

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

KEY FIGURES



Self-registered (IDPs)

>1M

(MoSA)



Displaced in collective shelters

130K

(DRM)



Shelters

635

(DRM)



People killed

3.1K

(MoPH)



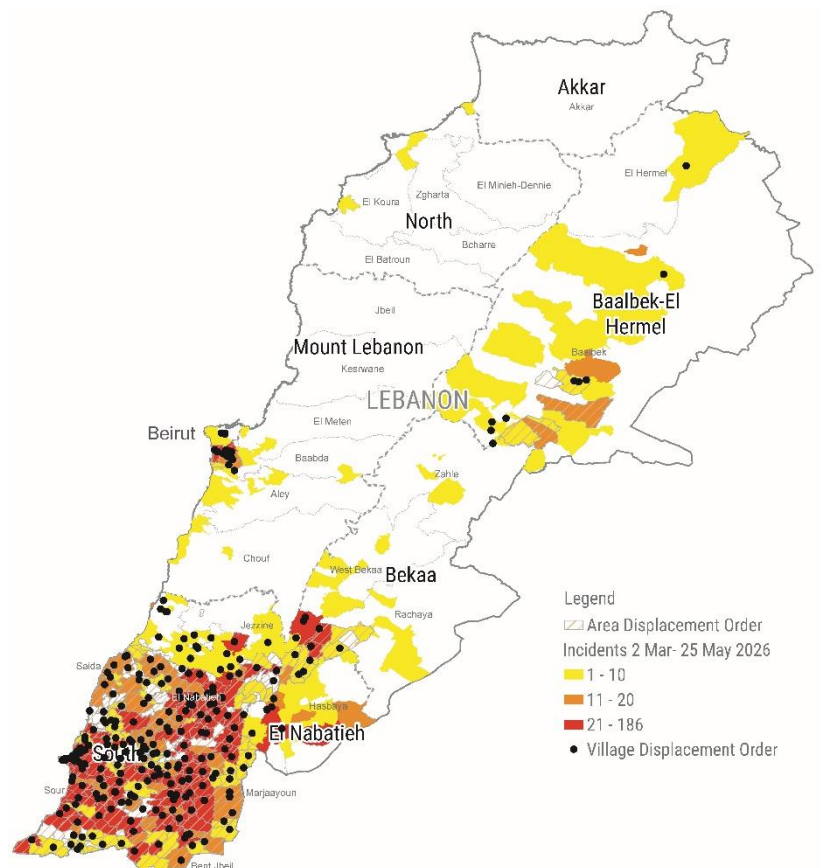
People injured

9.6K

(MoPH)

HIGHLIGHTS

- Hostilities continued despite the ceasefire extension announcement, with airstrikes and displacement orders affecting at least 40 new localities in southern Lebanon.
- A total of 33,897 families (129,724 people) remain displaced across 635 collective shelters. Close to 52 per cent of displaced people in collective shelters are women and girls.
- Hostilities have killed at least 3,185 people and injured 9,633 people since 2 March, according to Ministry of Public Health.
- An audit of gender-based violence (GBV) risks in 180 collective shelters has revealed severe protection risks.
- Between 21 and 25 May, nine incidents targeting health care were recorded, resulting in eight deaths and forty-five injuries among health care workers.
- Access to maternal health services and acute medical care remains critically constrained in communities south of the Litani River.
- The Lebanon Flash Appeal is 58 per cent funded. An extension until end August of the appeal will be launched in the first week of June 2026.



SITUATION OVERVIEW

Airstrikes across Nabatiyeh and South Lebanon Governorate including Tyre district continued, resulting in widespread casualties, displacement, and the destruction of civilian infrastructure. According to the Ministry of Public Health, 3,185 people have been killed since 2 March 2026, including 276 women and 217 children, while 9,633 people have been injured, among them 1,152 women and 854 children.

Beyond immediate casualties, the death, injury, or displacement of adult household members is increasingly disrupting family structures. In many cases, women are assuming greater responsibility for care, income, decision-making, and access to assistance. Sustained and flexible funding is urgently needed to ensure that protection, cash, shelter, health, WASH, and livelihoods responses can identify and adequately support households facing these shifting dynamics.

Displacement levels continue to rise due to ongoing hostilities and successive displacement orders. During the reporting period, 6 renewed and 6 new displacement orders were issued for 40 localities, the majority located in Tyre District in the South governorate. These orders have triggered significant new population movements across the south.

As of 25 May 2026, approximately 129,724 people, representing 33,897 families, were reported as displaced across 635 collective shelters nationwide, reflecting a clear and sustained upward trend in displacement figures. Beirut and Mount Lebanon governorates continue to host the largest number of displaced people, while pressure on shelters across other governorates is also increasing.

Despite a ceasefire extension announcement and the adoption of a World Health Assembly resolution calling for the protection of healthcare in Lebanon on 21 May 2026, attacks on medical personnel and facilities have continued. Since 2 March, 173 incidents have been recorded, resulting in 123 deaths and 273 injuries among health care workers, underscoring the urgent need for all parties to respect and uphold their obligations under International Humanitarian Law

According to the [Health Sector Emergency Situation Report](#), access to maternal and acute care south of the Litani River remains critically constrained, with patients facing delays of up to 48 hours to secure clearance for referral. Between 60 and 80 per cent of households in affected districts are unable to afford health services. The capacity of health systems is under severe strain, with only 68 per cent of facilities fully functional and 29 per cent partially operational, hampered by insecurity, staff shortages, stock depletion of essential medicines, and weak referral systems.

Public health risks in areas affected by the hostilities are rising, with a growing incidence of respiratory infections, diarrheal diseases, mental health conditions, and injuries, compounded by critical shortages of medications for non-communicable diseases, trauma supplies, and fuel to operate health care facilities.

On 22 May, the UN Humanitarian Coordinator visited Tyre alongside inter-sector coordination group agency leads. The group met with the Tyre Union of Municipalities and Disaster Risk Reduction Manager, who noted that current displacement numbers exceed those recorded during the 2024 conflict. It was also mentioned that small numbers of displaced families are returning despite ongoing risks, driven largely by economic pressure and strong attachment to their lands.

A [GBV safety audit](#) of 180 collective shelters revealed severe protection risks, including overcrowding, lack of privacy, poor lighting, and inadequate separation of vulnerable groups, with female-headed households, adolescent girls, and people with disabilities identified as most at risk.

Funding constraints remain a major challenge to sustaining life-saving assistance. As of 25 May, the 2026, [Lebanon Flash Appeal](#), requiring \$308 million, is only **58 per cent funded** with around \$180 million received. The remaining significant funding gap is limiting the ability of humanitarian partners to maintain essential services and expand response capacities especially under continuous waves of renewed displacement.

HUMANITARIAN RESPONSE

Humanitarian partners continue to provide emergency assistance to the most vulnerable affected people in close coordination with national authorities, responding to growing needs driven by ongoing hostilities and repeated population displacement. Operations are prioritising rapid and coordinated multi-sector interventions to support displaced families and

host communities, particularly in areas recently affected by renewed hostilities. Sector updates point to specific risks and needs for women and girls, including access delays for maternal health care, protection risks in informal and open sites, and continued demand for dignity, menstrual hygiene, and nutrition assistance.

[According to the Health Sector Emergency Situation Report](#), Health Sector partners have reached 341,170 people since 2 March, representing 34 per cent of the sector's target under the current Flash Appeal. This response includes nearly 340,000 consultations, over 23,000 vaccine doses, and 1,178 hospitalisations. Only 35 per cent of the US\$37 million required for the health response under the Lebanon Flash Appeal (March–May 2026) has been received, severely limiting response capacity. Priority needs include urgent and flexible funding, strengthened access to hard-to-reach and return areas, replenishment of medical supplies, and expanded community-based disease surveillance, particularly in overcrowded shelters.

Among the displaced population, an estimated 325,500 are women of reproductive age, of whom approximately 13,500 are pregnant.

A shipment of life-saving reproductive health medicines and equipment, funded by the UN Central Emergency Response Fund, arrived in Lebanon via the European Union Humanitarian Air Bridge, with capacity to support an estimated 12,500 women with safe deliveries and obstetric care.



Access and Civil-Military Coordination

Humanitarian actors continue to face an unpredictable volatile operational environment with degraded road conditions, damaged infrastructure, communications disruptions, Global Positioning System (GPS) spoofing, unexploded ordnance (UXO) contamination, conflict debris, and rapidly changing route conditions.

Humanitarian partners, supported by the **Humanitarian Notification System (HNS)**, continue to facilitate access to conflict-affected and **hard-to-reach communities across southern Lebanon** and other impacted areas. Since 2 March, a total of **166 humanitarian movements** were enabled through HNS, reaching locations including Qlaiaa, El Nabatieh, Baalbek, Qaa, the southern suburbs of Beirut, Marjaayoun, Jdeidat Marjaayoun, Hasbaya, Chebaa, Ain Ebel, Tyre (including Palestinian camps), Rmeish, Ebel El Saqi, Fardiss, Bourj El Moulouk, Tebnine, Kaoukba, Souk El-Khan, and Naqoura. Of these, 135 missions south of the Litani River (SLR) were facilitated under existing notification arrangements and coordination with the United Nations Interim Force in Lebanon (UNIFIL), in line with prevailing operational modalities.

These humanitarian movements enabled the **delivery of life-saving assistance**, and when requested, humanitarian actors also supported the **relocation of vulnerable individuals from high-risk areas** to safer locations.

Humanitarian notification processes remain suspended in areas north of the Litani River (NLR) since 17 April, while humanitarian movements have increased south of the Litani River. Although most movements were completed, several missions faced delays, postponements, narrow operational windows, route-related limitations, and ongoing military activity during implementation. Continued ambiguity surrounding the Israeli-declared military area after the ceasefire announcement further complicates operations and civilian access. While humanitarian access continues to be facilitated through existing notification arrangements and coordination with UNIFIL, civilians face increasing restrictions on movement and access to services, with an estimated 28,500 people remaining inside these areas.



Multipurpose Cash Assistance

The Cash Working Group (CWG) maintains close collaboration with implementing partners and Government counterparts to ensure a well-coordinated, inclusive, and effective cash-based response. While the majority of markets across areas of operations continue to function, enabling cash assistance remains a viable and impactful response modality, persistent affordability, challenges, and eroding household purchasing power are increasingly undermining vulnerable populations' ability to meet their basic needs.

CWG partners are actively rolling out The Emergency Multipurpose Cash Assistance (E-MPCA), prioritising households whose lives and livelihoods have been disrupted by displacement and ongoing hostilities.

Since the escalation of conflict in March, **approximately 618,000 conflict-affected individuals**, received at least one round of E-MPCA. Current priorities include harmonising emergency cash guidance and targeting criteria and mobilising additional financial resources.

Education

Since the escalation, Lebanon's education sector has faced severe disruption driven by mass displacement, insecurity, and the conversion of 446 schools into collective shelters out of a total of 635 active collective shelters. Attendance data shows that both morning-shift and afternoon-shift students have incomplete records, pointing to significant and growing dropout risks. Adolescent girls, children with disabilities, and undocumented students face compounded barriers to accessing any form of learning.

The Sector response priorities focus on support for in-person, online or remote learning through alternative learning modalities including Temporary Learning Spaces, Teaching and Learning Hubs, Makani and Dirasa study centres. The sector works to ensure inclusive, gender-responsive services integrating child protection support are implemented.

As of 25 May, a total of **275,493 displaced children are attending formal education**, out of which only 94,073 are able to attend in person and 163,420 attend online, **while 4,736 are accessing non-formal education** in person. In addition, **1,843 education and supply kits** have been **distributed in shelters**, **1,503 children** have received **individual student kits** or learning materials, and **58 children with disabilities have received assistive devices** or rehabilitation services reflecting a steady expansion across all distribution streams over the past week.

Despite the response efforts, critical gaps persist. Connectivity and device access remain the most significant barriers, particularly for afternoon-shift students. Education sector priorities include finalising shelter education approvals and launching Teaching and Learning Hubs for Grade 12 exam preparations.



Food Security and Agriculture

Since 2 March, Food Security and Agriculture (FSA) Sector partners have distributed more than **10.7 million hot and cold meals, 132,024 ready-to-eat (RTE) rations, and 65,463 bread bundles** across Lebanon, reaching displaced families in collective shelters as well as vulnerable households outside formal collective shelters. These distributions are critical in supporting households that have lost access to markets and livelihoods due to ongoing hostilities and displacement.

During the reporting period authorities identified a total of 24,000 vulnerable families in Beirut and 30,000 in Mount Lebanon (Dahieh) governorates in need of food assistance.

The FSA sector ensures all partners and stakeholders can view and confirm the response for each collective shelter via a [Booking System](#) and provides up-to-date information on food assistance delivered inside collective shelters through the [FSA Sector Emergency Dashboard](#).



Health

The Lebanese delegation on the 79th World Health Assembly (WHA79) successfully led the drafting and adoption of a landmark resolution on the protection of health care in Lebanon on 21 May. Nevertheless, despite the adoption of the resolution and the ceasefire extension announcement, attacks on health care continue. Since 21 May, **nine incidents** were recorded, **resulting in eight deaths and forty-five injuries among health care workers**. Since the ceasefire announcement on 17 April, a total of 33 attacks were recorded, causing 26 deaths and 77 injuries. These continued attacks occur despite International Humanitarian Law (IHL) obligation on protection of health care.

Access to maternal health services and acute medical care remains critically constrained in south of the Litani River areas. Pregnant women and patients with life-threatening conditions, including acute cardiac events and acute exacerbations of chronic diseases, face support delays of up to 48 hours until movement clearance is secured, posing serious risks to patients, including increased maternal and neonatal morbidity and mortality.

Health partners continued to coordinate with the Lebanese Red Cross (LRC) to streamline referral pathways, facilitate safe transport, and reduce delays in accessing emergency obstetric care, despite ongoing access restrictions.



Nutrition

Since 2 March, a total of **36,120 children under five, adolescent girls, and pregnant and lactating women (PLW)** have received one month of **emergency nutrition rations and micronutrient supplements**. This includes age-appropriate complementary feeding kits provided to 782 children aged 6–12 months in collective shelters. Gaps remain in the provision of age-appropriate complementary feeding kits for children aged 12–23 months.

The national Infant and Young Child Feeding (IYCF) hotline received 609 calls from caregivers, of whom **473 cases were referred for specialised IYCF support services**. In parallel, **13,581 caregivers** of children under five benefited from **counselling and awareness sessions** on IYCF, nutrition, and Early Childhood Development (ECD), delivered through both in-person and digital platforms.

Nutrition Sector partners have been supporting the Ministry of Public Health (MoPH) in providing unbranded infant formula through a targeted approach for infants under one year of age. To date, **1,955 tins of infant formula have been distributed to 233 children** identified as requiring formula-feeding support through IYCF assessment tools, with tailored counselling provided to caregivers. Additionally, **115 breastmilk substitute (BMS) kits** have been distributed to support the safe preparation and use of infant formula in shelters where hygienic conditions and essential equipment remain inadequate.



Protection

Protection monitoring is ongoing across multiple locations affected by continued hostilities. Through protection monitoring and increased field missions, protection partners are increasingly identifying vulnerable people residing outside collective shelters, often in substandard conditions including garages or makeshift sites. Families assessed as living in open areas in makeshift tents hesitate to relocate due to the distance to community structures, existing livelihood opportunities, and proximity to their areas of origin.

May 2026 [Audit of gender-based violence](#) (GBV) risks in 180 collective shelters has revealed severe protection risks. Women and girls residing in tents, public spaces, and open areas face acute protection risks, with urgent needs related to safe accommodation, water and sanitation facilities, and access to essential services. The main child protection concern is children being left unattended and at risk of neglect in open spaces. Parenting sessions and recreational activities are being carried out, but capacities are stretched and a more systematic approach to childcare at larger-scale open sites is needed.

Partners continue to respond to complex needs, including support for vulnerable individuals living in makeshift tents, high-risk cases involving persons with disabilities, and targeted relocations to more suitable spaces for those requiring them.

High levels of psychosocial distress among children and caregivers are reported, highlighting the need to strengthen focused psychosocial support (PSS) interventions, however, challenges in securing safe and appropriate spaces within shelters to deliver mentioned activities persist.

As of 25 May 2026, Protection, Child Protection (CP), and GBV partners had reached **228,430 displaced people** across the country since 2 March, approximately half of whom were supported within communities. Prioritised services included community outreach, awareness-raising, and information sessions reaching 115,855 displaced persons; mental health and psychosocial support activities reaching 74,625 individuals with the vast majority being children; and case management services supporting 1,452 people.

Across population groups, **2,112 protection cash grants** were provided to address the immediate protection needs of approximately **7,233 vulnerable individuals**, while over **27,467 women and girls** received **dignity kits** and GBV-specific awareness materials. Protection actors also scaled up targeted support for **persons with disabilities**, reaching more than **1,591** with specialised care services or assistive devices.

Significant staffing shortages across Protection, CP, and GBV programmes are increasingly constraining the sector's ability to reach all people in need. The Protection Sector and its sub-sectors are working on a more coherent, protection-sensitive response, particularly for displaced households in informal settings.



Shelter

Shelter partners have collectively supported **45,125 households** both inside and outside collective shelters through the distribution of **134,679 mattresses, 174,309 blankets, and 84,079 pillows**, alongside other **essential non-food items (NFIs)** including sleeping mats, solar lamps, and jerrycans.

Within collective shelters, distributions included 108,239 mattresses, 135,490 blankets, and 68,477 pillows, in addition to supplementary items aimed at supporting dignified living conditions. Initial Core Relief Item (CRI) distributions have reached all households within shelters, while the identification and registration of new arrivals is being managed through established referral mechanisms.

Outside collective shelters, assistance is provided on a case-by-case basis, with 26,440 mattresses, 38,819 blankets, and 15,602 pillows distributed to vulnerable households.

Shelter partners are currently undertaking **repairs and upgrades** in 409 collective shelters, of which **311 are completed** to date. Response activities are focused on improving safety, increasing capacity, and enhancing privacy for displaced populations



Site Management and Coordination

In response to sustained and growing humanitarian needs, the Ministry of Social Affairs (MoSA) is leading a scale-up of site management activities, with technical and operational support from the International Organization for Migration (IOM). The Shelter Sector is working in close coordination with the Site Management Coordination (SMC) Sub-Sector for coherent and complementary approach on the ground, and to align site care, maintenance, and service delivery activities across collective shelter sites.



Water, Sanitation and Hygiene

WASH needs remain significant across collective shelters and conflict-affected areas, driven by continued displacement, disruptions to water supply systems, and limited access to safe sanitation and hygiene services. Without timely funding for emergency WASH response activities, the risk of a further deterioration in water access and its associated public health consequences is a serious concern. Since 2 March, **WASH Sector partners have supported a total of 884,661 people** across collective shelters, outside shelters, and host communities through emergency services, as well as the repair and maintenance of water supply and wastewater systems.

WASH needs for displaced families persist, particularly in high-density collective shelters where WASH conditions remain critical. The WASH Sector continues to coordinate closely with national counterparts including the Ministry of Energy and Water, the Ministry of Social Affairs, and the Disaster Risk Management unit, to reassess needs, monitor service coverage, and prioritise response activities in collective shelters with the most acute gaps. Rapid Technical Assessment teams have been deployed across shelter sites to update and validate current needs.

The strain on public water infrastructure has substantially risen, creating urgent needs for fuel support, emergency repairs, operation and maintenance, and the provision of spare parts to ensure continuity of water service delivery for affected populations. Since 2 March, **WASH sector partners have provided 812,000 litres of fuel to water establishments, sustaining public water supply services for an estimated 657,694 people**. WASH partners further supported **259 water stations with fuel, repairs, and spare parts** critical to maintaining network functionality under increased demand.

Displaced people in collective shelters have received a total of 102,349 hygiene kits, 60,705 menstrual hygiene kits, and 1,394 cleaning kits. WASH partners have also provided **3,765,725 litres of potable water and 84,460 m³ of water**

to **collective shelters** through water trucking, addressing immediate drinking water needs in sites with limited or disrupted water supply. Activities to improve safe sanitation services included the installation of 92 external latrines and 352 external showers, in addition to the running emergency desludging services.

Despite progress, several operational challenges continue to constrain the response. Rapid population movements are placing sustained pressure on WASH services, while funding shortfalls are limiting partners' ability to scale up across all shelters.

Key priorities include the installation of water filtration systems, rehabilitation and expansion of sanitation facilities, and securing urgent fuel supplies to maintain water networks and pumping stations in high-displacement areas. Hygiene promotion and water conservation practices within shelters also remain essential to mitigating public health risks for the displaced population.



Social Stability

The [Tensions Pulse Survey](#) highlights a **worrying security and social environment in Lebanon** as ongoing airstrikes, new displacement orders, and political tensions continue to intensify the strain on affected people. Displacement orders have expanded for the first time to include Nabatiyeh City, while continued airstrikes are placing an additional strain on emergency response systems and humanitarian assistance. Rising pressure on public services, shelter capacity, and state-citizen relations reportedly continue to fuel tensions across affected communities.

Societal events highlight **growing political and inter-communal tensions linked to debates around the proposed general amnesty law**, including road closures, sit-ins, and public mobilization across several regions including Akkar, Tripoli, Saida, Beirut, and Aarsal.



Logistics and Telecommunications

The Logistics and Telecommunications Cluster (LTC) continues to play an enabling role in the delivery of humanitarian assistance, with priority areas determined in close coordination with national authorities and sector leads. Operations are increasingly challenged by a constrained environment marked by insecurity, damaged infrastructure, and restricted access, particularly across southern Lebanon where the destruction of key infrastructure including bridges continues to severely limit the ability of humanitarian partners to reach affected communities.

Common logistics services remain central to sustaining humanitarian access in the most hard-to-reach areas. Transport services are provided free of charge to partners, facilitating the movement of life-saving supplies through coordinated convoy operations. To date, the Lebanon LTC has supported 22 convoys to hard-to-reach areas, complemented by two additional regional convoys originating from Jordan. Shared storage facilities continue to be made available to partners, offering temporary warehousing solutions and cargo consolidation support to streamline the flow of humanitarian goods across the country.

GENERAL COORDINATION

The Inter-Sector Coordination Group (ISCG) and Operational Coordination Groups (OCGs), in close coordination with the Ministry of Social Affairs and the National Disaster Risk Management Unit, continue to closely monitor displacement and population movements to inform response planning and facilitate the timely provision of assistance where needed.

Following a planning session for the **extension of the Lebanon Flash Appeal for an additional 3 months**, sectors have consolidated inputs into an evidence-based revised appeal to mobilize the resources urgently needed to sustain and scale up the humanitarian response as critical needs continue to rise. The Revised Flash Appeal will be launched jointly with the Government on 5 June 2026.

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