

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)



141,733 (DRM)

displaced in collective shelters



690 (DRM)

shelters



2,196 (MoPH)

people killed



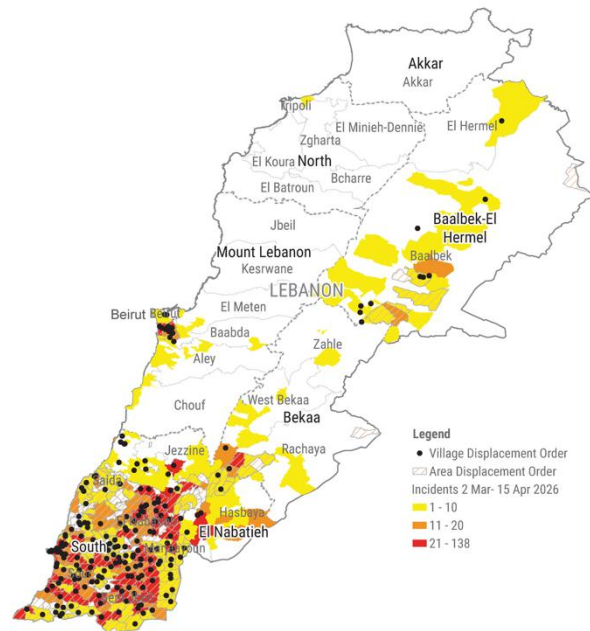
7,185 (MoPH)

people injured

HIGHLIGHTS

- **Ten-day ceasefire announced.**
- **Since 2 March, 2,196 people have been killed and 7,185 others injured.**
- **Damage to civilian infrastructure is extensive across southern Lebanon,** according to new satellite imagery evidence.
- **Life-saving humanitarian assistance is reaching thousands of affected families,** but significant response gaps persist as displacement risks becoming protracted.

CONFLICT INTENSITY MAP of 15 April



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: 16 April 2026 Source: incidents: public media
Feedback: ocha@lebanon@un.org www.unocha.org www.reliefweb.int

SITUATION OVERVIEW

As of the eve of the ten-day ceasefire announcement, the humanitarian situation in Lebanon continued to deteriorate, with prolonged displacement of people who have fled, leaving everything they own and jobs behind, **and are facing difficulties accessing safe and dignified shelter, and basic services.** As of 16 April, at least one hundred thousand people are estimated remaining in hard-to-reach areas.

On 14 April, the town of **Tebnine, located in the Bint Jbeil district of southern Lebanon,** was subjected to airstrikes that resulted in the deaths of at least five people. The attacks also caused **substantial damage to the Tebnine Government Hospital,** a major trauma center in the southern Lebanon, significantly impacting its capacity to provide essential medical services. Several surrounding villages were also targeted, resulting in additional casualties, including rescue workers who were injured while responding to emergencies and assisting affected civilians. On 15 April, **displacement orders were renewed for areas south of the Zahrani River,** directing residents to relocate northward.

Hostilities have also been marked by **extensive damage to civilian infrastructure across southern Lebanon**, including residential buildings, road networks, and other critical infrastructure. Satellite imagery analysis conducted by BBC Verify highlights the magnitude of the destruction, indicating that more than 1,400 buildings have been demolished since 2 March, based on verified visual evidence. Airstrikes targeted the Qasmieh Bridge near Tyre on 16 April, further restricting humanitarian access. The bridge, which represents a key transportation link to the southern part of Lebanon had been partially reopened after sustaining damage in an airstrike one week earlier.

Following additional rounds of U.S.-hosted talks between Lebanon and Israel on 16 April, **a ten-day ceasefire agreement was announced in the eve of 16 April**. While expressing cautious optimism that continued diplomatic engagement may facilitate a lasting peace, authorities have cautioned displaced people about returning to towns and villages as the situation is still fragile.

HUMANITARIAN RESPONSE

Since the onset of hostilities, **life-saving humanitarian assistance has reached thousands of affected households**, both displaced and people remaining in the conflict-affected areas, as well as local communities through institutional support to Water Establishments and Primary Healthcare Centers. Government-led coordination mechanisms remain functional nationwide at both national and subnational levels.

At the same time, **significant response gaps persist across all sectors**, particularly for over one million displaced people living outside collective shelters. Ongoing funding shortfalls and access constraints to impacted areas continue to hinder response scale-up and sustainability of the response. Community tensions are rising, driven by the shortage of affordable and accessible shelter options, increased pressure on public services and infrastructure, security fears, lack of resources to address critical and urgent humanitarian needs, and the spread of misinformation.

Displacement remains large-scale, with Beirut and Mount Lebanon having high concentrations of internally displaced people (IDPs) and collective shelter sites. The prolonged use of schools as collective shelters is expected to adversely affect the resumption of learning activities for children and contribute to heightened tensions.

Additional rounds of cash assistance are planned, alongside increased efforts to strengthen multi-sectoral support and expand data collection and multi-sectoral needs assessments for displaced households inside and outside collective shelters.



Access and Civil-Military Coordination

Humanitarian partners, supported by the Humanitarian Notification System (HNS), continue to deliver assistance to conflict-affected and hard-to-reach areas. **Between 2 March and 16 April, 65 HNS-facilitated movements** reached people remaining in hard-to-reach areas, including Hasbaya, Chebaa, Ein Ebel, Tyre, Rmeish, Tebnine, among others. These movements enabled the delivery of critical, life-saving assistance, including food and bread, safe water, medical supplies, fuel, hygiene and dignity kits, and nutrition support for pregnant and breastfeeding women, and facilitate the evacuation of the most vulnerable to safer locations.

Movement approval delays continue to constrain assistance delivery, even as WFP MFI data for March shows that while markets remain operational in most areas, significant disruptions persist in El Nabatieh and South governorates, where convoys are being coordinated to reach non-functional markets.

Despite these efforts, **humanitarian access remains severely constrained**, the situation is becoming increasingly challenging due to the widening and repeated displacement orders, insecurity in the south, and damages to critical infrastructure including bridges connecting the North of the Litani River to the South. This is particularly severe for thousands of families remaining in the hard-to-reach areas.



Multipurpose Cash Assistance (MPCA)

Preparations are underway among Cash Working Group (CWG) actors for **additional emergency MPCA in the coming weeks**. Starting this week, approximately **80,000 households will be targeted for emergency MPCA** through the Government Shock-Responsive Safety Net (SRSN). The upcoming round of assistance includes a US\$ 10 million envelope, comprising approximately US\$ 2.2 million through CWG NGO partners and the remaining contribution through WFP.

The Ministry of Social Affairs (MoSA), in partnership with UNICEF and ILO, activated the National Disability Allowance (NDA) Emergency Assistance as a shock-responsive expansion of the NDA, providing a US\$ 100 cash grant to crisis-affected families with persons with disabilities (age group 0-26). **As of 15 April, the programme has reached 12,000 Lebanese and non-Lebanese households (approximately 50,000 individuals), supporting disability-related, health, and basic needs during displacement.**

UNRWA provided **cash assistance to Palestine refugees**, targeting 23,003 Palestine Refugees in Lebanon (PRL) households through child-focused grants of US\$ 50 per child (ages 0–10), reaching 39,457 children in total. The assistance also covered an additional 7,064 Palestinian Refugees from Syria (PRS) households through a two-month payment of US\$ 120 per household and US\$ 50 per individual, reaching 19,728 individuals in total.



Education

The Ministry of Education and Higher Education (MEHE) has initiated a phased reopening of schools in some areas. Schools not currently used as collective shelters are resuming operations through a flexible, hybrid approach to support learning continuity, combining in-person and online learning — including **20GB of free data per weekday** to facilitate online participation. Around **600 morning shift schools and 133 afternoon shift schools** have resumed learning in safer locations for formal education where access permits, alongside learning recovery interventions in relatively stable areas. However, displacement continues to significantly limit access to education. According to DRM reports, over **420,000 children have been internally displaced**, with more than **49,000 children accommodated in collective shelters, 493 schools (365 public, 78 private, and 50 TVET)**, that are hosting IDPs and therefore unavailable for learning. Learning activities in shelters remain suspended; however, education and protection partners are providing psychosocial support (PSS) and recreational activities for displaced children in collective shelters.

Education partners have continued providing support through the distribution of learning materials and non-formal education programming. In total, partners have distributed **1,500 education kits reaching approximately 75,000 children across governorates**. For non-formal education, partners have supported over **3,944 internally displaced children through both online and in-person modalities**. Limited Education in Emergency (EiE) actions have been implemented by education partners where approvals were granted. Overall, the response remains uneven and significantly constrained, with large numbers of children unreached due to access, protection, and approval limitations.



Food Security & Agriculture

Since the beginning of escalation on 2 March 2026, food security partners rapidly mobilized to deliver lifesaving assistance to people displaced across the country. Partners launched food distributions inside

shelters, and have so far provided over **5 million hot and cold meals**, while also providing **78,000 ready-to-eat (RTE)** kits containing items that do not require cooking – such as canned meat, cheese, hummus, and beans – to help families meet their immediate food needs.

Humanitarian actors are also facing higher demand for assistance as they work to maintain supply chains and reduce the **impact of market disruptions** caused by the conflict. WFP Market Functionality Index data for the month of March indicates that markets remain operational in most areas across the country, while 80 per cent of shops in El Nabatieh governorate and two-thirds of shops in the South governorate were found to be non-operational. To address these gaps, convoys are being coordinated with the sector to deliver life-saving assistance to hard-to-reach areas where access constraints persist, and markets are not operating. However, challenges in obtaining the necessary approvals continue to cause delays in the delivery of assistance.

In close coordination with MoSA, the sector worked with the **Government Food Safety Task Force** to collect information on all kitchens preparing hot or cold meals or carrying out cooking activities as part of the response. The Task Force includes representatives from MoSA, MEHE, MoA, MoPH, WHO, WFP, and the Food Security and Agriculture Sector, and is chaired by the Government Food Safety Coordinator appointed by the Prime Minister's Office. **A total of 92 kitchens were registered**, and information was shared with the Ministry's focal point for inspection.

WFP, in coordination with the sector and the MEHE, has identified a list of public schools currently used as shelters in the response. Rapid phone surveys were conducted to assess each shelter's capacity to establish a kitchen. Based on the results, a narrowed list of shelters was identified, and on-site assessments are planned in coordination with WFP and sector partners to identify shelters for community kitchen development.

Health

On 16 April, medical personnel and medical transport were affected by multiple consecutive strikes while responding to an earlier incident in **Mayfadoun, Nabatieh Governorate**. According to the Ministry of Public Health, the incident involved **repeated strikes on first responders and subsequent ambulance teams**, resulting in **at least four health workers killed and six injured**, and damaging clearly marked medical transports.

Attacks on healthcare are violation of International Humanitarian Law and breach of UN Security Council Resolution 2286, which mandates the protection of health personnel and facilities. **Since the escalation of hostilities, the Surveillance System for Attacks on Health Care (SSA) has recorded 138 attacks, resulting in 91 deaths and 214 injuries among health workers.** These attacks place frontline responders at grave risk and critically undermine patient safety and access to essential healthcare services.

As of 16 April, primary healthcare outreach continues through **208 outreach units** (PSUs/MMUs) linked to **184 PHCCs**, supporting service delivery across **634 collective shelters nationwide**. Access to PHC services remains at scale, with **189,841 consultations provided**, including 70,547 IDPs receiving medications. Chronic disease care continues to be prioritized, with **30,125 IDPs supported through chronic medication services**. Essential preventive and priority services remain ongoing, including **vaccination of 5,273 IDP children** (administering 9,888 doses) and **2,478 antenatal care consultations**. However, service disruptions persist, with **51 PHCCs currently closed**, while eight PHCCs remain operational for chronic and emergency care only.

UN Women's Rapid Gender Analysis, conducted in March 2026, further highlights the importance of maintaining **access to maternal and newborn care for pregnant and breastfeeding women in displacement**, including post-partum support and essential supplies, particularly in a context of movement constraints and pressure on the health system.



Nutrition

There is a critical need to support **age-appropriate complementary feeding for children aged 12–24 months in shelters**, where existing food assistance is insufficient to meet their specific nutritional requirements. Caregivers in these settings often lack the means and facilities to safely prepare appropriate foods, increasing the risk of inadequate dietary intake and subsequent malnutrition.

There is a continued **need to establish Mother and Baby Corners / breastfeeding spaces within collective shelters to provide safe, private, and supportive environments for caregivers of young children**. While 14 spaces have been established to date, significant gaps remain across many shelters where overcrowding, lack of dedicated spaces, and limited privacy hinder optimal infant and young child feeding practices and caregiver support.

15,969 children under five, adolescent girls, and pregnant and breastfeeding women were reached with emergency nutrition rations and micronutrient supplementation sufficient for one month in 529 shelters, out of which approximately 118 children aged 6-11 months were reached with age-appropriate complementary feeding packages. **8,562 children under five and pregnant and breastfeeding women** were screened for wasting. So far, **173 children under 5 years of age and 67 women have been identified with wasting** and referred for life saving treatment. Through the Infant and Young Child Feeding (IYCF) chatbot link, 626 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, 262 caregivers contacted the national IYCF hotline, of whom 176 were referred for additional specialized support. Overall, more than 5,995 caregivers of children under 5 years were reached with specialized IYCF, nutrition, and Early Childhood Development (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)**. To date, **40 nutritionists have been deployed across 40 PSUs**, delivering nutrition interventions across 111 shelters and 69 shelters reached through education partners providing integrated nutrition and ECD services.

The Nutrition Sector is supporting the Ministry of Public Health (MoPH) in channeling all **unregulated Breastmilk Substitute (BMS) donations** through a centralized mechanism to ensure proper oversight and compliance with Infant and Young Child Feeding in Emergencies (IYCF-E) standards. These supplies are then reallocated to qualified nutrition partners who can assess needs and provide appropriate IYCF-E counselling. To date, three nutrition partners have received a total of 2,574 tins of unbranded infant formula, which are being distributed exclusively to non-breastfed infants aged 0–12 months following individual assessment and counselling.



Protection

In southern Lebanon, the security situation continues to deteriorate, directly affecting civilians and displacement sites. Roads, bridges and health infrastructure are increasingly impacted. Access and safety constraints continue to worsen with a highly volatile situation for remaining and displaced populations, resulting in civilian injuries and deaths, specifically in Tyre and including displaced Syrians. Most of the displaced are staying outside the Government-designated collective shelters. In El Nabatiyeh, displacement remains primarily outside formal sites, with a rise in newly displaced families, indicating growing reliance on host communities and informal arrangements. Protection Monitoring conducted by sector partners in Beirut and Mount Lebanon indicates limited shelter alternatives and increased exposure to protection risks in urban settings. Risks include increased conflict-related distress, secondary displacement, and increasing reliance on high-risk coping mechanisms, including child labour, particularly among vulnerable and marginalized groups and households disproportionately affected by evictions and airstrikes. In the Bekaa, during the reporting period, the number of new IDP arrivals in need of shelters remained low, with households accommodated within existing collective

shelters with available capacity. Across locations, communal tension and incidents involving verbal or physical violence have been reported.

Ahead of the negotiations and ceasefire announcement, the situation remains fluid and tense. Communication on risks associated with immediate return to affected areas needs to be strengthened through multiple channels to support informed decision-making and minimize people's exposure to harm, complementing the efforts of the authorities.

Operational responses continue to adapt to evolving displacement dynamics and emerging protection needs, balancing service continuity with rapid response to new incidents and vulnerabilities.

As of **16 April**, Protection, Child Protection (CP) and GBV partners have reached **107,985 displaced individuals** with core protection services, including **50,397 IDPs** through awareness and information sessions, **41,052 people** with case management and mental health and psychosocial support, **11,616 women and girls** with dignity kits through GBV activities. Protection Emergency Cash has been provided to **1,011 displaced** and highly vulnerable households (**benefitting some 4,902 individuals**), addressing immediate life-saving response alongside emerging longer-term needs for affected households. CP partners continue efforts to follow up on children affected by recent attacks, including **family tracing and reunification** following the dissemination of CP hotlines.

Community engagement and mobilization activities were rolled out, including discussions on key protection risks affecting daily life within the sites with the aim to explore community-based solutions and assess the capacities and skills of community members to contribute positively to their living environment. Some of the initiatives include community-led maintenance and community-based sports and recreational activities.

Significant protection gaps persist. **Safe, inclusive and accessible shelter** remains a critical challenge, particularly for vulnerable Lebanese and non-Lebanese populations living outside collective sites. An update to the sectoral geo-split is ongoing to ensure the presence and capacity of partners is properly assessed. Coverage of all sector partners remained at **79 per cent** of collective sites, however, stretched partner capacity has led to gaps of over 40 per cent across **dedicated GBV and general protection services in collective sites**. Protection monitoring outside collective shelters remains **resource-intensive**, and delivery of MHPSS and recreational activities for children is severely constrained in open or overcrowded settings. Access to **Women and Girls Safe Spaces** and consistent caregiver engagement have further declined due to insecurity, displacement fatigue and limited space.

Partners continue to emphasize the need for **stronger cross-sectoral coordination within collective sites**, enhanced capacity of site focal points, improved **accountability mechanisms**, and targeted training for frontline responders to support safe identification and referral of high-risk cases. Persistent **funding gaps** continue to limit coverage and scale-up of protection services.

Shelter

The ongoing response to address emergency shelter needs is reaching affected populations both inside and outside collective shelters. In collective shelters, where close to **52 per cent of the hosted population are women and girls**, shelter assistance remains critical to ensuring dignified living conditions. Overall, Shelter partners have distributed **115,067 mattresses** and **144,875 blankets**, among other core relief items (CRIs).

Across collective sites in all governorates, shelter partners have distributed **97,844 mattresses**, **120,905 blankets**, **51,178 sleeping mats**, **43,439 pillows**, as well as approximately **11,883 solar lamps** and **8,843 jerry cans**. CRI 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.

The CRI distribution outside collective sites is being informed by assessed needs and referrals of vulnerable households. This support was delivered on a case-by-case basis and includes **17,223 mattresses**, **23,970 blankets**, and **10,169 pillows**.

In addition, the **Shelter Sector has assigned 646 collective sites to shelter partners** for repairs and improvements. Of these, **469 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 arrangements. A total of **326 technical submissions** has been made to secure approvals to initiate repairs from the relevant authorities/ focal points, of which **301** have been approved and works have already commenced inside **242 sites**, of which **145 have been completed**.



Water, Sanitation, and Hygiene (WASH)

WASH partners have delivered assistance in **642 collective shelters**, reaching **186,119 IDPs**, ensuring continued access to safe water, sanitation, and hygiene services in high-density and high-risk environments. The scale-up of assistance is helping to mitigate public health risks associated with overcrowding, limited water access, and inadequate hygiene conditions.

To date, **68,635 hygiene kits** and **35,552 menstrual hygiene kits** have been distributed across shelters, supporting essential hygiene practices and reducing the risk of communicable diseases. In parallel, **3,375,310 litres of bottled drinking water** and **33,080 m³ of water through water trucking** have been delivered to 597 shelters, addressing immediate drinking water needs in sites with limited or disrupted supply.

In addition, **666,000 litres of fuel have been provided to Water Establishments**, sustaining public water supply services for **552,879 people**. WASH partners have also supported 187 water stations with fuel, repairs, and spare parts to maintain operations, which is critical to sustaining network functionality under increased demand and reducing reliance on more costly emergency water supply modalities.



Social Stability

The Tensions Monitoring System (TMS) at UNDP 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 UNDP’s TMS, which combines open-source and social media monitoring with field inputs coordinated alongside government counterparts and partner organizations.

Following the escalation of hostilities, a Conflict Sensitivity Training Package was delivered online in Arabic and English, reaching 495 participants (368 women and 127 men). It equipped practitioners with tools for conflict-sensitive programming and engagement with different stakeholders.

Peace Building partners implemented social stability activities across Mount Lebanon, North, South, and Baalbek, targeting IDPs and host communities through wellbeing support, community events, and conflict prevention initiatives in Collective Shelters. Sessions on fake news and hate speech also promoted responsible social media use among diverse groups.

Social stability partners initiated **focus group discussions led by women peacebuilders** across key locations in North Lebanon, Mount Lebanon (Chouf–Aley), Baalbek-Hermel, and South Lebanon, generating real-time insights into rising social, security, and sectarian tensions. These tensions are particularly linked to overcrowding, aid distribution, economic pressures, and perceived inequalities between displaced and host

communities. The discussions also underscore the active role of women peacebuilders in de-escalating tensions, coordinating with local actors, and providing psychosocial support. To date, **43 women peacebuilders have participated across four regions**: Tripoli, Baalbek-Hermel, South Lebanon, and Chouf–Aley.



Logistics and Telecommunications

16 April 2026 marks one month since the activation of the Logistics and Telecommunications Cluster (LTC) in Lebanon, following the renewed escalation of hostilities and rapidly increasing humanitarian needs.

During the first month of activation, the [Logistics Cluster](#) supported **49 humanitarian partners** through logistics coordination, common services, access analysis, and information sharing. **Ten coordinated convoys were facilitated by the Cluster with WFP support**, delivering **421 metric tons of multi-sector humanitarian assistance**, including food, water, blankets, mattresses, sleeping mats, kitchen sets, and hygiene, health, and dignity kits, to hard-to-reach areas in south Lebanon. In addition, **17 fully loaded convoys (131 trucks)** were prepared during the reporting period but were unable to move due to severe security constraints, including ongoing hostilities and sudden access closures.

In addition to convoys, the Cluster made available to organisations the **common storage facilities** in Beirut with 1,500 pallet capacity and in Zahle with 200 pallet positions. These facilities supported both temporary storage and cargo consolidation for convoy operations. **A total of 904 m³ of humanitarian cargo** was handled through the common warehouses. The Cluster coordinated the humanitarian logistics response in Lebanon by aligning partners around shared operational objectives, maintaining regular information exchange with relevant stakeholders, and ensuring continuity of coordination and timely operational updates. Access and operational constraints related to security, border procedures, and infrastructure were monitored and communicated, alongside continued coordination with regional teams to support contingency planning and movements.

GENERAL COORDINATION

The **Humanitarian Country Team (HCT)**, chaired by the acting Humanitarian Coordinator, convened on 16 April 2026, bringing together UN agencies, NGOs and donors to provide strategic direction to the response.

Coordination efforts continued during the reporting period to support a coherent, Government-led humanitarian response to the escalation of hostilities. The **Inter-Sector Coordination Group (ISCG)** continue to facilitate information-sharing, align sectoral priorities and address emerging operational constraints, in close collaboration with line ministries and humanitarian partners. ISCG co-chairs and sector leads maintain **daily engagement at the National Operations Room (Grand Serail)** to support real-time coordination with the **Disaster Risk Management (DRM) Unit** and relevant authorities.

Efforts to strengthen **information management and needs analysis** progressed during the period. The **Emergency Rapid Needs Assessment (ERNA)** for populations inside and outside collective shelters was endorsed by the **Ministry of Social Affairs (MoSA)**. Rollout started this week in coordination with OCGs, sectors and government counterparts.

Efforts are also ongoing to ensure a more coherent, accessible and clear approach to accountability, particularly in collective shelters. Community feedback is being aggregated through the Community Accountability Platform (CAP) to inform real-time response adjustments and support evidence-based coordination. In parallel, PSEA measures are being reinforced through the visibility of reporting channels, ongoing training of frontline responders and site management, and strengthened systems for safe and confidential handling of complaints.