

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)



117,421 (DRM)

displaced in collective shelters



631 (DRM)

shelters



2,294 (MoPH)

people killed



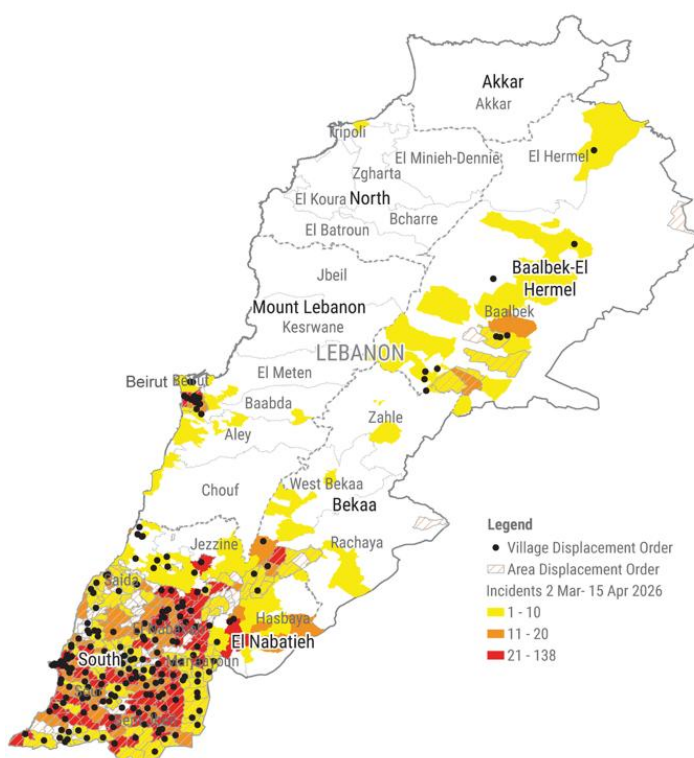
7,544 (MoPH)

people injured

HIGHLIGHTS

- **Continued mass displacement and immense humanitarian needs** despite the start of a 10-day ceasefire.
- **21 per cent decrease** in the number of displaced people in collective shelters recorded overall; 117,420 people remain in 631 sites.
- **Return to 74 localities in southern Lebanon restricted** by ongoing military presence.
- **Humanitarian response is ongoing but insufficient**; major gaps persist due to funding shortages, access constraints, and rising tensions.
- **Rising food prices reported** – up 6 per cent compared to February 2026.
- **Health systems under extreme strain**; six hospitals closed and 15 damaged.

CONFLICT INTENSITY MAP of 20 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: 18 April 2026 Source: incidents: public media
Feedback: ochalebanon@un.org www.unocha.org www.reliefweb.int

SITUATION OVERVIEW

Lebanon continues to confront a massive humanitarian crisis, despite the entry into effect of a 10-day ceasefire on 17 April, with **hundreds of thousands of people remaining internally displaced** and in urgent need of assistance. Across southern Lebanon, in Bekaa and in Beirut's southern suburbs in particular, people have lost family members and friends, homes and livelihoods while also bearing the heavy burden of psychosocial trauma caused by violence, displacement, and a lack of access to basic necessities.

Since the start of the ceasefire, the Israeli Army has reiterated **daily warnings against the return of displaced people** to areas across southern Lebanon, including some **74 localities** and their surrounding areas.

Since the ceasefire announcement, the number of displaced people in collective shelters has reduced by 21 per cent, to **117,421 people staying in 631 collective shelters as of 20 April**. The situation remains fluid and continuously changing, with significant variation in the scale of departures from collective shelters in different

governorates. In Baalbek-Hermel, the number of people in collective shelters dropped by 85 per cent between 16 and 20 April. In Bekaa, departures from collective shelters have been comparatively more moderate, around 56 per cent. In Nabatieh, Akkar and North governorates, the number of people in collective shelters has remained relatively stable since the ceasefire. Mount Lebanon and South both saw an initial decrease in the number of displaced in collective shelters during the first two days of the ceasefire but have seen gradually increasing figures once again since 19 April. Beirut is the only governorate that has shown an increase in the number of displaced within collective shelters. People displaced from Beirut's southern suburbs are continuously moving between their homes and collective shelters.

Protection needs remain acute, particularly for communities remaining in parts of southern Lebanon and in close proximity to military activity. For those returning to heavily conflict-affected areas, protection risks linked to unexploded ordnance (UXO) are of grave concern. Many conflict-affected non-Lebanese face heightened risks due to lack of documentation and legal residency.

The healthcare sector continues to suffer extreme strain. Hospitals, particularly in southern Lebanon, have been overwhelmed by mass casualties and are struggling with disrupted medical services. Patients are missing essential treatments, while mental health conditions are sharply worsening due to repeated loss and displacement. As of 20 April, six hospitals have been closed due to the escalation of hostilities and 15 damaged, while 51 Primary Healthcare Centres (PHCCs) are also closed and seven damaged. According to WHO, 147 attacks on healthcare resulting in 100 deaths and 233 injuries among healthcare workers on duty, have been recorded since 2 March 2026.

The violence has caused widespread damage to infrastructure and basic services across southern Lebanon, including residential buildings, road networks, and other vital services.

HUMANITARIAN RESPONSE

Humanitarian partners are rolling out the **Emergency Rapid Needs Assessment (ERNA)** as a coordinated multi-sectoral needs assessment to ensure that response planning remains evidence-based and responsive. As the operational context continues to evolve rapidly, assessments will aim to identify emerging priorities, reduce duplication, and enable partners to align interventions with the most urgent needs of affected populations.

The escalation of hostilities has severely **disrupted livelihoods and basic coping mechanisms**, increasing vulnerability among both displaced households and host communities. As a result, affected populations remain dependent on immediate, life-saving humanitarian assistance to meet essential food, shelter, and protection needs.

Patterns of population movement continue to influence response planning and implementation. Recent and ongoing displacement trends also underscore the need for response partners to maintain **operational flexibility and preparedness to support new arrivals from multiple locations**. Movements place additional pressure on existing services, requiring an agile response capable of rapidly adjusting geographic focus, sectoral activities, and operational capacity.

Continuous **market and supply chain monitoring** remains a key component of response decision-making, particularly in guiding the strategic expansion of cash-based assistance. By closely tracking price trends, availability of essential goods, and market functionality, partners aim to ensure that cash interventions are appropriately scaled, contextually viable, and effective in meeting the needs of affected households.



Access and Civil-Military Coordination

Humanitarian partners, with the support of the Humanitarian Notification System (HNS), continue to support civilian populations in conflict-affected and hard-to-reach areas. Between 2 March and 20 April, a **total of 73**

HNS-facilitated movements reached populations remaining in hard-to-reach locations, including Hasbaya, Chebaa, Ein Ebel, Tyre, Rmeish, Rihane, and Tebnine, among others. These movements enabled the delivery of essential, life-saving assistance such as food and bread, safe drinking water, medical supplies, fuel, hygiene and dignity kits, and nutrition support for pregnant and lactating women. They also facilitated the evacuation of individuals with heightened vulnerabilities to safer locations when possible.

Despite reports that the Lebanese Armed Forces have begun repairing damaged roads and bridges following the announcement of the cessation of hostilities on 17 April, **humanitarian access remains highly constrained**. Access challenges persist due to the continued restriction on returns to areas identified by the Israeli Army, which limits movement and impedes sustained humanitarian operations.

The Access Working Group is closely monitoring the situation to track changes to the operational environment. This evolving context continues to contribute to uncertainty and unpredictability with respect to humanitarian access in southern areas, with particularly severe implications for thousands of families who remain in hard-to-reach locations.



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's 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.

During the reporting period, the Ministry of Social Affairs (MoSA) initiated outreach to humanitarian partners to convene a briefing on the Shock-Responsive Safety Net (SRSN) Grievance and Redress Mechanism (GRM). The session will clarify GRM functionalities, provide operational guidance, and explore opportunities for collaboration with Cash Working Group (CWG) partners supporting the implementation of emergency Multipurpose Cash Assistance (MPCA) under the SRSN. GRM is a formal mechanism that enables affected people to submit complaints, provide feedback, or seek clarification related to assistance, ensuring issues are addressed in a timely, transparent, and accountable manner, and contributing to programme quality, accountability, and beneficiary protection.



Education

More than **39,000 children remain accommodated in collective shelters, including 453 schools (335 public, 73 private, and 45 technical institutes)**, 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 **1,545 education kits reaching approximately 77,000 children across governorates**. For non-formal education, partners have supported over **4,125 internally displaced children through both online and in-person modalities** and 96 internally displaced children accessing online non-formal education. 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 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 **5.3 million hot and cold meals**, while also providing **80,000 ready-to-eat (RTE)** rations to help families meet their immediate food needs.

An **increase in food prices** has been reported, mainly due to rising fuel and transportation costs, heightened demand linked to the escalation, and regional energy disruptions. The cost of the food Survival Minimum Expenditure Basket (SMEB) reached \$43.5 per person in the month of March. This represents a 6 per cent increase compared to February 2026 monthly average of \$41 per person. Additionally, the price of a large bundle of bread increased from LBP 77,000 at the start of the escalation in early March to LBP 90,000 as of 27 March, representing an increase of approximately 17 per cent. These rising costs are adding pressure on conflict-affected displaced individuals and affecting their ability to meet their basic daily food needs. In light of these pressures, the sector is prioritizing lifesaving support through daily hot meals and ready-to-eat (RTE) rations for people in shelters, while providing cash assistance to those staying outside shelters in areas where markets are still functioning.

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 March Index data 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 to deliver life-saving assistance to hard-to-reach areas. However, challenges in obtaining the necessary approvals continue to cause delays.

WFP, in coordination with the sector and the Ministry of Education and Higher Education (MEHE), has identified a list of MEHE-owned public schools currently being used as temporary shelters, and assessed the latter's capacity via rapid phone surveys to learn possibility of establishing a communal kitchen. A standardized tool was developed for on-site assessments, Food Security and Agriculture (FSA) Sector partners were trained on its use. On-site assessments are planned for Tuesday, 21 April 2026.

Health

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.

Under the leadership of the Ministry of Public Health (MoPH), the Health Sector Coordination Team, in close collaboration with partners on the ground, is assessing health facility functionality in areas receiving large numbers of returnees and working to ensure uninterrupted access to essential services through facility reactivation where feasible, or alternative delivery modalities such as mobile units, satellite units, and transportation support to nearby functional health facilities.

Nutrition

17,585 children under five, adolescent girls, and pregnant and lactating women were reached with emergency nutrition rations and micronutrient supplementation sufficient for one month in 543 shelters, out of which approximately 163 children aged 6-11 months were reached with age-appropriate complementary feeding packages. **8,915 children under five and pregnant and lactating women** were screened for wasting. where, **173 children under 5 years of age and 67 women were 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. In parallel, 299 caregivers contacted the national IYCF hotline, of whom 205 were referred for additional specialized support. Overall, more than **6,537 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. Nutrition sector partners have been supporting MOPH in the safe provision of MOPH formula milk. To date, 8 non-breastfed infants aged 0-6 months have been reached with formula milk sufficient for 1 month coupled with IYCF counselling. The Nutrition Sector is closely coordinating with MoSA and shelter focal points to identify and refer eligible infants in need of formula milk. However, a critical gap remains in the provision of accompanying BMS kits (feeding tools, safe water, fuel, and hygiene items) required for safe preparation. The sector is actively intensifying efforts to mobilize resources to address this gap and mitigate the associated risks of infection and malnutrition.”

Protection

Despite the ceasefire, significant barriers to safe and sustainable return persist, including housing destruction, service gap and limited access to affected areas. At the same time partners are reporting critical impact on the protection environment and services. This also brings **heightened child protection risks, including family separation, exposure to explosive hazards, and gaps in access to services**.

Protection concerns remain pronounced, particularly for non-Lebanese nationals facing movement restrictions, documentation challenges and heightened risk of exploitation. Patterns are emerging as families often send male members to assess property damage and retrieve belongings while women, children, and the elderly remain in collective shelters. In addition, many IDPs, particularly female-headed households, children and the elderly, remain in shelters due to the security concerns, psychological trauma or the inability to afford rising rental costs. Landlords in the South are reportedly demanding up to three months' rent advance, further complicating return. This increases risk of exploitation, with women and girls being the most vulnerable. Furthermore, the sector recognizes critical safety concerns for the returned IDPs, both due to the uncertain sustainability of the ceasefire, and the presence of the UXOs in the areas of return.

Operational responses continue to adapt to evolving needs, though gaps in service coverage and funding constraints remain critical. When it comes to service provision, Protection, GBV, and CP working groups encourage partners to maintain their presence in the collective shelters, and out of shelter static, mobile and remote modalities to ensure continuity of care for the vulnerable populations. Partners report that irregular movement patterns are disrupting structured interventions. At the same time, although heightened psychological

distress is evident among the affected populations - which is also impacting return decisions - limited access to MHPSS services due to mobility constraints, ongoing service disruptions, and increased stigma is reported. In coordination with the sector, Protection, GBV, and CP partners are being supported to expand their mobile outreach and disseminate critical Explosive Ordinance Risk Education (EORE) messaging as part of a unified return assistance strategy.

As of **20 April**, Protection, Child Protection (CP) and GBV partners have reached **125,344 displaced individuals** with core protection services, including **57, 440 IDPs** through awareness and information sessions, **47, 945 people** with case management and mental health and psychosocial support, **13, 692 women and girls** with dignity kits through GBV activities. Protection Emergency Cash has been provided to **1,156 displaced** and highly vulnerable households (**benefitting some 5,780 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 with a focus on people returning, including **family tracing and reunification** following the dissemination of CP hotlines.

Shelter

As the ceasefire entered into effect, the Shelter sector, based on guidance from MoSA, advised partners to temporarily halt all collective shelter repairs until 20 April to allow clarity on population movements and the status of collective shelters, while **CRI distribution continued** for newly identified cases. As of 20 April, a total of 59 collective shelters were closed, with some IDP families returning to their areas of origin. Shelter repair activities are now permitted in open collective shelters, and partners are being redirected to fill gaps. Some IDP families previously hosted by relatives and friends have relocated to collective shelters, where they received core relief items.

The sector continues to face pressure on limited CRI stocks. Although families were advised to retain CRIs when leaving shelters, some acted otherwise prompting regional DRMs to request re-distribution. Given stock constraints, the second round of distributions is currently on hold.

Overall, 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 **115,669 mattresses** and **146,912 blankets**, among other core relief items (CRIs).

Across collective sites in all governorates, shelter partners have distributed **97,898 mattresses**, **121,885 blankets**, **51,379 sleeping mats**, **43,660 pillows**, as well as approximately **12,010 solar lamps** and **8,898 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 **17,771 mattresses**, **25,027 blankets**, and **10,721 pillows**.

In addition, the **Shelter Sector has assigned 654 collective sites to shelter partners** for repairs and improvements. Of these, **477 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 **338 technical submissions** have been made to secure approvals to initiate repairs from the relevant authorities/ focal points, of which **307** have been approved and works have already commenced inside **253 sites**, of which **162 have been completed**.

Water, Sanitation, and Hygiene (WASH)

WASH partners have delivered assistance in **605 collective shelters**, reaching **191,810 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, 69,883 **hygiene kits** and **37,673 menstrual hygiene kits** have been distributed across shelters, supporting essential hygiene practices and reducing the risk of communicable diseases. In parallel, **3,461,270 litres of bottled drinking water** and **34,820 m³ of water through water trucking** have been delivered to 625 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 marked 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

Humanitarian partners continue to **sustain the response across all sectors**, maintaining assistance in both collective shelters and areas of return or secondary displacement. The response remains highly adaptable, with partners adjusting modalities, geographic focus, and prioritization in line with rapidly evolving needs and population movements.

Coordination structures remain fully operational at national and sub-national levels. The Inter-Sector Coordination Group (ISCG), sectors, and Operational Coordination Groups (OCGs) **continue to closely monitor developments, ensuring alignment between field-level response and national planning**, and facilitating real-time information sharing and gap identification.

Collective shelters remain open, as returns remain partial and conditions for safe and sustainable return are not fully established. Planning assumptions remain cautious, with no large-scale deactivation of shelters at this stage. Planning for collective shelters closure or compilation will start to advance gradually as a function of the evolving situation.

Efforts to strengthen the evidence base for response planning are ongoing. **The Emergency Rapid Needs Assessment (ERNA)** is being rolled out to better understand needs both inside and outside collective shelters, with findings expected to inform response adjustments and future planning scenarios.

Overall, the response continues to operate with high uncertainty, requiring sustained flexibility, close coordination with Government counterparts, and continuous adaptation to ensure assistance remains needs-based and responsive to evolving conditions.