

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

## KEY FIGURES



>1,049 K (MoSA)

self-registered Internally Displaced People (IDP)



136,262 (DRM)

displaced in collective shelters



663 (DRM)

shelters



1,116 (MoPH)

people killed



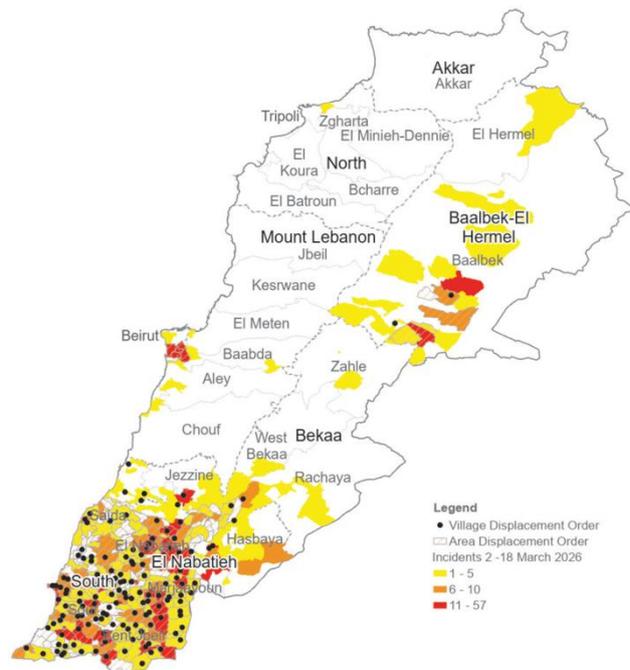
3,229 (MoPH)

people injured

## HIGHLIGHTS

- Over 136,000 IDPs are hosted in 663 collective shelters. Women and girls face heightened protection risks amid repeated displacement.
- More than 189,000 people have crossed into Syria since 2 March, reflecting the scale and severity of the crisis.
- 22 humanitarian movements were completed through the OCHA-managed Humanitarian Notification System (HNS).
- \$308.3 million Flash Appeal is 29% funded, with \$91.6 million contributed.

## CONFLICT INTENSITY MAP as of 26 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: 20 March 2026 Source: Incidents: public media  
 Feedback: ocha@lebanon@un.org www.unocha.org www.reliefweb.int

## SITUATION OVERVIEW

Hostilities across Lebanon continue to intensify, with sustained airstrikes reported in multiple locations in the South. On **24 March**, an airstrike in **Mount Lebanon** reportedly killed an entire family, including a woman and a child. According to the **Disaster Risk Management (DRM) Unit**, a total of **3,908 hostilities** have been recorded since 2 March, reflecting the continued escalation and widening geographic scope of the conflict. The **Ministry of Public Health (MoPH)** reports at least **1,116 fatalities**, including **83 women** and **121 children**, and **3,229 injured**, among them **454 women** and **399 children**, since hostilities began.

New displacement orders have been issued in **Beirut's southern suburbs** and across parts of **Tyre district**, including **Bourj Rahal**, **Shabriha**, and **Berghlieh**, alongside expanded directives affecting areas south of **Zahrani**, triggering additional population movements. With **over one million people displaced**, the DRM

reports **136,262 IDPs** hosted in **663 collective shelters**. Thousands more remain outside formal sites, hosted by families, staying in informal shelters, or residing in public spaces.

Women and girls continue to be disproportionately affected, representing **more than half** of the displaced population sheltering in collective sites. Displacement trends indicate that the predominantly **out-of-shelter and dispersed** nature of displacement is creating distinct challenges for women and girls, including heightened protection risks, increased caregiving burdens, and greater barriers in accessing services and support.

The health system remains under severe strain: **five hospitals** – including **four with maternity wards** – have been forced to close, **nine hospitals** have been damaged, and at least **50 Primary Healthcare Centres (PHCCs)** are no longer operational. These disruptions are significantly restricting access to lifesaving medical care, including **sexual and reproductive health services**.

Cross-border movements from Lebanon into Syria continue to rise. According to **UNHCR**, more than **189,250 individuals** have crossed into Syria since 2 March, including **164,770 Syrians** and **24,480 Lebanese nationals** (as of 25 March).

## HUMANITARIAN RESPONSE

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**Humanitarian operations are being scaled up through close collaboration with national and local authorities**, with the Ministry of Social Affairs (MoSA) providing overall leadership and coordination alongside relevant line ministries, Disaster Risk Management (DRM) structures, governorates, and municipalities. The response is prioritizing support to the growing number of displaced people, with a focus on ensuring safe shelter and the delivery of life-saving assistance under the different sectors.

Partners are scaling up efforts to address protection risks, particularly for women, children, older persons, and persons with disabilities, through expanded psychosocial support, child protection activities, and gender-based violence prevention and response services, especially in high-density collective settings. At the same time, outreach is being strengthened to reach vulnerable populations outside collective shelters, including refugees and migrant communities who may face barriers to assistance.

### Funding and Resource Mobilization

**As of 26 March**, approximately **29 per cent of the US\$308.3 million** Flash Appeal has been funded, with approximately **US\$91.6 million** in contributions recorded in the Financial Tracking Service (FTS) to date. In addition to the pledges previously reflected, several Member States have announced further contributions in response to the renewed escalation.

A humanitarian airlift carrying **38 metric tons of relief cargo** from multiple partners – including **UNFPA, ICRC, WHO, and MSF Belgium** – arrived in Beirut on **23 March 2026**. The shipment, coordinated by Kühne+Nagel and HULO, also included contributions under the **EU Civil Protection Mechanism (UCPM)** from Germany and Belgium.

A second humanitarian flight transporting **41 metric tons of relief supplies** from partners such as **MSF Switzerland, IHP, UNICEF, and the German Red Cross** arrived on **25 March 2026** further reinforcing the humanitarian pipeline.

An additional **humanitarian airlift, supported by the European Union, together with the Governments of Ireland and Italy**, arrived in Beirut on 26 March 2026, delivering urgently needed emergency relief items, including **70 metric tons of ReliefEU stocks** (donated to UNHCR), along with **8,000 blankets from Irish Aid and 5,280 blankets from the Italian Ministry of Foreign Affairs**.



## Access and Civil-Military Coordination

Humanitarian partners, supported by the humanitarian notification system (HNS), which facilitates operations in hard-to-reach areas, continue to deliver aid to vulnerable communities in conflict-affected areas. Since 2 March, **22 HNS-supported humanitarian movements were completed**. Static humanitarian sites continue to be notified all over Lebanon.

Following the expansion of HNS coverage in the **North of the Litani River (NLR)**, **nine movements were facilitated**, enabling the retrieval of core relief items from Haret Hreik in Beirut's southern suburbs and the delivery of hygiene kits to Deir El Zahrani, food assistance to Deir Al Ahmar, Jabaa, Jarjoua, Abaa, Ansar, Charqiyeh, Deir El Zahrani, Harouf, Kfour, and Sir El Gharbiye. In addition to RISM medical supplies were delivered to Rawda, Mashghara, and Baalbeck PHCCs, and medical kits to Baalbek Social and Medical Center PHCC and Baalbek Governmental hospital.

**South of the Litani River (SLR)**, **13 movements were facilitated**, supporting the delivery of essential assistance – including food parcels, hygiene kits, ready-to-eat meals, water, blankets, and mattresses – to collective shelters, alongside the evacuation of the most vulnerable civilians from border areas. The constrained operating environment continues to significantly hinder humanitarian access and limit the ability of partners to reach affected populations in Southern Lebanon. As part of its Protection of Civilians mandate, the United Nations peacekeeping mission, UNIFIL, has established a dedicated patrol presence across populated villages in the SLR, in response to community requests. UNIFIL also escorts civilians upon their request within its operational capacity.

The Access Working Group, CMCoord Cell and HNOCC continue efforts to facilitate safe, principled, and timely humanitarian access, with particular focus on hard-to-reach areas in the most conflict-affected areas of Lebanon.



## Education

According to the DRM report, around **47,110 children** are currently accommodated in collective shelters. In total, **481 schools** (including 361 public and 74 private, and 46 TVET schools) are being used as collective shelters.

Education partners continue supporting displaced children by providing them **1,031 education kits or supplies to shelters and learning centres** (18 in Beirut, 313 in Mount Lebanon, 330 in the North, 36 in Akkar, Baalbek-El Hermel 2, Bekaa 6, El Nabatieh 6, and 320 in the South). Additionally, 630 displaced children have accessed non-formal education, including non-Lebanese and Lebanese boys and girls, as well as boys and girls with disabilities in Beirut and Mount Lebanon.

After more than three weeks of school closures, **affecting close to 400,000 children enrolled in public schools**, the Ministry of Education and Higher Education (MEHE) has announced **a gradual reopening of schools for on-site learning**, provided they are not currently used as shelters and subject to staff availability and student access. The approach includes **a blended schedule combining in-person and online learning**, with flexibility depending on space availability and existing morning and afternoon shifts. The plan remains subject to change based on the evolving situation and decisions by the emergency committee.

As of 25 March, approximately **300 schools have reopened in the North and Akkar governorates** (hosting both morning and afternoon shifts). Of these, 50 schools are operating as hub schools, accommodating students from closed schools through rotational, shift-based scheduling. Additional schools are expected to open in Mount Lebanon and Bekaa in the coming days.

## Food Security & Agriculture

Since the escalation began on 2 March 2026, partners mobilized rapidly and initiated food distributions in shelters, providing a total of **2.1 million hot meals**. Partners also distributed **50,000 ready-to-eat (RTE) kits** to support affected families with immediate food needs.

The sector has identified several shelters with preliminary capacity to **transition from hot meal distribution to onsite meal preparation**.

The Ministry of Agriculture (MoA), in coordination with the FSA Sector, has developed **a tool to assess partners' capacity to reprogramme their agricultural activities and redirect support to farmers affected by the recent escalation, including those in hard-to-reach areas and those who have been displaced**. In addition, the FSA Sector and MoA are working together to produce weekly reports on the impact of the conflict on Lebanon's agriculture sector, providing key findings and analysis on damage and losses. The sector is also facilitating linkages between partners with the capacity to address urgent agricultural needs, such as supporting livestock owners in the south who lack fodder and assisting beekeepers in relocating to safer areas.

A **multisectoral food safety task force** – comprising of MEHE, MoSA, MoA, WFP, the FSA Sector, MoPH, and the President of the Lebanese Food Safety Commission – has been mandated to **oversee and regulate the safety standards of all meals provided within shelters**, operating under the authority of the government's Task Force Committee. The task force is currently developing comprehensive food safety guidance, which will be disseminated upon its finalization.

The sector dashboard that provides detailed information on the ongoing response inside shelters. [https://analytics.wfp.org/t/Public/views/2026\\_LB\\_Emergencytracker/ERLebanon2026](https://analytics.wfp.org/t/Public/views/2026_LB_Emergencytracker/ERLebanon2026)

## Health

At primary health care level, **194 PHCCs are linked to 652 collective shelters**, ensuring continued access to **comprehensive Sexual and Reproductive Health (SRH), immunization, NCD services, and MHPSS support**. Higher pressure persists in the South, Mount Lebanon, and Beirut with each PHCCs supporting an average of four collective shelters.

To bolster the emergency response, additional shipments have arrived, including **15 Trauma Emergency Surgical Kits (TESK I), 120 Community First Aid Kits (IFAK), and 10 NCD kits**. These supplies will support primary health care services, trauma and emergency care, and the health needs of trauma patients, IDPs, and shelter populations in the coming months.

A further shipment of **Interagency Reproductive Health Kits (IARH)** has also arrived providing supplies to **manage approximately 1,215 deliveries from routine births to emergency Cesarean sections and maternal health medicines for 6,000 women, along with specialized items for Clinical Management of Rape (CMR) to support 840 survivors, including 140 pediatric cases**. These kits are essential to ensuring continued access to life-saving maternal and emergency care in crisis settings.

High exposure to second-hand smoke including shisha use in the collective shelters is increasing health risks for vulnerable groups, particularly children and older adults with asthma or chronic respiratory illnesses.


**Nutrition**


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**10,797 children under five, adolescent girls, and pregnant and breastfeeding women were reached** with emergency nutrition rations and micronutrient supplementation sufficient for one month in 440 shelters out of which approximately 41 children aged 6-11 months were reached with age appropriate complementary feeding packages. **1,094 children under 5 and pregnant and breastfeeding women** were screened for wasting. So far, 86 children under 5 years of age and 12 women have been identified with wasting and referred for life saving treatment. Through the recently developed Infant and Young Child Feeding (IYCF) chatbot [link](#), 311 caregivers have accessed guidance on optimal feeding practices in emergencies, thus complementing in-person counselling and enhancing the timeliness of referrals for caregivers in need of counselling. In parallel, 135 caregivers contacted the national IYCF hotline, of whom 90 were referred for additional specialized support. Overall, more than 2,599 caregivers of children under 5 years were reached with specialized IYCF, nutrition, and ECD counselling and awareness on optimal nutrition practices in an emergency.

The nutrition sector has enhanced the **integration of essential nutrition and early childhood development (ECD) interventions across multiple service delivery platforms in Lebanon, including Primary Healthcare Centres (PHCCs) and their Satellite Units (PSUs)**, Nutrition partners, and Education partners, to support internally displaced and vulnerable families. To date, **37 nutritionists were deployed across 37 Primary Healthcare Centre Satellite Units (PSUs)**, delivering nutrition interventions across 87 shelters, in addition to reaching host communities and hard-to-reach, high-risk areas. Education partners were activated to deliver ECD services in more than 40 collective shelters. Interventions include children's milestone screening, caregiver counselling on ECD in emergencies, ECD group sessions and structured play activities to promote stimulation, responsive caregiving, and nurturing care. In parallel, integrated nutrition and ECD service delivery continues within operational Makani centres, ensuring continuity and expanded coverage of ECD interventions across affected populations.


**Protection**


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**Needs and Protection Risks:** Needs remain significant as displacement continues across multiple regions. Protection partners report rising concerns linked to ongoing hostilities, including **psychological distress** among affected populations. **Child protection risks continue to increase**, with partners noting **stress among children** as well as risks related to family separation, child labor, movement restrictions, and loss of documentation.

**GBV risk mitigation remains a priority.** Insecurity in high-risk areas has temporarily restricted access to Women and Girls Safe Spaces and limited mobile outreach, reducing access to confidential GBV services. Partners also note **heightened exposure to exploitation** – particularly in overcrowded collective sites and private accommodations.

**Persons with disabilities** continue to face access challenges, with many staying in non-accessible shelters or outside formal sites where essential services remain limited. Some are accommodated in designated inclusive facilities, including accessible schools and Organizations for Persons with Disabilities (OPD) centers. Feedback received through Accountability to Affected People mechanisms indicates increased demand for information, guidance, and referrals, including for individuals presenting with acute vulnerabilities.

**Response:** Protection, Child Protection, and GBV partners continue scaling up activities across governorates. As of **26 March**, partners have reached **39,539 displaced individuals**, including **20,005 through information sessions**, **12,568 through psychosocial support**, and high-risk cases assisted through targeted case management. Additionally, **6,136 women and girls** have received dignity kits, and **573 non-Lebanese households** have received Emergency Protection Cash.

Through the sector geo-split tool, **668 collective sites** have been mapped, with **78 per cent assigned** to partners providing Protection, Child Protection, or GBV services. Coordination with MoSA focal points remains ongoing. The sector is also integrating MHPSS and disability-specific service providers into site-level mapping.

GBV partners continue awareness and PSEA information sessions, while Child Protection actors maintain service continuity through onsite and remote modalities. Feedback from PSS activities highlights their positive impact on children's sense of safety and well-being. The Disability Task Force continues coordination with WASH, Shelter, and Health sectors to reinforce inclusive service delivery.

**Gaps:** Access constraints, increased caseloads, and funding limitations continue to stretch partner capacities, particularly in hard-to-reach areas. Demand for legal, GBV, and MHPSS services exceeds available capacity, and support for OPDs – especially for assistive devices – requires additional resources to meet growing needs.

## Shelter

Shelter partners have distributed **96,819** mattresses, **119,222** blankets, **52,684** sleeping mats, **42,081** pillows, as well as approximately **10,389** solar lamps and **9,434** jerry cans across collective sites in all governorates.

**The Core Relief Items response in collective shelters, as reported by subnational DRRs, has successfully reached all identified households in need as part of an initial round of assistance.** Ongoing support is being continuously delivered based on daily referrals from DRRs and MoSA, targeting new arrivals in existing sites as well as populations in newly activated collective shelters.

In addition, the Shelter Sector has assigned **503 collective sites to shelter partners**. Of these, **290 sites have been assessed to identify repair needs**, partitioning requirements to increase hosting capacity and improve privacy, and any upgrades required to ensure the sites are adequate to host displaced families, with partners proceeding with the necessary works accordingly. A total of 186 technical submissions have been made to secure approvals to initiate repairs from the relevant authorities/ focal points, of which 145 have been approved and works have already commenced in 96 sites, of which 18 have been completed.

## Water, Sanitation, and Hygiene (WASH)

WASH partners have delivered assistance in **606 collective shelters**, reaching **131,670** IDPs. To date, **34,764** hygiene kits and **20,609** menstrual hygiene kits have been distributed across **577 shelters**, while **779,074 litres of bottled drinking water and 14,841 m<sup>3</sup> of water** through water trucking have been delivered to 428 shelters. In addition, **487,173 of fuel have been provided to Water Establishments** to sustain public water supply services for **412,160** people.

**10,235 IDPs in shelters yet to receive WASH assistance**, while 619 Rapid Technical Assessments (RTAs) have been completed in collective shelters.

## Social Stability

UNDP's Tensions Monitoring System (TMS) is issuing the [Tensions Pulse](#), which provides decision-makers and humanitarian actors with timely, evidence-driven insights to support planning and adaptive responses. The Pulse features a **Tensions Dashboard, analysis of online narratives, a map of geographical hotspots, and a "What to Watch" section highlighting emerging issues**. It is based on analysis generated through the UNDP's TMS, which combines open-source and social media monitoring with field inputs coordinated alongside government counterparts and partner organizations.

## GENERAL COORDINATION

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**Coordination with the Ministry of Social Affairs (MoSA) is ongoing** to reinforce the overall response, including coordinated assessments, modalities for assistance inside and outside collective shelters, as well as alignment of targeting and delivery approaches across partners.

Inter-agency engagement continues to support area-based coordination through Operational Coordination Groups (OCGs), ensuring prioritization of needs, alignment of interventions, and follow-up on operational challenges at field level.

Partners continue to scale up the interventions in coordination with relevant ministries and sectors to address emerging needs, including support to collective shelters and response to public health concerns.