



Food Insecurity Among People living in Informal Settlements of Nepal: Insights from Kathmandu and Pokhara Valley

Authors

Anjita Khadka¹, Barsha Rijal¹, Samikshya Nepal¹, Jiban Karki²

Affiliation's

- ¹ PHASE Nepal
- ² Liverpool School of Tropical Medicine, UK



Background



- Nepal ranks 68th out of 127 countries, with a score of 14.7, indicating a moderate level of hunger in the Global Hunger Index (2024).
- Nepal's constitution and the Right to Food and Food Sovereignty Act (2018) recognize food security as a fundamental right. (Food Security Atlas, 2019)
- The Government of Nepal (GoN) aligns with Sustainable Development Goals to eradicate hunger, improve nutrition, and ensure sustainable food production. (Food Security Atlas, 2019)
- Poverty is one of the important determinants of food insecurity and poor nutrition. (Nepal Nutrition and food security portal)
- Natural disasters (earthquakes, landslides, floods) and economic instability exacerbate food insecurity. (Disaster and Climate Change)





Background

- Food security consists of four key dimensions: Availability, Access, Utilization, Stability. (Four Pillars of the food security)
- Poor nutrition and food insecurity have remained challenges and impairments to development in Nepal. (Food Security Atlas, 2019)
- Rapid rural-to-urban migration increases informal settlements in Kathmandu and Pokhara Valley. (MDM Informal Settlement Assessment)
- Food insecurity is a significant public health concern in Nepal's urban informal settlements. (MDM Informal Settlement Assessment)
- These communities face inadequate access to food, poor living conditions, and limited health services. (MDM Informal Settlement Assessment)







To assess the prevalence and determinants of food insecurity among people living in informal settlements.







Study design: Cross-sectional study and we adopted quantitative method.

Study site: Informal settlement in Kathmandu and Pokhara

Study population: people living in informal settlements in Kathmandu and Pokhara.

Sampling procedure: Purposive selection of cities followed by random selection of informal settlements in each city and selecting study population from informal settlements using simple random method.

Tools used to assess (Household Food Insecurity Access Scale)

Data Analysis: Descriptive analysis and binary logistic regression was done to examine associations between food security and socioeconomic variables using SPSS 25.





Results



Sociodemographic findings

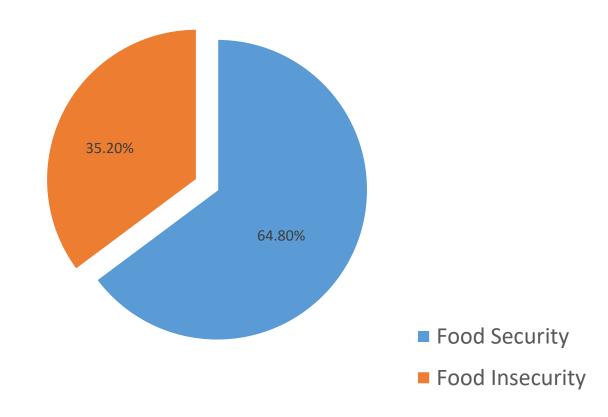


Sociodemographic Characteristics	Frequency (n)	Percentage (%)
	Gender	
Male	509	25.3
Female	1500	74.7
Age (Years)	43.07 ± 14.84 (Mean±SD)	Min19, Max 98
≤19	49	2.4
20-24	353	17.6
25-29	484	24.1
30-34	458	22.8
35-39	338	16.8
≥40	327	16.3
	Ethnicity	
Brahmin/Chhetri	334	16.6
Janajati	1077	53.6
Dalit	540	26.9
Thakuri	23	1.1
Muslim	18	0.9
Prefer not to say	17	0.8
	Religion	
Hindu	1372	68.3
Buddhist	354	17.6
Christian	269	13.4
Muslim	14	0.7
	Educational status	
Illiterate	778	38.7
Literate	1231	61.3





Prevalence of Food Insecurity

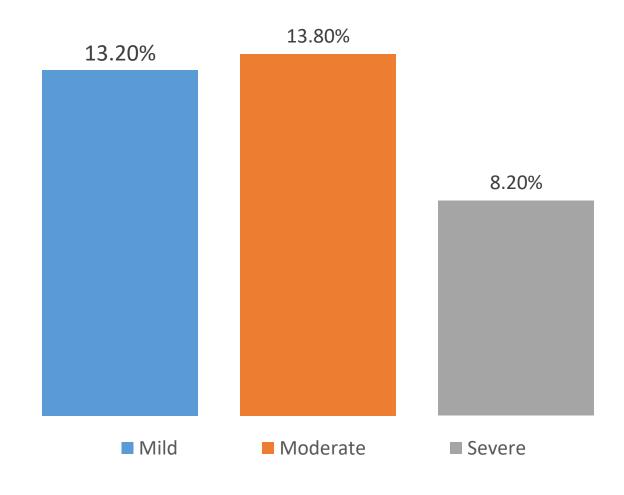


Among the total households (n=2009), 64.8% households had food security (n=1301) and 35.2% had food insecurity (n=708).





Category of Food Insecurity





Association between food insecurity and different variables



Variables	OR (95% CI) (Unadjusted)	OR (95% CI) (Adjusted)
Family type	Ref	Ref
Living alone	1.16 (0.69-1.96)	0.98 (0.57-1.69)
Nuclear family	1.33 (0.33-5.35)	1.16 (0.93-1.43)
Extended family	1.02 (0.60-1.76)	1.31 (0.35-4.92)
Job type		
Formal	Ref	Ref
Informal	1.98 (1.46-2.69)	1.72(0.54-1.97)
Unemployed	1.41 (1.05-1.88)	1.34 (1.08-1.65)
Monthly income (NRs.)		
<10000	Ref	Ref
10001-20000	1.05 (0.74-1.49)	1.90 (1.35-2.68)
20001-25000	0.58 (0.38-0.87)	2.04 (1.63-2.54)
>25000	0.49 (0.35-0.70)	1.14 (0.84-1.55)
Education		
Illiterate	Ref	Ref
Primary	0.89 (0.69-1.14)	0.97 (0.74-1.25)
Secondary	0.67 (0.53-0.84)	0.80 (0.63-1.01)
Higher secondary	0.53 (0.38-0.75)	0.65 (0.45-0.92)
University	0.40 (0.19-0.81)	0.47 (0.23-0.98)





Conclusion

Addressing food insecurity in urban informal settlements requires:

- Multi-sectoral collaboration involving government, NGOs, and communities
- Policy advocacy to improve access to food and social services
- Targeted support programs focusing on:
 - Formal employment pathways
 - Enhanced emergency preparedness during floods.





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Researcher's bio



Anjita Khadka is a Registered Nurse with over 10 years of professional experience across diverse fields, including clinical and community nursing, rehabilitation, nutrition and research. She is currently serving as a Research Associate at PHASE Nepal.

