

This report is produced by OCHA Lebanon Office in collaboration with Inter-Sector Coordination Group under 2026 Lebanon Response Plan (LRP) Framework.

KEY FIGURES



>500 K (MoSA)

Self-registered Internally displaced people



112 K (DRM)

displaced in collective shelters



514 (DRM)

shelters



294 (MoPH)

people killed



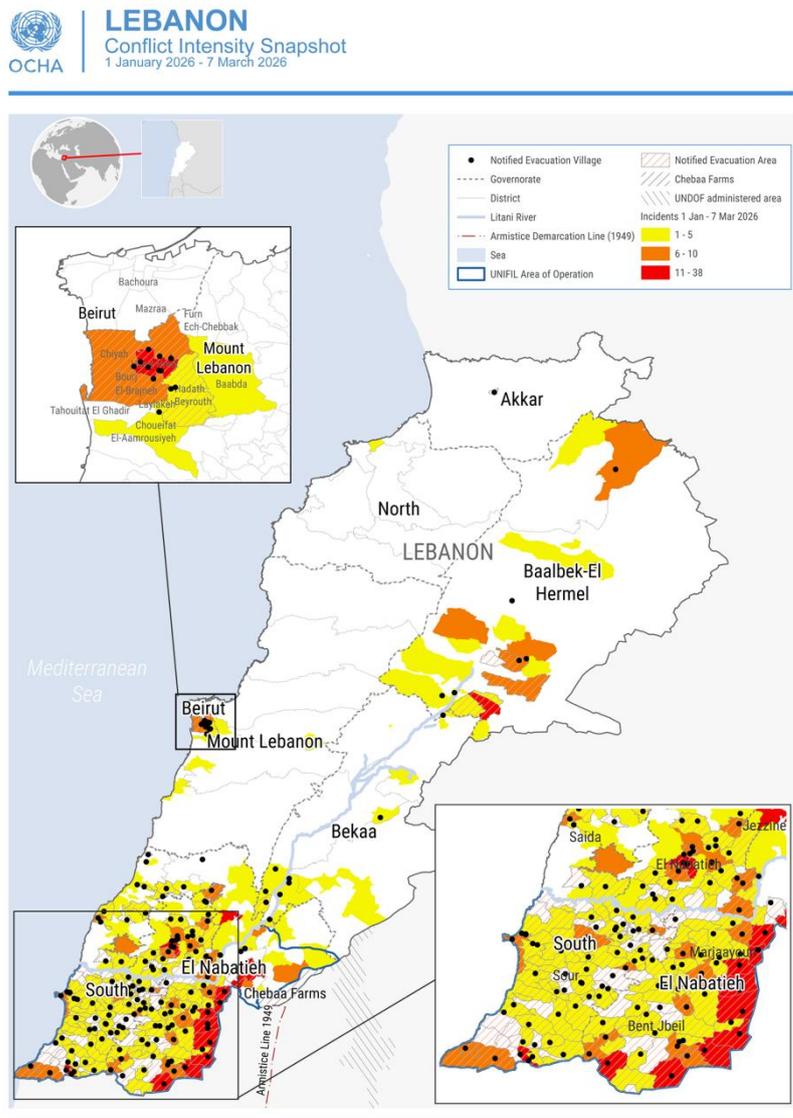
1,023 (MoPH)

people injured

HIGHLIGHTS

- On **06 March**, **MoSA** launched the **self-registration of IDPs** to facilitate the process of Government-led cash assistance to IDPs **500,000** have self-registered in **24 hours**.
- MoSA** is preparing **additional collective shelters**, with the support of humanitarian partners, amidst new and repeated forced displacement orders by Israel, and growing number of IDPs seeking safe shelters.
- Humanitarian partners** delivering **life-saving assistance** to **people remaining in to hard-to-reach areas** with support of OCHA-managed Humanitarian Notification System (HNS).
- On **7 March 2026**, an Israeli operation in Nabi Sheet (Nabi Chit), Baalbek, eastern Lebanon resulted in **41 Killed** and **40 wounded** according to Lebanon's Ministry of Health.

CONFLICT INTENSITY MAP *as of 07 March*



SITUATION OVERVIEW

Hostilities have continued across multiple governorates of Lebanon and southern suburbs of Beirut.

The number of airstrikes and security incidents has continued to rise following displacement orders issued by Israeli forces in recent days. According to the Disaster Risk Management (DRM) Unit, a total of **873 hostile incidents** has been recorded reflecting a significant increase in activity since the renewed escalation.

According to MoPH, Israeli attacks between the early hours of 02 March and afternoon (15:30) on 07 March have resulted in **294 fatalities and 1,023 injuries**.

On 7 March 2026, an Israeli operation in Nabi Sheet (Nabi Chit), Baalbek, eastern Lebanon resulted in **41 Killed and 40 wounded** according to Lebanon's Ministry of Health. The operation reportedly triggered intense explosions that caused severe structural damage throughout the town.

On 07 March, an additional displacement order was issued by Israel for a neighborhood in Tyre, triggering further population displacement. Israel has also **renewed its forced displacement order** for the entire area **south of the Litani River for the third time** since the beginning of the escalation, and for the **Beirut southern suburbs for the second time**.

The displacement orders issued by Israel in recent days, combined with intensified airstrikes across multiple governorates, represent a significant humanitarian turning point, triggering the displacement of hundreds of thousands of people. According to the DRM Unit, as of 07 March, approximately **112,525 displaced people are currently sheltering in 514 collective shelters across the country, while many times more are presumed displaced outside the shelters**. Among those recorded across collective shelters, at least 4,000 female-headed households, more than 1,600 households headed by a person with a disability, and over 5,200 households headed by an older person according to UN WOMEN. **Collective shelters in several governorates reported overcrowding**, especially in Beirut, and frequently lack adequate sanitation facilities, privacy, and essential supplies, undermining women's and girls' health, mobility, safety, and dignity.

Hundreds of internally displaced persons (IDPs) have reportedly remained in their vehicles or gathered along roadsides in Beirut governorate, while continuing to seek safe shelter options. Many IDP families lack the financial capacity to secure alternative accommodation, leaving some with no option but to spend nights in the streets. **Displacement under highly stressful conditions significantly increases protection risks for women and girls, including harassment, gender-based violence, exploitation and abuse, and trafficking**. These risks are further exacerbated when families are separated during displacement or when displaced individuals relocate to overcrowded collective shelters.

Protection monitoring indicates local authorities report that houses, municipal buildings, and schools in some communities are already fully occupied, with support to displaced households currently relying primarily on local community solidarity mechanisms. **Displaced people arriving from affected areas, including secondarily displaced Syrians and displaced of other nationalities** are either seeking shelter in formal collective sites or find shelter through their relatives, extended family networks and other community-based support. Other displaced families residing in streets sleeping in their cars as the weather conditions are harsh, particularly for children during the night.

The current escalation is also placing severe pressure on already fragile public services. Shelter capacity is under significant strain, with collective shelters filling rapidly and occupancy levels exceeding safe standards in some locations. Overcrowding increases the risks of communicable disease transmission, fire hazards, and protection incidents. Shelter options for non-Lebanese remain challenging despite the GoL call for inclusive shelters and the ongoing efforts to find alternative shelter solutions.

The Government of Lebanon continues to prepare additional collective shelters to accommodate displaced people who remain without safe accommodation. Preparations are ongoing with the support of humanitarian partners to bring additional sites into operation as soon as possible.

The health system is experiencing growing pressure as casualty numbers increase. The **evacuation of two hospitals in Beirut's southern suburbs** following the 5 March displacement order, coordinated by the Ministry of Public Health and the Lebanese Red Cross, in addition to reported attacks affecting healthcare personnel and facilities, has placed additional strain on health system capacity.

Essential services – including healthcare, water, sanitation, electricity, and waste management – are also under increasing stress, particularly in municipalities hosting large numbers of displaced people.

Every day of continued hostilities exponentially increases humanitarian needs stretching national response capacities and the ability of local authorities and humanitarian partners to meet the needs of affected populations. This comes at a time when funding has already been limited.

HUMANITARIAN RESPONSE

MoSA is leading the registration of IDPs both inside and outside collective shelters, and a total of around **500,000 a million IDPs have been registered through the self-registration link in 24 hours**. This self-registration will support the Government and humanitarian partners to better understand the scale and geographic distribution of displacement inside and outside the collective shelters, identify needs and priority areas for assistance, and support planning and coordination of the response across sectors and locations. The self-registration link has been disseminated to all LRP partners. Partners are asked to encourage affected families to register to help ensure that available support and services are better aligned with the needs on the ground.

In close coordination with DRMs at subnational levels, **humanitarian and emergency actors under LRP are continuously implementing life-saving interventions in collective shelters across the country**.



Access and Civil-Military Coordination

The prevailing security situation is severely constraining humanitarian access to borderline villages, with first- and second-line border communities in southern Lebanon remaining largely inaccessible due to ongoing military operations. In parallel, delays and disruptions to flights are affecting staff rotations, surge capacity, and the arrival of critical humanitarian supplies, further complicating the response. In this context, the **OCHA-managed Humanitarian Notification System (HNS) continues to adapt** to the evolving operational environment and is expanding its scope to support humanitarian movements and operations where possible.



Cash Working Group

On March 07, following the activation of the Ministry of Social Affairs Shock Responsive Safety Net (SRSN), **185,000 conflict-affected persons displaced into collective shelters and outside shelters within host communities were provided with rapid Multi-Purpose Cash Assistance (MPCA)**.

The first phase of the response prioritized households already registered in existing datasets, alongside additional beneficiaries from areas in the South where evacuation orders were issued. This includes households that remain in these locations, as long as markets remain functional and cash assistance continues to be an appropriate and feasible response modality.



Education

Education partners continue to support displaced children through psychosocial support and recreational activities through the Child Protection sector, and the identification of learning options, including remote and alternative education modalities to ensure continuation of learning.



Food Security & Agriculture

Food security partners have distributed a total of **235,868 hot meals with 12,385 Ready-to-Eat kits**.



Health

56 per cent of the total injured patients were treated in the emergency rooms, while 269 cases required admissions to the general wards and 79 to the intensive care units.

12per cent of the total casualties are children, 13oer cent of the total deaths are females.

This surge of severe war-wounded cases has overwhelmed the emergency healthcare capacity amid already limited resources. To manage the high-volume of casualties, the **Public Health Emergency Operations Center (PHEOC) is expanding its core team**, deploying 10 Command and Control Center (CCC) officers and one Response Coordinator to sustain 24/7 operations and strengthen real-time patient flow and coordination.

According to WHO Surveillance System for Attacks on Health Care (SSA), **six attacks on healthcare workers have resulted in five deaths and six injuries**.



Nutrition

Scale up life-saving maternal and child nutrition services where 172 caregivers were reached with infant and young child feeding in emergency, nutrition, and Early Childhood Development awareness and counseling.

Partners were mobilized **in 20 shelters to provide essential nutrition services, including 70 children and pregnant women** were reached with 2010 micronutrient supplementation and emergency nutrition rations.



Protection

Protection Sector activities are currently concentrated outside collective sites, as the required clearance processes after completion of geosplit for protection, child protection (CP), and GBV partners to initiate activities within these locations are still underway. **Across the country, partners continue to receive calls and referrals** regarding vulnerable individuals and families lacking adequate shelter. These cases are being systematically referred to established hotlines and, where capacity allows, connected to available shelters serving the various population groups.

Several **community initiatives are ongoing to support vulnerable displaced households**. Tracking of migrant informal shelters and self-settled sites is ongoing, where migrant community organizers, civil society groups and mobile protection teams are providing support, including meals and shelter. The **Emergency Task Force for Persons with Disability** actively reaches out and receives referrals to address the additional needs of persons with disabilities. The Task Force works to identify **appropriate support options and mitigate the barriers** faced by persons with disabilities in accessing collective shelter sites.

Though insecurity and displacement has significantly impacted the functioning of community centers and structures, **community centers and other safe spaces remain open in areas not directly affected** by conflict. Displaced persons of all nationalities are approaching centers in person or by phone. Some centers

conduct **mobile outreach to displaced persons** living outside collective shelters. **Community centers offer information on services, link people to available shelters and provide Psychosocial First Aid (PFA), psychosocial support and case management.** In parallel, community volunteers are outreaching to identify displaced Syrians at heightened risk and connect them with the relevant services. So far, more than half of those identified lack emergency shelter, followed by persons with serious medical conditions, single women without family support, and persons with disabilities.

Under the Child Protection, **Child Protection Hotlines** were established across governorates working on a 24/7 basis to support children at risk of violence, abuse and neglect or family separation (see link here).

Initial profiling information from MoSA in the North indicates the presence of several vulnerable groups within the collective shelters, including pregnant or lactating women, persons with disabilities, including physical, hearing, visual and intellectual disabilities. While these figures provide an indicative overview of vulnerabilities within the shelter population, more detailed shelter-level profiling may be obtained through the relevant MoSA focal points present at the collective shelters and (subject to applicable data-sharing protocols and agreements) may support partners operating in the respective sites in tailoring protection outreach and services to the identified needs.

Due to the significant reduction in funding in 2026, available resources remain insufficient to address the protection risks. This funding gap is having a substantial impact on the implementation of priority sector activities, including case management for displaced populations, support to community-based protection structures and safe spaces, provision of specialized services, psychosocial support, and cash for protection assistance.

Shelter

Shelter partners have distributed **44,960 mattresses, 46,137 blankets, 33,242 sleeping mats, 11,558 pillows,** as well as approximately **6,512 solar lamps and 6,363 jerry cans** across collective sites in all governorates as of 7 March.

The Shelter Sector is also collaborating with the Ministry of Transport, the Lebanese Red Cross, and the Governorate Offices in Beirut and Mount Lebanon to **expedite the dispatch and distribution of Core Relief Items (CRIs) in collective sites** over the next two days.

In addition, the Shelter Sector has assigned **74 collective sites to shelter partners for rapid assessments** to identify repair needs, partitioning requirements to increase hosting capacity and improve privacy, and to ensure that sites are adequate to host displaced families, with partners proceeding with the necessary works accordingly.

Water, Sanitation, and Hygiene (WASH)

WASH partners distributed **11,487 hygiene kits and 5,830 menstrual hygiene kits** in 209 shelters and delivered **140,565 litres of bottled drinking water** and 191 m³ of water through water trucking in 118 shelters, reaching **50,091 internally displaced people.**

In addition, **54,608 litres of fuel were provided to Water Establishments to sustain water supply services,** benefiting approximately **203,350 people** in displacement-affected areas.

Current priorities raised from WASH partners include ensuring partner coverage for the 47 shelters currently without WASH presence; scaling up emergency water supply and hygiene kit distributions; deploying rapid WASH technical assessments in shelters; supporting the provision of hot water and fuel for water systems; and preparing identified shelters to accommodate incoming displaced populations.

 **Social Stability**

In close coordination with MoSA and MEHE, the **sector will plan and pilot peace building and mediation activities in selected collective shelters** to address tensions on different levels and ensure social stability between IDPs and host community.

GENERAL COORDINATION

The **coordination of the emergency response under LRP** continues at both national and sub-national levels, with the Inter-Sector Coordination Group (ISCG) and Operational Coordination Groups (OCGs) focusing on **resolving emerging operational challenges related to shelter management, assistance delivery and access to affected areas**. OCG are continuously meeting with their partners and with Governors to ensure complementarity of efforts between GoL and LRP partners.

Working Groups under LRP have been continuously coordinating with their partners to support the cross-cutting analysis and mainstreaming components under Sector response. This includes Protection, Gender, PSEA, Disability, and Conflict Sensitivity. As an example, the Gender in Humanitarian Action (GiHA) coordination under the **Gender Working Group** is providing **gender technical expertise to humanitarian partners and sectors** to integrate gender analysis, sex-, age-, and disability disaggregated data, and gender-responsive approaches across humanitarian interventions. This will strengthen accountability in coordination and delivery of humanitarian assistance towards gender equality commitments including gender-, age-, and disability-inclusive approaches, Accountability to Affected Populations (AAP), Prevention of Sexual Exploitation and Abuse (PSEA).