply by single year of age: 1 per cent (age 15), 1 per cent (16), 13 per cent (17), 19 per cent (18), and 24 per cent (19). Schooling is a key differentiator: 15 per cent of girls not attending school were currently married, compared with 0 per cent among girls attending school. By governorate, the highest levels were observed in Akkar (16 per cent), followed by Bekaa (12 per cent) and Baalbek-Hermel (11 per cent), with the lowest reported in Beirut (8 per cent).

SHELTER

In 2025, most Syrian refugee households in Lebanon continued to live in residential shelter types, with around two-thirds residing in apartments, houses, or rooms. Approximately one-fifth lived in non-permanent shelters (such as tents and prefabricated units), while close to one-tenth resided in non-residential structures.

Shelter affordability further deteriorated. Average monthly rental costs increased significantly compared to previous years, placing additional pressure on household resources. Nearly half (47 per cent) of renting households reported being late in paying rent, with the highest proportions observed in Bekaa and Akkar. The rental market also became increasingly dollarized, with 98.7 per cent of renting households reporting that rent was paid in USD (up from 96.5 per cent in 2024 and 78.2 per cent in 2023). Average rent values (USD converted to LBP) continued to climb, reaching LBP 10.74 million/month in 2025 (vs LBP 8.14 million in 2024 and LBP 5.63 million in 2023). Households reported paying, on average, 57 per cent of expected rent in the last 30 days (up from 55 per cent in 2024 and 51 per cent in 2023), reflecting ongoing financial strain.

Shelter conditions remained a major concern. Over half (51 per cent) of households were living in shelters that were overcrowded, substandard, and/or at risk of collapse. Households occupied an average of 1.88 rooms (stable compared to 1.87 in 2024, but lower than 1.97 in 2023). Most lived in one (35.2 per cent) or two rooms (44.0 per cent), while 18.3 per cent occupied three rooms and fewer than 3 per cent occupied four or more. Average living space declined to 10.53 m² per person (down from 11.30 in 2024 and 11.90 in 2023).

Overcrowding—defined as living space below 4.5 m² per person—rose to 20.3 per cent (from 18.8 per cent in 2024 and 16.0 per cent in 2023). It was most prevalent in non-permanent shelters, followed by non-residential structures, while residential shelters were comparatively less affected. The highest levels of overcrowding were recorded in Beirut (37.9 per cent) and Mount Lebanon (28.0 per cent), with elevated levels also observed in Baalbek-El Hermel.

In terms of shelter safety and adequacy, 50.1 per cent of households reported no adverse shelter condition, while 39.8 per cent faced risks or deficits: 14.3 per cent lived in dangerous shelters (including those at risk of collapse) and 25.5 per cent lived in substandard conditions. Only 10.1 per cent met the “good household” benchmark (not overcrowded and not living in a dangerous shelter). Although the share of households living in shelters at risk of collapse decreased to 14 per cent (from 19 per cent in 2024), the highest prevalence persisted in South Lebanon and the North. Overall, non-permanent shelters remained disproportionately affected by substandard conditions, highlighting continued protection and safety risks for households in the most precarious shelter types.

Finally, 11.6 per cent of households changed accommodation in the past 12 months (like 2023 and 2024), with mobility driven largely by affordability constraints and, in some areas, heightened instability.

FOOD SECURITY

Food security among Syrian refugees in Lebanon has experienced a modest yet noteworthy improvement in 2025. The proportion of food-insecure households declined to 25 per cent, compared to 31 per cent in 2024. Severe food insecurity, which represents households facing extreme deprivation, also decreased from 2.6 per cent in 2023, to 1.2 per cent in 2024 to 0.7 per cent in 2025. Although these figures remain relatively low, the downward trend is encouraging and reflects a gradual stabilization in access to food.

However, despite these positive developments, significant regional disparities persist. Food insecurity remains most prevalent in Baalbek-El Hermel (42 per cent), North Lebanon (33 per cent), and Bekaa (30 per cent), where households continue to face considerable challenges in meeting their food requirements. These areas are characterized by limited livelihood opportunities and higher dependency on humanitarian assistance. Conversely, Beirut (8 per cent) and South Lebanon (14 per cent) report comparatively lower levels of food insecurity, likely due to better access to markets and employment opportunities. When examining food consumption patterns, North Lebanon stands out with the highest proportion of refugee households reporting inadequate food consumption (55 per cent), followed by Akkar (30 per cent), underscoring the need for targeted nutritional support in these regions.

The financial burden associated with food expenditures remains a critical concern. In 2025, 47 per cent of households allocated more than half of their total expenditures to food, a figure unchanged from the previous year, severely constraining their ability to meet other essential non-food needs such as healthcare, education, and shelter. The highest food expenditure shares were recorded in Akkar (58 per cent), Baalbek-El Hermel (57 per cent), and Bekaa (51 per cent), reflecting the disproportionate economic strain in these areas. Furthermore, Akkar and Baalbek-El Hermel reported the highest percentage of refugee households spending over 75 per cent of their total expenditures on food (12 per cent), in stark contrast to South Lebanon (1 per cent) and Beirut (3 per cent), where households face relatively less financial pressure.

Food Consumptions and Food Expenditure Shares

In addition to improvements in overall food security, dietary quality has shown signs of recovery. In 2025, 31 per cent of households recorded inadequate food consumption scores, an indicator of poor or borderline dietary diversity and meal adequacy, marking an improvement from 39 per cent in the previous year. This shift suggests that more households can access a wider variety of foods, which is critical for meeting nutritional needs and preventing malnutrition.

The highest proportion of acceptable FCS is observed in Beirut (92 per cent), followed by El Nabatieh (86 per cent) and Mount Lebanon (79 per cent), indicating relatively better food security in these areas. Conversely, North Lebanon shows the most concerning situation, with only 45 per cent acceptable, 41 per cent borderline, and 14 per cent poor, suggesting significant vulnerability. Other governorates such as Akkar (71 per cent acceptable), South Lebanon (71 per cent), and Beqaa (67 per cent) fall near the national average, while Baalbek Hermel has slightly lower acceptable scores at 67 per cent. Overall, the data highlights regional disparities in food consumption patterns.

Nationally, Syrian refugee households spend about 49 per cent of their total expenditures on food. Over 53 per cent of households keep food shares below 50 per cent of total expenditure indicating lower vulnerability and the ability to meet other essential non-food needs. Whereas 30 per cent spend 50–65 per cent of their total expenditures on foods, and roughly 17 per cent spend 65 per cent or more on food, including 6 per cent at ≥ 75 per cent, a pattern consistent with higher economic stress where food dominates the budget and the inability to meet other essential non-food needs. The highest mean food shares are in Akkar (58 per cent) and Baalbek-Hermel (57 per cent), with Akkar also showing the largest proportions at the upper thresholds (19 per cent in the 65–75 per cent and 12 per cent at ≥ 75 per cent). In contrast, the lowest food expenditure shares are in Mount Lebanon (43 per cent) and South Lebanon (45 per cent); notably, South Lebanon has the smallest share of households at the ≥ 75 per cent threshold (1 per cent). Beirut (47 per cent) and El Nabatieh (49 per cent) sit near the national average, while Mount Lebanon stands out positively with 72 per cent of households spending < 50 per cent on food.

CHILD NUTRITION

The nutrition results for infants and young children show moderate breastfeeding continuation, but substantial gaps in optimal feeding in the first six months and in complementary feeding quality for children 6–23 months. Overall, indicators point to low dietary diversity and low minimum acceptable diet, alongside high bottle feeding, with wide geographic differences across governorates.

Breastfeeding Practices

Breastfeeding is common but not universal. Ever breastfeeding among children 0–23 months was 72 per cent, with similar levels by sex (72 per cent boys; 71 per cent girls). The percentage of children ever breastfed varies by age (from 84 per cent at 0–5 months to 56 per cent at 16–23 months) and by governorate (from 61 per cent in North to 81 per cent in Nabatieh).

Exclusive breastfeeding remains limited with 31 per cent of children 0–5 months were exclusively breastfed, with a decline across the first six months (from 35 per cent at 0 months to 9 per cent at 5 months). Exclusive breastfeeding ranged widely by governorate, from 16 per cent in Baalbek-Hermel to 53 per cent in North. Predominant breastfeeding among children 0–5 months was 17 per cent (ranging from 10 per cent in Mount Lebanon to 28 per cent in South).

Breastfeeding continuation into the second year is mixed. Continuing breastfeeding at 1 year (12–15 months) was 68 per cent, varying from 19 per cent in Bekaa to 98 per cent in South. Continuing breastfeeding at 2 years (20–23 months) was 41 per cent, declining by month of age (from 56 per cent at 20 months to 29 per cent at 23 months) and varying from 0 per cent in Bekaa to 71 per cent in South. Age-appropriate breastfeeding was 31 per cent among children 0–23 months, with variation by governorate from 15 per cent in Baalbek-Hermel to 43 per cent in South.

Complementary Feeding

Timely introduction of solid, semi-solid, or soft foods is uneven. Among children 6–8 months, 56 per cent received solid, semi-solid, or soft foods, with a peak at 7 months (69 per cent). Diet quality indicators are

low. Minimum diet diversity (≥ 5 food groups) was 5 per cent among children 6–23 months, rising with age (from 1 per cent at 6–8 months to 8 per cent at 12–15 months).

Results disaggregated by breastfeeding status indicate differences in dietary diversity: minimum diet diversity was 3 per cent among non-breastfed children vs 8 per cent among breastfed children, with an overall total of 7 per cent.

Minimum meal frequency met was 28 per cent (ranging from 10 per cent in Bekaa to 43 per cent in Nabatieh), increasing with age (from 23 per cent at 6–8 months to 32 per cent at 16–23 months). The combined indicator remains very low: Minimum acceptable diet (MAD) was 4 per cent among children 6–23 months, including 4 per cent among breastfed children and 1 per cent among non-breastfed children. Feeding frequency for non-breastfed children is particularly low as measured here: non-breastfed children 6–23 months receiving at least 2 milk feeds was 1 per cent.

COPING STRATEGIES

To cope with food insecurity, an overwhelming 89 per cent of Syrian refugee households in Lebanon resorted to food-based coping strategies in 2025, a rate that remains consistent with 2024 levels. These strategies reflect the difficult trade-offs families make to manage limited resources. The most frequently reported measures include consuming less preferred and lower-cost food (86 per cent), reducing meal portion sizes (50 per cent) and meal frequency (45 per cent), borrowing food or seeking assistance from friends and relatives (41 per cent), and adults limiting their own consumption to prioritize children's food intake (24 per cent).

In 2025, 25 per cent of Syrian refugee households recorded a Reduced Coping Strategy Index (rCSI) score above 19, signaling a high reliance on food-based coping mechanisms. While this figure remains concerning, it represents a five-percentage-point decrease from 30 per cent in 2024, suggesting a slight improvement in household resilience. Regional variations are evident: the highest proportion of households not employing any food-based coping strategies was observed in Mount Lebanon (24 per cent), followed by Beirut (21 per cent). In stark contrast, reliance on these strategies was nearly universal in Akkar, Baalbek-El Hermel, and Bekaa, where over 98 per cent of households adopted them, underscoring the severity of food insecurity in these areas.

Beyond food-related measures, livelihood-based coping strategies remain widespread. In 2025, 82 per cent of households reported applying such strategies, mirroring the 82 per cent recorded in 2024. These strategies often involve asset depletion or adopting crisis-level responses to sustain basic needs. Notably, the highest proportion of households not employing any asset depletion coping strategies was found in Akkar (40 per cent) and North Lebanon (32 per cent), indicating that refugees in these districts may have already exhausted available livelihood options. Conversely, crisis and emergency coping strategies were most prevalent in Baalbek-El Hermel (39 per cent) and Bekaa (37 per cent), reflecting acute vulnerability in these regions.

Financial coping mechanisms also play a critical role in household survival. At the national level, 70 per cent of refugee households reported borrowing money to access essential needs, while 39 per cent reduced health expenditures, and 38 per cent reduced or ceased payments on essential utilities and bills.

ECONOMIC VULNERABILITY

About 72 per cent of Syrian refugee households lack the economic capacity to meet their essential needs without external assistance. Even with support, 66 per cent of these households remain below the Minimum Expenditure Basket (MEB), and 60 per cent are unable to meet the survival Minimum Expenditure Basket (SMEB). Despite these challenges, there has been a noticeable improvement in household economic

capacity in 2025 compared to the previous year. In 2024, 65 per cent of households were living below the SMEB without assistance. Regionally, Akkar recorded the highest proportion of households living below the SMEB at 80 per cent, followed by Baalbek-El Hermel (77 per cent) and Bekaa (66 per cent). When asked about their expenditures over the past 30 days, Syrian refugee households across all governorates reported an average expenditure of 37.9 million LBP on food and non-food items. Among governorates, El Nabatieh recorded the highest expenditure at 45 million LBP, followed by South Lebanon at 42 million LBP; whereas, Akkar had the lowest at 27 million LBP followed by North Lebanon at 34 million LBP.

Debt levels among refugee households remain alarmingly high. In 2025, 87 per cent of households were in debt, a figure similar to 2024, with an average debt of 45 million LBP per household. Among indebted households, the average amount rises to 54 million LBP. The highest debt burdens were reported in Bekaa, Baalbek-El Hermel, Beirut, and Mount Lebanon, where average amounts reached 60 million LBP, 53 million LBP, and 53 million LBP, respectively. Debt is primarily incurred to purchase food (92 per cent), pay rent (56 per cent), buy medicine (32 per cent), cover health expenses (24 per cent), and acquire essential non-food items (41 per cent).

Borrowing sources also reveal heavy reliance on informal networks. A striking 90 per cent of households borrowed from friends in Lebanon, 39 per cent from supermarkets, 10 per cent from landlords, and 2 per cent from pharmacies. These patterns underscore the limited access to formal credit and the dependence on social connections and local vendors to cope with economic hardship.

LIVELIHOODS

The employment situation among Syrian refugees in Lebanon continues to pose significant challenges, despite slight improvements observed in 2025. Overall, 44 per cent of the refugee population was employed in 2025, marking a modest increase from 41 per cent in 2024. Nevertheless, nearly half of the population, 49 per cent, remains outside the labor force, reflecting a high dependency ratio. This indicates that a substantial proportion of individuals are either actively seeking work or are unable to participate in the labor market due to structural barriers, legal restrictions, or caregiving responsibilities.

Regional disparities in employment patterns are pronounced. Bekaa (40 per cent) and North Lebanon (41 per cent) report the lowest employment rates, pointing to limited job opportunities and a larger share of individuals excluded from economic activity. In contrast, Beirut (51 per cent) and South Lebanon (50 per cent) exhibit relatively higher employment rates, suggesting somewhat better labor market conditions and access to income-generating activities in these areas.

Income levels have shown improvement but remain uneven across regions. The average monthly income from employment reached approximately 19.2 million LBP per household in 2025, up from 13.5 million LBP in 2024. However, stark income disparities persist. Households in South Lebanon, Mount Lebanon, and Beirut reported the highest average incomes, around 35 million LBP, 31 million LBP, and 30 million LBP, respectively, reflecting better access to higher-paying jobs or more stable employment opportunities. Conversely, Akkar and Baalbek-El Hermel recorded the lowest household incomes, averaging only 8.9 million LBP, underscoring the economic vulnerability of refugees in these governorates.

The sources of income for refugee households remain diverse but heavily reliant on precarious and external support mechanisms. The main reported sources include agriculture (17 per cent), credits or debts (13 per cent), ATM cards provided by UN or humanitarian organizations (13 per cent), and employment in the hotel and restaurant sectors (12 per cent). Regional reliance on humanitarian assistance is particularly striking: in Akkar, 63 per cent of households depend on ATM cards from UN or humanitarian organizations, followed by 18 per cent in Baalbek-El Hermel, highlighting the critical role of aid in sustaining livelihoods in these areas. These findings illustrate a complex and fragile labor market for Syrian refugees in Lebanon. While

incremental progress in employment and income levels is evident, persistent regional inequalities and heavy dependence on humanitarian assistance underscore the need for comprehensive strategies to expand livelihood opportunities, reduce vulnerability, and promote economic inclusion.

While there have been modest improvements in food security, dietary diversity, and employment among Syrian refugees in Lebanon, the overall situation remains fragile. Progress is uneven, with certain regions continuing to face severe challenges in meeting basic food needs and accessing livelihood opportunities. Coping strategies, both food-based and livelihood-based, remain widespread, reflecting ongoing economic strain and limited resilience. Although employment and income levels have improved slightly, significant regional disparities and heavy reliance on humanitarian assistance persist. These findings underscore the need for targeted interventions that address geographic inequalities, strengthen sustainable livelihoods, and reduce dependence on negative coping mechanisms to ensure long-term stability and well-being for refugee households.

WASH

The results show persistent gaps in water sufficiency, reliance on costly water sources, and crowding/sharing in WASH facilities, especially for households living in non-permanent shelter types. Hygiene conditions are generally strong (handwashing facilities are widely present and usually functional), yet soap availability and sharing remain concerns in more vulnerable shelter settings.

Drinking Water

Access to improved drinking water remains high: 95 per cent of household members had access to an improved drinking water source. The main sources of drinking water were piped into the dwelling (33 per cent), water refilling kiosks/shops (27 per cent), protected wells (12 per cent), and bottled water (11 per cent). Smaller shares relied on private water trucking (4 per cent) or UN/NGO-provided trucking (3 per cent).

Despite the high level of improved-source access, reliability remains a challenge. Over the last month, households most commonly reported drinking water insufficiency rarely (78 per cent) or sometimes (18 per cent), with 3 per cent reporting it often and 1 per cent always. Two-thirds of households (66 per cent) reported receiving piped drinking water in the past week, but water treatment is uncommon (2 per cent treat water to make it safer for drinking).

Collection time is relatively low on average, but still meaningful in more constrained settings: households reported a mean of 8 minutes and median of 5 minutes spent collecting drinking water. Shelter disparities are clear. Access to improved drinking water drops from 97 per cent in residential shelters to 86 per cent in non-permanent shelters.

Domestic Use Water

For domestic use, 92 per cent of household members had access to an improved water source. Domestic water sources were led by piped into the dwelling (40 per cent), water refilling kiosks/shops (22 per cent), and protected wells (15 per cent), with additional reliance on private water trucking (6 per cent) and bottled water (4 per cent).

Most households reported domestic water as always sufficient (92 per cent), but 8 per cent reported it as barely sufficient and 1 per cent as not sufficient in the month preceding the survey. The gap is again stark by shelter type: in non-permanent shelters, only 80 per cent reported domestic water as improved, and 2 per cent reported domestic water as not sufficient.

Water Expenditure

Water-related costs remain substantial. In the month preceding the survey:

- 42 per cent of households paid for drinking water, with an average of 1,047,248 LBP (median² 800,000 LBP).
- 15 per cent paid for bottled water, average 1,054,342 LBP (median 800,000 LBP).
- 12 per cent paid for private water trucking, average 1,950,451 LBP (median 1,400,000 LBP).
- 3 per cent paid for a private borehole, average 1,350,463 LBP (median 1,000,000 LBP).
- 7 per cent paid for the public water network in the last 12 months, average 5,838,749 LBP (median 3,500,000 LBP).

Sanitation

Sanitation access is very high: 99 per cent of household members had access to an improved sanitation facility. The most common facility type was flush/pour to piped sewer system (66 per cent), followed by flush/pour to pit latrine (14 per cent) and flush/pour to septic tank (13 per cent).

However, sharing and maintenance are key issues. 14 per cent of households shared their sanitation facility with other households, and the average number of households sharing (among those sharing) was 4 per cent. Among sharing households, 61 per cent shared with 2–5 households, while 9 per cent shared with 10 or more households. Sharing is higher in non-permanent shelters (22 per cent), where sharing intensity is also higher (average 5 households).

Sanitation infrastructure is also crowded: 98 per cent of household members lived in households with 1 toilet (only 2 per cent had more than one). In terms of waste management, 64 per cent of households reported their toilet had been emptied, while 22 per cent reported it had never been emptied, 3 per cent reported it was covered and left undisturbed when full, and 11 per cent did not know.

Hygiene and Menstrual Health

Handwashing facilities are widely present. 96 per cent of households had a fixed handwashing facility inside the dwelling and 3 per cent had one in the yard/plot; 1 per cent had no handwashing place. The majority (98 per cent) of households had water available at the handwashing place and 94 per cent had soap available, though soap drops in non-permanent shelters (83 per cent).

Sharing is also notable: 17 per cent of households shared their handwashing facility with other households (rising to 24 per cent in non-permanent shelters).

Access to basic hygiene items is high overall: 98 per cent of households had personal hygiene items and 98 per cent had cleaning items, while access to baby care items was lower at 79 per cent.

Access to female hygiene items is also high: 96 per cent of households reported access overall, but with a gap by sex of household head (97 per cent in male-headed households vs 93 per cent in female-headed households). Among those who had no access, cost was reported as the main barrier.

EDUCATION

The VASyR 2025 education findings point to low overall participation in formal schooling, with attendance dropping sharply after primary age, and cost-related barriers (transport and education materials) dominating reasons for non-attendance. The results also show that system-level constraints, including enrollment/registration barriers and limited space, remain important, while adolescent non-attendance is

² The median is the middle value, separating the higher half from the lower half.

increasingly linked to work and (for girls) marriage. In 2025, teacher strikes were a major source of school disruption.

Educational attainment remains limited. About 68 per cent of children and youth aged 6–24 could read and write, and 76 per cent had ever attended school. In terms of highest level completed, 66 per cent reported no schooling, 21 per cent primary, 4 per cent lower secondary, and 2 per cent upper secondary, while completion of post-secondary education was rare (less than 1 per cent, rounded to 0 per cent).

Current School Attendance

Attendance during 2024/25 varies strongly by age and declines steeply in adolescence. Among children aged 3–17, 37 per cent were attending any grade, including 51 per cent among children 6–14 and 22 per cent among adolescents 15–17. Girls were more likely to be attending than boys (41 per cent vs 34 per cent among children 3–17), with the gap especially pronounced among adolescents (29 per cent girls vs 16 per cent boys, ages 15–17). Looking across a broader age span (3–24), attendance in 2024/25 was 15 per cent (ages 3–5), 54 per cent (6–9), 49 per cent (10–14), 19 per cent (15–19), and 7 per cent (20–24).

Net Attendance

Net attendance levels indicate a steep fall-off after primary age:

- Pre-primary net attendance (ages 3–5): 14 per cent, rising by age from 3 per cent at age 3 to 29 per cent at age 5.
- Primary net attendance (ages 6–14): 50 per cent (girls 52 per cent, boys 48 per cent).
- Lower secondary net attendance (ages 12–14): 13 per cent.
- Upper secondary net attendance (ages 15–17): 7 per cent (girls 10 per cent, boys 4 per cent).
- Secondary net attendance (ages 12–17): 15 per cent, with a sizable gender gap (girls 19 per cent, boys 11 per cent).

Reasons for Non-attendance

Barriers to education are primarily financial and structural. For children aged 3–17, the leading reasons for not attending were cost of transportation (32 per cent), cost of educational materials (31 per cent), school did not allow enrollment/registration (24 per cent), and work (17 per cent), followed by no space in school (8 per cent).

Patterns differ by age:

- Ages 3–5: non-attendance was most often linked to transport costs (42 per cent), education materials costs (39 per cent), and being not in age for school (34 per cent), alongside enrollment/registration barriers (21 per cent).
- Ages 6–14: the dominant reasons were transport costs (35 per cent), enrollment/registration barriers (33 per cent), and education materials costs (33 per cent), followed by no space in school (10 per cent).
- Ages 15–17: barriers remained cost-heavy (transport 28 per cent, materials 29 per cent), but work was the single most cited factor (29 per cent), and marriage was reported by 5 per cent

Not in Education, Employment, or Training (NEET)

VASyR 2025 findings indicate that NEET remains the norm rather than the exception: 77 per cent of youth aged 15–24 were not in employment, education, or training, with higher levels among females (80 per cent) than males (75 per cent). NEET increases sharply with age, from 66 per cent among youth 15–19 to 89 per cent among youth 20–24, driven by an especially high level among females 20–24 (95 per cent). Youth with a disability reported 74 per cent NEET compared with 78 per cent among youth without a disability. By shelter type, NEET was highest in residential shelters (80 per cent), followed by non-residential (76 per cent), and lowest in non-permanent shelters (69 per cent). Geographic variation is substantial, ranging from 62 per cent in South to 86 per cent in Mount Lebanon, with 79 per cent in North and 77 per cent in Bekaa also indicating persistently high disengagement from both learning and work.