

Access, quality and impact of Hadhreen Central Kitchens: a crosssectional beneficiary survey 2024

Summary

Rationale

To better understand the impact of its initiatives, Hadhreen conducted a survey in October 2024 involving beneficiaries from its central kitchens in the States of Al-Jazeera, Khartoum, and Sennar. This report presents an analysis of the survey results, evaluating the quality and effectiveness of the kitchens while identifying challenges faced by beneficiaries. The insights aim to guide improvements in performance and enhance the services provided.

Key findings

The survey interviewed 417 community kitchen responders receiving meals in160 kitchens in Khartoum, Gezira, and Sinnar states. Most respondents were adults above 30 years old and part of a larger family unit (73% and 93%, respectively), while 42% o were female.

The results highlighted the significant role that Hadhreen kitchens play in the lives of beneficiaries. Specifically, **88%** of respondents reported receiving meals daily from Hadhreen kitchens for themeselves and their families. **56.8%** relied entirely on these meals, while **31.5%** consider them an important food source alongside other source.

Regarding service quality, respondents expressed general satisfaction with the meal standards, with **82.7%** rating the meals as either "excellent" or "good." However, the survey also highlighted areas for improvement, such as diversifying food options, increasing amount of food, and expanding geographical coverage, as these factors affect wait times and congestion, sometimes leading to meals running out before beneficiaries are served.

Respondents also expressed a clear desire for food variety, as well as for larger portions to cover more than one meal per day or to meet the needs of large families. Some beneficiaries also hope for the provision of bread or flour to prepare complete meals, alongside additional services such as healthcare and medical support, reflecting a growing expectation for Hadhreen to play a broader role in providing comprehensive support.



Recommendations

Given that many beneficiaries rely on these daily meals as a primary source of food and to alleviate financial burdens, and that they find the services accessible and high in quality we recommend that local and international NGOs adopt and expand this central kitchen model. This to further scale feasible and effective interventions to addressing food insecurity across Sudan and especially in highly insecure conflict intensive settings.



Background

Hadhreen was established in 2015 by Sudanese youth activists with a shared vision for building a better future. Initially driven by a grassroots approach, the organization evolved over time, responding to the needs of local communities. By 2021, Hadhreen had formalized its efforts and was officially registered as an NGO in Sudan.

In the midst of Sudan's ongoing humanitarian crisis, characterized by conflict and the displacement of over 8.8 million people, Hadhreen has strived to reflect and build on the resilience and innovation of Sudanese communities across the country. With critical support from different international organizations, Hadhreen has supported many communities to tackle significant challenges such as food insecurity, which affects 17.7 million people country-wide. These efforts have helped to deliver hope and practical support to countless families nationwide.

A testament to this commitment is the establishment more than 180 central kitchens in various states. These kitchens have become vital lifelines, offering not only nourishment but also a sense of community and belonging to those in need.

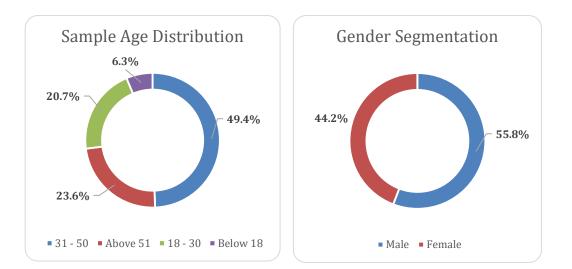
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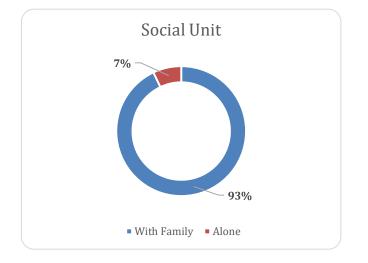
Sample

The Hadhreen Kitchens survey was distributed to a random sample of **417** beneficiaries who came to collect hot meals at different time intervals across various Hadhreen kitchens in the regions of Al Jazeera, Khartoum, Omdurman, Jebel Awlyaa and Sennar. This sample reflects the social and geographic distribution of the beneficiaries who access food for themselves and on behalf of their families at Hadhreen kitchens. These individuals tended to be mostly adults between **31–50** years (**49.7%**), **51+** (**23.6%**), and **18–30** (**20.7%**). Not surprisingly, those under 18 were only **6.3%** of those coming to the kitchen to receive food aid for themsleves and their families. the people picking up the foods for their families and thus participating in the survey were the middle and older age groups. This finding aligns with the fact that **93%** of beneficiaries live within families, while only **7%** live alone. In terms of gender distribution, there was a good balance, with **55.8%** male and **44.2%** female, indicating that Hadhreen kitchens' services are accessible and suitable for both genders.



Figure 1: survey respondent characteristics





Role & Impact of Hadhreen Kitchens

Survey results indicate that **88%** of sampled beneficiaries receive their meals daily from Hadhreen kitchens. While **56.8%** rely entirely on these kitchens to meet their food needs, and **31.5%** consider them an important food source alongside others. These findings underscore the essential role Hadhreen kitchens play in enhancing food security for its beneficiaries, who depend on it regularly. Furthermore, **47.6%** of beneficiaries reported that relying on Hadhreen kitchens alleviates financial pressure related to food provision. Additionally, **26.3%** of beneficiaries feel that these kitchens improve their level of food security, while **24.5%** noted a positive impact of the service on their health and overall nutritional status.



Figure 2: Frequency of service use in Hadhreen kitchens

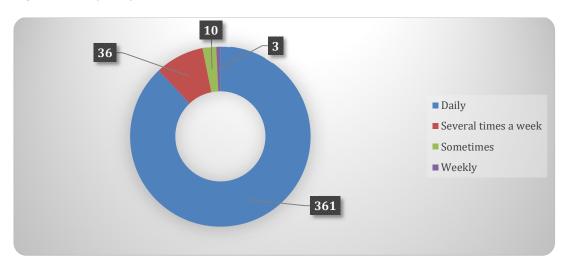
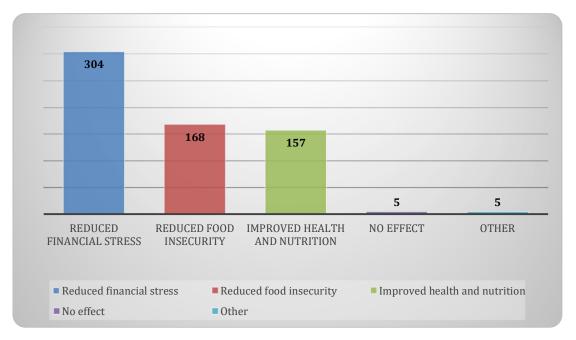


Figure 3: The impact of meal provision on economic stability, food security, health and nutrition



Access, Sustainability and Quality

The survey results reflect general satisfaction among beneficiaries with the quality of meals provided at Hadhreen kitchens, with **82.7%** giving positive ratings to the meals as either "excellent" or "good." However, despite the satisfaction with meal quality, some beneficiaries mentioned a lack of variety, causing some to feel that food types are repetitive and do not meet different preferences. Beneficiaries also cited issues related to total



capacity and geographic distribution, as these factors sometimes lead to overcrowding, long waiting times, and even meals running out before beneficiaries are served.

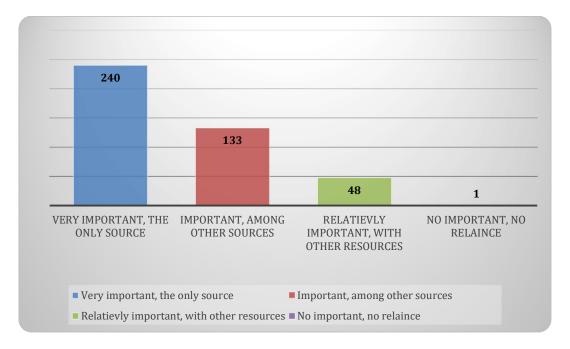




Figure 5: Challenges of regular access to kitchens

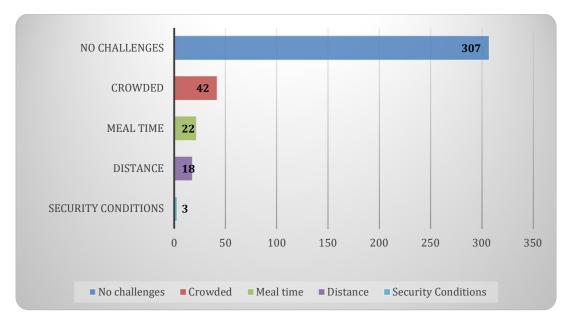




Figure 6: Meal quality evaluation

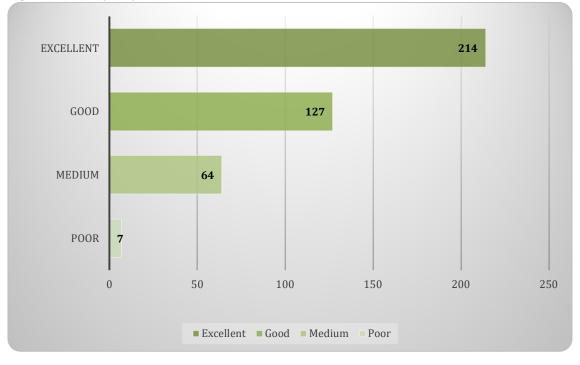
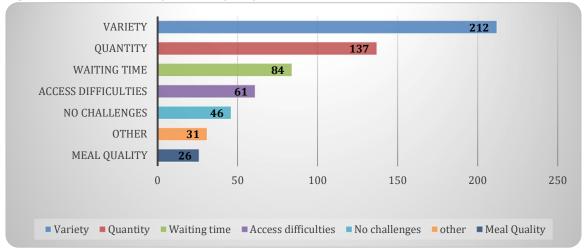


Figure 7: Evaluation of key service quality metrics



Suggestions for Improvement

The survey results show that the most desired improvements from beneficiaries include increasing the portions provided and enhancing food variety. Many beneficiaries feel that the limited variety impacts their overall food experience. Beneficiaries also requested larger portions to cover additional meals during the day, especially for large families. Beyond food-



related improvements, some beneficiaries expressed a need for additional services, such as providing bread or flour to complete the meal content and achieve daily nutritional sufficiency. There were also calls for health services and treatment support.

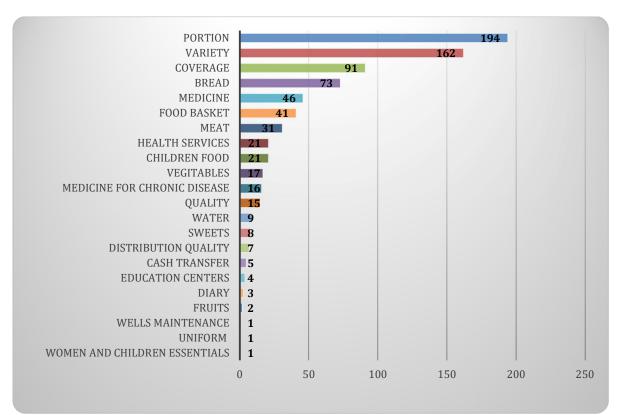


Figure 8: Service improvement suggestions

Limitations

The survey encountered several challenges mainly relating to insecurity which impacted what and how data were collected. Notably, despite ongoing security issues we were able to sample 417 respondents. In doing so, we prioritized the safety of beneficiaries and field teams to first and foremost avoid putting individuals at risk in insecure areas. In future, we would like to explore sampling techniques that could enable us to collect data with the smallest possible sample size to achieve the survey goals.

Considering security and logistical constraints, the survey was designed to collect the minimal number of questions to provide focused insight. In future we would like to explore expanding survey questions, specifically to understand household composition while balancing the security, time and data collections constraints

The lack of reliable internet connectivity in surveyed areas prevented the use of digital survey tools, such as online forms or mobile applications. To address this limitation, we collected data through handwritten forms and voice messages sent via WhatsApp. This



enabled us to gain access and make visible an otherwise difficult to study population. However, this method was more time-consuming and carried a potential risk of transcription or data entry errors. In future, we would like to explore data collection methods that could facilitate offline survey offline completion while relying less on transcription.

Recommendations

Given that many beneficiaries rely on these daily meals as a primary source of food and to alleviate financial burdens, and that they find the services accessible and high in quality we recommend that local and international NGOs adopt and expand this central kitchen model. This to further scale feasible and effective interventions to addressing food insecurity across Sudan and especially in highly insecure conflict intensive settings.