

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

KEY FIGURES



>667 K_(MoSA)

Self-registered internally displaced people



119 K_(DRM)

displaced in collective shelters



567_(DRM)

shelters



449_(MoPH)

people killed



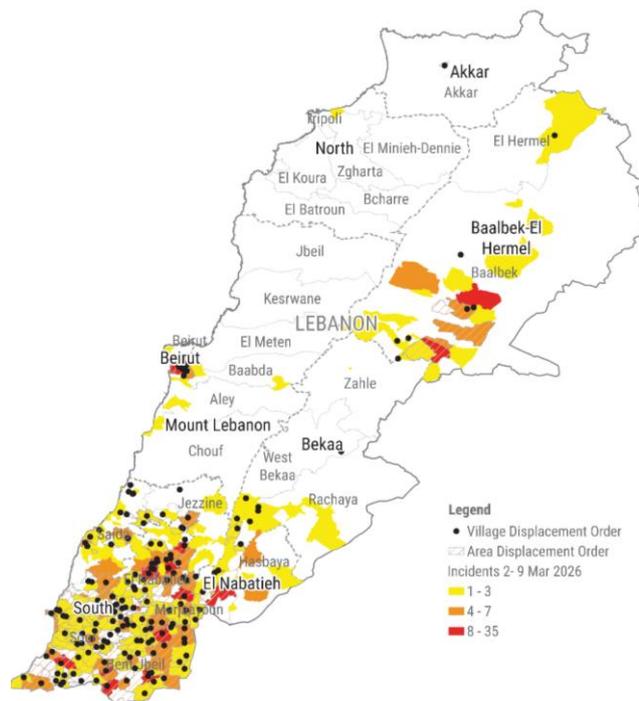
1,294_(MoPH)

people injured

HIGHLIGHTS

- Estimated 181,000 IDPs are school-aged children.
- Nearly 104,200 children's access to education is affected by 328 schools being used as collective shelters.
- As of 9 March, MoPH reports 14 health workers were killed and 24 injured. Two paramedics injured in an attack on Lebanese Red Cross ambulance in Majdal Zoun, Tyre district.
- Human Rights Watch reported the alleged use of white phosphorus in an attack on the town of Yahmar, Nabatieh Governorate.

CONFLICT INTENSITY MAP as of 09 March



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.
 Creation date: 10 March 2026 Source: incidents: public media, Collective Shelters: DRM
 Feedback: ocha@un.org www.unocha.org www.reliefweb.int

SITUATION OVERVIEW

Hostilities continue to directly impact nearly the entire population residing south of the Litani River, as well as parts of Baalbek Governorate, the Bekaa Valley, and large areas of Beirut's southern suburbs. More than one million people are now affected by the rapidly deteriorating humanitarian situation, with casualty figures continuing to rise.

According to the Ministry of Public Health, 449 people have been killed and 1,294 injured since the escalation began. Nabatieh Governorate has the highest reported casualty toll, followed by South Lebanon and Mount Lebanon.

To date, DRM has recorded **1,161 hostile incidents**, including a second incident within 48 hours in Nabi Sheet (Nabi Chit), Baalbek district. **On 9 March**, following an Israeli forced displacement order for Beirut's southern suburbs, several strikes were reported in the area, alongside a new displacement order affecting Anssarieh village in Saida district. Movement within affected areas remains unsafe, with displacement orders issued, expanded, or renewed almost daily, preventing thousands from returning home and prolonging uncertainty. On the same day, it has been reported that an **Israeli strike hit a Red Cross ambulance in Majdal Zoun**, Tyre district, injuring paramedics. Human Rights Watch also reported the **alleged use of white phosphorus** in an earlier 3 March attack on Yahmar, Nabatieh Governorate.

Since 2 March, new waves of airstrikes and repeated displacement orders across multiple localities have triggered a sharp escalation in internal displacement. According to the Government-led self-registration system, **667,831 people** have registered as displaced. The National Disaster Risk Management Unit (DRM) reports **119,700 displaced individuals** currently accommodated in **567 collective shelters**. However, hundreds of shelters remain unreported, and significantly more people are staying outside formal sites – in host communities, informal arrangements, vehicles, or public spaces.

As displacement persists, **communities face growing protection and humanitarian risks**, including prolonged separation from homes and livelihoods, uncertainty over the safety of their neighborhoods, and reduced access to essential services. Housing, Land and Property (HLP) concerns are expected to escalate should displacement become protracted, with increasing informal rental arrangements, **risks of exploitation, property disputes, and widespread loss of personal documentation**.

Conditions in many collective shelters remain of concern. Partners report shortages of mattresses, bedding, essential relief items, and inadequate WASH facilities. Children, older persons, and persons with disabilities are reported to be sleeping without proper bedding in several sites, heightening exposure to health risks. Uneven aid distribution and emerging social tensions – particularly where space is limited – have also been reported.

Protection concerns continue to rise. Women and girls in particular report feeling unsafe in several shelters, underscoring the need for strengthened monitoring, safe spaces, and gender-sensitive shelter management. Overcrowding, combined with stress related to displacement, is contributing to increased psychosocial distress among affected populations.

A significant number of people remain in hard-to-reach or high-risk areas, including older persons, persons with disabilities, and individuals with limited mobility who face barriers to evacuation and access to assistance.

Health facilities are increasingly overstretched as trauma cases surge. People with chronic illnesses – including those requiring dialysis, insulin, or other life-sustaining treatment – are facing disruptions due to displacement, infrastructure damage, and movement restrictions.

Humanitarian partners note that **SMS remains the preferred communication channel** for many displaced households due to limited mobile data access.

Overall, the rapidly evolving security situation, large-scale and ongoing displacement, deteriorating shelter conditions, and rising protection and health needs are placing significant **pressure on communities and humanitarian response actors**. Immediate support is required to strengthen shelter capacity, scale up protection and health services, and improve communication with affected populations – particularly the most vulnerable.

HUMANITARIAN RESPONSE

Humanitarian partners, including UN agencies, funds and programmes, national and international NGOs in close coordination with the Government of Lebanon are continuously providing assistance in collective shelters and engaging with affected populations to ensure two-way communication, identify needs, and response gaps.



Education

As of 9 March, **328 schools are being used as collective shelters**, affecting nearly **104,200 children's access to education**. In addition, approximately **181,000 IDPs are school-aged children**. The Ministry of Education and Higher Education (MEHE) has updated Learning Continuity modalities effective from 10 March 2026 in public and private schools, introducing flexible learning modalities to accommodate students who cannot attend physically, including displaced children.

Education partners are supporting displaced children through **psychosocial and recreational activities** in coordination with the Child Protection sector, while also identifying learning options, including remote and alternative modalities, to support the continuity of learning. To date, partners have distributed **160 education kits or supplies to shelters and learning centres** (18 in Beirut, 88 in the North, and 54 in the South).



Food Security & Agriculture

Food security partners distributed a total of **349,455 hot meals and 12,601 Ready-to-Eat kits in collective shelters and** to displaced people from Beirut's southern suburbs who continue to spend the night along the seaside and in open public areas. Activation for Technical and Vocational Education and Training (TVET) kitchens to scale up have been agreed in coordination with the government

The Sector, WFP and partners, collectively confirmed the capacity of **80,000 Ready-to-Eat parcels and 50,000 hot meals** capacity.

The current **contingency stocks are being overstretched**, and critical gaps are emerging in many sectors, such as but not limited to health, food, and protection supplies—especially in the South and Bekaa.



Health

Displacement orders and ongoing airstrikes have worsened access to healthcare as **five hospitals and forty-eight primary healthcare centers are now closed**, whereas seven PHCCs are open for emergencies and chronic disease medication distribution only.



Nutrition

Infant and Young Child Feeding (IYCF), nutrition, and Early Childhood Development (ECD) awareness and counselling services were provided to 209 caregivers. The national IYCF hotline has provided tailored counselling to caregivers for 15+ cases, addressing feeding challenges with guidance and referrals provided as needed.

6,192 children under five, adolescent girls, and pregnant and breastfeeding women reached with emergency nutrition rations and micronutrient supplementation.

Disruptions to the operational status of several malnutrition treatment centres have affected service availability. UNICEF is providing ongoing support to MoPH to mitigate these disruptions by delivering wasting

prevention and treatment through operational PSUs, ensuring continued access to life-saving services for vulnerable children and women.

Standardized nutrition guidance and job aids for the appropriate use of nutrition supplies have been finalized and disseminated to support coordinated implementation of nutrition services in shelters and other emergency response settings. In addition, an advocacy note on the management of unsolicited donations of breastmilk substitutes (BMS) has been shared with all stakeholders.

Protection

Partners shifted to enhanced outreach to people displaced across the country to ensure their access to information and linking them to services. The Protection (including CP and GBV) geo-split was finalized and mapped indicating strong capacities of currently **41 protection partners to support displaced persons in collective sites** once approval to roll-out protection activities in collective sites is received from MoSA.

Sector partners receive daily highly complex protection and vulnerable cases across population groups, addressed on the spot through the emergency referral systems in place. Partners have provided emergency response services such as outreach and information sharing with the communities through various **Communication with Communities (CwC)** channels and **community networks** and have addressed urgent protection cash needs for displaced and highly vulnerable people unable to access regular shelters. **Disability inclusion efforts** are ongoing by the Emergency Taskforce to support displaced persons with disabilities. To date, at least **27 displaced persons with disabilities have been referred** to Madina Al-Riyadiya, and **8 individuals have been provided with beds** due to disability-related needs. However, basic needs remain very high in Madina Al-Riyadiya for all displaced people, particularly toilets and heaters, including the need for accessible toilets for persons with disabilities. In addition, a learning center for Deaf persons shared a video with sign language messages to displaced persons with hearing impairments, encouraging them to fill in the MoSA registration link for assistance.

Under the **Child Protection Sub-sector**, the **Alternative Care Technical Working Group has been activated** and remains on standby to support any cases involving unaccompanied or separated children. Partners identifying children who may require family tracing, reunification, or alternative care are coordinating through established case management and referral pathways. To date, **10 cases of unaccompanied and separated children have been identified** and are being provided with the necessary support. **The Standardized PSS guidance has been finalized** and endorsed to support coordinated implementation of psychosocial support for children and caregivers in shelters, community spaces, and other emergency response settings.

Shelter

Shelter partners have distributed **50,460 mattresses, 51,059 blankets, 37,621 sleeping mats, 15,087 pillows**, as well as approximately **6,548 solar lamps and 6,608 jerry cans** across collective sites in all governorates.

To support the shelter response through national systems, UNHCR has provided **5,000 mattresses and 5,000 blankets** to the Beirut Governor's Office, and **15,000 mattresses and 15,000 blankets** to the Mount Lebanon Governor's Office, in collaboration with the Ministry of Public Works and Transport, which provided the transport support. This will support the **expedited dispatch and distribution of Core Relief Items (CRIs)** to collective sites hosting displaced families.

In addition, the **Shelter Sector has assigned 155 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)

Access to safe water, sanitation facilities, and hygiene supplies remains a key concern, particularly in high-density collective shelters. The WASH Sector continues to coordinate with national authorities and partners to monitor needs, track coverage, and allocate response to collective shelters with the greatest gaps.

WASH partners delivered assistance to **314 collective shelters reaching 69,043 people**.

WASH partners distributed **16,040 hygiene kits** and **6,374 menstrual hygiene kits** in **302 shelters** and delivered **203,120 litres of bottled drinking water** and **754 m³ of water through water trucking** in 176 shelters, reaching **50,091 internally displaced people**.

In addition, WASH partners continue to support Water Establishments to maintain the water supply, providing **96,608 litres of fuel**, benefiting approximately **216,850 people** in displacement-affected areas.

The immediate priority is ensuring the remaining shelters currently without a WASH partner are quickly covered, followed by the rapid delivery of basic first-round assistance, including hygiene kits and water trucking, while maintaining rapid verification and partner assignment for any newly identified shelters.

The **WASH Sector** continues to face several key challenges. **Rapid population movements** are increasing pressure on shelter WASH services, while **funding limitations** are restricting partners' ability to scale up the response across all shelters. In addition, **initial needs data across shelters remains limited**, as the rapid expansion of sites has outpaced detailed assessments. A **WASH technical assessment will begin shortly**, with the tool now finalized, to better identify priority needs and guide the scale-up of activities. Furthermore, some **newly opened shelters do not yet have DRM PCODEs**, which temporarily limits their inclusion in sector tracking and may delay partner allocation.

Priority Operational Needs: The WASH Sector has identified several immediate operational priorities, including scaling up **emergency water support to shelters** currently receiving less than the minimum supply, allocating partners to uncovered shelters, particularly in Beirut and Mount Lebanon, and expanding **hygiene kit distributions** to newly displaced households in collective shelters. Priority is also being given to **deploying rapid WASH technical assessments in collective shelters** using the newly approved tool to generate timely data on water availability and sanitation facility functionality. Additional efforts focus on ensuring the **provision of hot water for showers in collective shelters**, especially as temperatures remain low and occupancy remains high. **Fuel support is urgently required** to maintain water supply networks and pumping stations in areas hosting large numbers of displaced people, where increased demand is placing pressure on existing systems. In Beirut, **two shelters identified by the Government for incoming displaced populations have been visited**, with preparations underway to establish emergency WASH services ahead of their opening, followed by a **rapid WASH technical assessment to determine capacity and priority needs**.

Social Stability

The **Tensions Monitoring System (TMS)** disseminated to partners the first [tensions snapshot](#) of 9 March, an infographic containing key facts and insights into the current tensions trends and dynamics in the context of the complex emergency. Future snapshots will be released two to three times per week on the [open-access TMS portal](#).

GENERAL COORDINATION

Inter-sector coordination with the Government of Lebanon continues through daily engagement with the Ministry of Social Affairs (MoSA) and the Disaster Risk Management (DRM) unit at the Grand Serail. Operational coordination focuses on collective shelter management, displacement tracking, and prioritization of assistance.

Partners continue to report response activities through ActivityInfo, which feeds into inter-sector service mapping and response dashboards used to guide prioritization and resource allocation. Discussions are ongoing with government counterparts to ensure alignment between partner reporting and government tracking systems.

Coordination between MoSA, DRM, and humanitarian partners continues to support the identification, activation, and servicing of collective shelters. Sector partners are mobilizing to provide core relief items, site repairs, and basic services where required.

The ISCG continues to facilitate inter-sector troubleshooting on operational issues raised by partners, including site management arrangements, information flows between national and sub-national coordination structures, and requests received directly from local authorities.

Following discussions with the MoSA, it was agreed that **Rapid Needs Assessments** (RNA) will be conducted directly by MoSA teams, while coordination continues with government counterparts to monitor needs and determine if additional assessment support may be required.