



Together with the Ministry of Public Health, UNICEF is delivering health services to children like six-month-old Nabil, helping ensure all children, including those in shelters, have access to essential services.

## Highlights

- 8 April marked the deadliest day of the conflict, with at least 303 people killed, including 33 children, and over 1,150 injured, including 153 children. The escalation has sharply increased protection risks for children, highlighting the acute threat to their safety, wellbeing, and access to essential services.
- UNICEF has reached approximately 100,000 people in hard-to-reach, high-risk areas since 2 March, delivering life-saving support to children and families despite severe access constraints and ongoing hostilities through joint convoys with WFP.
- UNICEF is reaching 30,350 children with learning, recreational, and play materials through the distribution of 975 education kits in 174 shelters.
- To reach 1 million people in need, UNICEF requires US\$ 48.3 million for its three-month response, but faces a 74 per cent funding gap with only US\$ 12.5 million available. Without urgent additional funding, life-saving services for children and families will be disrupted.

# Lebanon

## Humanitarian Flash Update No. 7

Escalation of Hostilities

9 April 2026

unicef   
for every child

## Situation in Numbers



**1,888**

People killed since 2 March  
(MoPH)



**6,092**

People injured since 2 March  
(MoPH)



**390,000**

Children displaced



**1.1 million**

People displaced

## Situation Overview and Humanitarian Needs

On 8 April, the deadliest day of the conflict in Lebanon to date, at least 303 people were reportedly killed, including 33 children, and over 1,150 injured, including 153 children, following Israeli strikes. This brings the total to 1,888 deaths and 6,092 injuries since 2 March, according to the Ministry of Public Health (MoPH) as of 9 April. The intensification of attacks have prompted international calls for the protection of civilians and urgent measures to de-escalate tensions. The escalation has significantly increased protection risks, particularly for children, including family separation, psychological distress, and reduced access to essential services. As of 9 April, 16 children were identified as unaccompanied and separated, with 15 reunited with support from UNICEF and child protection sector partners.

Mass displacement is ongoing amid intensified strikes, repeated displacement orders, and the expansion of affected areas. As of 8 April, over 1.1 million people<sup>1</sup> are displaced, including more than 390,000 children, with 139,241 individuals sheltering in 680 official collective shelters.<sup>2</sup> Continued strikes in densely populated urban areas, including Beirut's southern suburbs,

<sup>1</sup> Ministry of Social Affairs

<sup>2</sup> Disaster Risk Management Unit Daily Situation Report, 8 April

risk triggering further large-scale displacement and compounding already overstretched shelter capacity.<sup>3</sup> Between 2 March to 5 April, approximately 206,466 Syrians crossed back into Syria along with 36,794 Lebanese crossing into Syria.<sup>4</sup>

Hostilities remain widespread across Beirut's southern suburbs, southern Lebanon, and the Bekaa, with continued artillery fire and reported ground incursions along the Blue Line.<sup>5</sup> Civilian infrastructure continues to be impacted, including 18 reported incidents affecting water systems across Baalbek-Hermel, Bekaa, South, and Nabatieh, damaging reservoirs, pumping stations, solar systems, and main supply lines, and disrupting access to safe water. Airstrikes have disabled key crossings, severely disrupting movement and humanitarian access. Damage to major routes has cut connectivity across southern Lebanon and other parts of the country, leaving over 150,000 people effectively isolated with limited access to essential services and aid.

Attacks on healthcare and emergency services remain a major concern. Since 2 March, 57 healthcare workers have been killed and 158 injured, alongside 93 reported attacks on emergency medical services. A total of 75 vehicles and 20 medical facilities have been impacted, and 6 hospitals have been forced to close.<sup>6</sup> Overcrowded shelter conditions are contributing to the emergence of communicable diseases, including scabies, lice, and varicella, increasing public health risks. Access to health services remains constrained, particularly for populations in hard-to-reach areas with limited mobility. These challenges are compounded by the impact of ongoing hostilities on healthcare facilities, further reducing the availability and accessibility of essential services.

Education in Lebanon has been severely disrupted by escalating hostilities and mass displacement. Of the 669 collective shelters, 365 are public schools and 58 are Technical and Vocational Education and Training (TVET) institutions, greatly reducing available learning spaces. In addition, 439 public schools across South and Nabatieh, Bekaa, Baalbek, and Beirut's southern suburbs remain closed due to insecurity, evacuation orders, and proximity to conflict zones. These closures have directly affected approximately 256,000 students, including 181,500 in the morning shift and 74,500 in the afternoon shift. The conversion of 58 TVET schools into shelters has disrupted access for 16,400 youth, while the closure of 46 additional TVET schools in South Lebanon and Bekaa has affected a further 16,850 youth. The Ministry of Education and Higher Education (MEHE) has initiated a gradual reopening of schools through blended learning modalities. Around 600 schools have resumed learning in safer locations, primarily in North Lebanon and Akkar, including 109 designated hub schools operating double-shift systems to accommodate students from closed or shelter schools. At the TVET level, 55 public schools have resumed in-person learning in safe areas, while 103 schools, either closed or currently used as shelters, have transitioned to online learning delivered by TVET teachers. However, despite these efforts, access to education remains uneven, particularly for displaced children and youth facing barriers such as limited connectivity, lack of safe learning spaces, and ongoing insecurity, constraining continuity of learning. Prolonged disruption to education risks increased dropout rates and negative coping mechanisms among children and adolescents, particularly among displaced populations.

To better understand gaps among the most vulnerable, UNICEF partnered with the women-led organization FEMALE to conduct rapid assessments of families living in open spaces in Beirut and Saida. Findings indicate that access to shelter remains limited due to safety concerns, lack of privacy, unsuitable conditions, and fear of family separation, with additional accessibility barriers reported, particularly in the North. WASH services are constrained, with limited access to toilets and hygiene facilities, insufficient hygiene and dignity kits, and long distances to showers. Education access is extremely limited, as children face difficulties participating in remote learning due to limited electricity and charging capacity. Health services remain under pressure, with mobile medical units requiring extended operating hours. Child protection risks include unaccompanied and separated children.

## Summary Analysis of Programme Response

UNICEF is delivering humanitarian programming across Lebanon, including in collective shelters, communities hosting IDPs, hotspot areas directly affected by conflict, and hard-to-reach areas south of the Litani River and in the Bekaa, as well as in border areas. The response targets all vulnerable groups, including Lebanese, Syrian refugees, and Palestinian refugees, leveraging funding from the Lebanon Response Plan. UNICEF's programmes combine broad-reach interventions, such as water system operations and maintenance and primary healthcare, with targeted support, including cash transfers to families and individuals and youth engagement initiatives.

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<sup>3</sup> OCHA Lebanon: Flash Update #13 - Escalation of Hostilities in Lebanon as of 30 March 2026

<sup>4</sup> [UNHCR Operational Data Portal](#), as of 4 April

<sup>5</sup> OCHA Lebanon: Flash Update #13 - Escalation of Hostilities in Lebanon as of 30 March 2026

<sup>6</sup> Public Health Emergency Operation Centre Update – 7 April 2026

## Water, sanitation and hygiene

In coordination with the Ministry of Energy and Water (MoEW), UNICEF supplied over 354,000 litres of fuel to Water Establishments, supporting the operation of approximately 45 water facilities, including water pumping stations, and 19 wastewater stations nationwide. In parallel, UNICEF undertook critical repair and maintenance works, including 42 repairs to water systems, primarily water pumping stations and associated networks, and six repairs to wastewater systems. These fuel, repair, and maintenance interventions directly supported the continuity of public water supply and wastewater services for more than 2,650,000 people, including an estimated 385,000 Internally Displaced Persons (IDPs) hosted within communities relying on these systems.

UNICEF partners are delivering emergency WASH assistance in 255 collective shelters across Lebanon, reaching an estimated 49,832 IDPs, alongside the distribution of essential hygiene items through the Rapid Response Mechanism (RRM). Support in collective shelters includes repairs to existing WASH facilities and the installation of new showers and latrines, including disability-friendly units. In addition, 240 centre cleaning kits were distributed to support safe and hygienic shelter operations.

Furthermore, 12,130 cubic metres of water was provided through water trucking, reaching 28,609 IDPs, while 356 cubic metres of sludge was safely removed through desludging operations in shelters hosting displaced populations. Rapid WASH technical assessments have been completed in the majority of shelters to identify evolving needs, including urgent diesel requirements to sustain critical water and wastewater pumping stations. Displacement locations are being mapped to assess connectivity to existing water networks and determine the need for water trucking or alternative supply options. Wastewater pumping stations continue to be closely monitored to prevent overflows and mitigate associated public health risks.

## Rapid Response Mechanism

As of 8 April, the RRM has reached 205,300 IDPs in more than 376 shelters, as well as people on the move and in hard-to-reach areas, with essential non-food items (NFIs). The second round of RRM distributions in collective shelters, initiated on 7 April, reached approximately 46,220 IDPs. Distributions included 478,773 bottles of water (1.5L each), 42,497 family hygiene kits, 15,606 baby kits, 22,671 dignity kits, 1,982 packs of adult diapers and sanitary pads, and 1,330 boxes of high-energy biscuits for children aged six months and above and pregnant women. Winterization support included 28,466 blankets and 22,462 children's clothing kits. In addition, around 4,700 families on the move in Beirut, Saida, and Tyre received light RRM kits and bottled water.

As part of the RRM response, joint WFP–UNICEF convoys continue to deliver life-sustaining support to children and families in hard-to-reach, high-risk areas despite severe access constraints and ongoing hostilities. Since 2 March, approximately 100,000 people in hard-to-reach areas have been reached with life-sustaining UNICEF assistance. This includes three joint missions since 1 April to Rmeish, Nabatieh, and Tyre, all frontline locations, which reached approximately 60,000 people. A UNICEF-led mission to Tyre highlighted intensifying access constraints and underscored the importance of prepositioning critical supplies, including bottled water and hygiene kits for families and children. These items are currently supporting up to 54,000 displaced people. Multiple strikes have impacted the city, where all 15 shelters are operating at full capacity, with continued arrivals of displaced families.

On 8 April, a UNICEF-led mission to Tebnine, only a few kilometres from the border, marked the first UN convoy to reach the only operational hospital in the area. Despite facing challenges on the road including nearby airstrikes, UNICEF reached over 4,000 families that remained in 26 villages, in addition to supporting more than 100 patients and 80 staff at Tebnine Public Hospital. Life-sustaining supplies delivered included hygiene kits, WASH centre kits for the hospital, bottled water, as well as four Interagency Emergency Health Kits (IEHK), each sufficient to support approximately 10,000 people (40,000 in total) for a three-month period, alongside essential medications to sustain emergency health services.

In parallel, UNICEF activated an alternative delivery modality in close coordination with partners, the DRM, and the Union of Municipalities, enabling last-mile delivery to ten municipalities in the Rihan district. Careful planning ensured successful implementation, reaching approximately 2,000 families (around 10,000 people) with life-saving assistance, complemented by close monitoring through UNICEF partners on the ground.

UNICEF continues to prioritise access to hard-to-reach areas through both convoys and prepositioning, sustaining life-saving support while identifying critical service gaps to inform a more continuous, child-centred response.

## Child protection and GBViE

Across the response, 167 shelters and 78 locations were reached through 18 partners (15 operating inside shelters and three outside), supporting 14,829 individuals, including 12,008 in IDP collective sites and 2,821 in host communities.

Community-based psychosocial support (CBPSS) reached 9,442 children and caregivers through structured sessions in shelters and community spaces, combining psychosocial support with recreational activities to strengthen well-being, resilience, and social cohesion. Caregivers also received practical guidance on stress management, communication with children, key protection risks, and available services and referral pathways.

Case management services were provided to 36 children at risk or survivors of violence. In parallel, 43 unaccompanied and separated children were identified, 16 of which were identified as unaccompanied or separated as a result of the escalation on 8 April. So far, 35 children have been reunited with their caregivers or placed in appropriate community-based care.

Child protection messaging reached 19,087 individuals through direct outreach and social media, promoting safer practices and strengthening families' ability to protect children. Awareness materials on child separation during conflict were disseminated in approximately 60 per cent of collective shelters and across more than 40 public and private hospitals nationwide.

The digital explosive ordnance risk education (EORE) campaign reached over one million individuals across multiple platforms, including in hard-to-reach areas. In addition, 776 frontline workers were reached through online sensitization sessions, and 35,923 EORE information materials were distributed in shelters across the South, West Bekaa, and Baalbek-Hermel.

Efforts to mitigate gender-based violence (GBV) risks continue to scale up. A total of 854 women and girls were reached with GBV risk mitigation interventions, including awareness sessions on GBV and sexual exploitation and abuse (SEA), psychosocial activities, and safety audits in collective shelters and host communities. Dignity and LAHA kits were also distributed. PSEA materials, including reporting procedures and hotlines, have been displayed across shelters, while POWER4Girls emergency sessions continue to provide adolescent girls with critical information and practical skills. Despite these efforts, identification of GBV survivors remains limited due to overcrowding, lack of privacy, and inadequate conditions in collective shelters, which constrain safe disclosure. Continued outreach and awareness-raising are essential to improve reporting and access to services.

## Education

UNICEF continues to support MEHE in rolling out a phased response to ensure continuity of learning for children affected by the crisis. After several weeks of school closures, MEHE has begun gradually reopening in safe areas, combining in-person and online learning. Around 600 schools, mainly in North Lebanon and Akkar, have resumed learning, supporting 141,800 students through the Transition and Resilience Education Fund (TREF). This includes 109 hub schools hosting students from other closed or shelter schools on alternating schedules. Further reopenings are expected in Mount Lebanon and Bekaa. UNICEF is also supporting universal remote learning for all public school students through multiple digital platforms. Accounts and virtual classrooms have been established, reaching 40,000 teachers and 390,000 students. Collaboration with the Ministry of Telecommunications provides up to 20GB of free data per weekday, while monitoring mechanisms on MS Teams and Madristi track participation. As of 8 April, 99,794 students are actively using the platforms, representing a 33.7 per cent engagement rate. Teacher participation is significantly higher, with 17,236 teachers engaged (59 per cent), while school-level activation is near universal, with 1,216 out of 1,226 schools active (99 per cent). Between 1-8 April, 40,301 online classes were delivered, amounting to 23,617 hours of instructional time.

Through the Multiple Flexible Pathways (MFP) programme, 975 education kits have been distributed in 174 collective shelters, reaching 30,350 children with items such as learning supplies, recreational supplies, and LEGO playboxes. In addition, 27,452 children are accessing integrated education services across 32 Makani and 38 Dirasa schools in safe locations. Community outreach efforts by implementing partners have enabled 950 displaced children from nearby shelters and host communities, particularly in Beirut and Mount Lebanon, to participate in Makani-based learning and integrated support activities, with continued work to scale up capacity in all existing and open Makani centres and Dirasa schools in proximity to shelters and catchment areas of displaced children, as well as introducing additional shifts and a rotational schedule to maximise access to learning and integrated services for crisis affected children.

The work to establish Temporary Learning Spaces (TLS) to support displaced and crisis-affected students is ongoing. To date, 30 out of the 75 targeted TLSs have signed agreements to host IDP students across Bekaa, Baalbek, Saida, Mount Lebanon, and Beirut, with a phased rollout of activities underway. Five TLSs launched implementation this week, supporting over 800 internally displaced children with structured education and wellbeing packages. An additional seven TLSs will initiate implementation as of next week. A meeting will be held with the network of private schools to expand the reach for children and establish new TLSs in Beirut and Mount Lebanon governorates through the utilization of school buildings under the TLS network.

The Inclusive Education Programme is mobilizing MEHE multidisciplinary teams to support children with disabilities during the current crisis. To ensure seamless support across online, blended, and in-person modalities, approximately 315 paraprofessionals and special educators were trained on the Microsoft Teams and Madristi platforms on 26 and 27 March. Updated terms of reference (TOR) were issued in March to reflect the specific roles and responsibilities in emergency learning contexts; additionally, standard operating procedures (SOP) were developed at the beginning of April to reflect the updated role of the multidisciplinary team to support the education response. In the North and Akkar, 22 inclusive schools are now operational with approximately 36 multidisciplinary team members supporting. Support for children with disabilities is also being integrated into MFP activities, including the provision of assistive devices, therapy, and referrals. In shelters, to date, MFP partners have identified 273 children with disabilities and 204 adults with disabilities. Of these, 45 children with disabilities have received assistive devices, 45 have started therapy services, and a total of 52 children with disabilities have been supported so far. In addition, 75 adults with disabilities have been referred to other service providers. This multi-pronged approach ensures continuity of education, inclusion, and protection for all learners, particularly displaced children and those with disabilities.

## Health

Since the onset of the emergency, UNICEF has supported the health response for displaced populations through the delivery of more than 140 tons of essential medications and medical supplies to MoPH Primary Healthcare Satellite Units (PSUs) and governmental hospitals. UNICEF has supported the MoPH to activate mobile health services through its PSU and AaSalameh interventions, delivering primary healthcare services to displaced populations. These clinics cover up to 30 per cent of the total shelters covered by the MoPH, providing essential primary healthcare services. In addition to IDPs residing in shelters, UNICEF-supported units cover host communities and hard-to-reach areas. To date, PSUs (mobile clinics) have delivered more than 26,313 primary healthcare services, with 13,828 beneficiaries receiving essential medications.

Health surveillance in shelters indicates that the most common conditions identified are communicable conditions, particularly lice and scabies, linked to overcrowding and living conditions. In response, UNICEF has supported the MoPH with large quantities of treatment supplies for both conditions, which have been directly distributed to all PSUs and AaSalameh centres since the beginning of the crisis. These treatments continue to be delivered to patients as part of routine service provision.

Through the AaSalameh primary healthcare community outreach programme, 12,080 children were vaccinated to date. UNICEF also continues to sustain support to the MoPH Public Health Emergency Operations Centre (PHEOC) to ensure responsiveness and to central medication warehouses, strengthening coordination, logistics, and staffing to ensure the uninterrupted supply, proper storage, and distribution of essential medications to PHC centres and governmental hospitals.

Critical care needs are also being addressed. To date, 166 newborns and children have been admitted to intensive care units across 11 governmental hospitals. Under the UNICEF–MoPH Assistance and Care for War-Wounded and Affected Children (ACWA) programme, 23 children with conflict-related injuries received life-saving surgical interventions. In parallel, 90 injured children and their caregivers received mental health and psychosocial support since 2 March.

In addition, following the additional escalation on 8 April, the majority of children injured in Beirut were transferred to the American University of Beirut Medical Centre, where the most critical cases were managed under the UNICEF supported ACWA programme. To support the surge in caseload, UNICEF dispatched urgently needed medical consumables to the health facility.

## Nutrition

UNICEF expanded its support to nutrition sector partners through the provision of nutrition supplies and capacity building initiatives, increasing coverage to over 470 shelters. This includes 101 shelters through 40 UNICEF-supported PSUs delivering wasting prevention and treatment services, 69 shelters reached through education partners providing integrated nutrition

and Early Childhood Development (ECD) services, and 300 shelters through UNICEF's nutrition partner and nutrition sector partners.

UNICEF sustained service delivery for host communities and displaced populations outside shelters through Makani centres, nutrition partners, and PSUs. Notably, 11 of these PSUs are dedicated to serving populations remaining in hard-to-reach areas in Nabatieh and Bekaa Baalbek-Hermel, ensuring continuity of care.

To provide safe, private, and supportive spaces for breastfeeding and early stimulation activities, and to ensure hygienic environments for infant and young child feeding, particularly during emergencies where caregiving conditions are severely disrupted, UNICEF established 2 Mother–Baby Corner (MBC) and an ECD corner and procured 2,000 breastfeeding covers. These spaces are critical to protect, promote, and support breastfeeding, reduce reliance on unsafe feeding practices, and provide mothers with access to counselling, ultimately safeguarding the health and nutrition of infants and young children.

A total of 2,701 caregivers of children under five received integrated Infant and Young Child Feeding (IYCF), nutrition, and ECD counselling. Additionally, 246 caregivers contacted the national IYCF hotline, with 161 referred for specialized support. In parallel, IYCF rapid assessments reached 166 caregivers to identify and refer children requiring specialized services.

Five Primary Health Care Centers (PHCCs) providing wasting treatment remain non-operational, disrupting access to life-saving services. In addition, widespread displacement has resulted in at least 92 children under five and 146 pregnant and breastfeeding women defaulting from treatment due to insecurity and transportation barriers. UNICEF continues to support 40 PSUs across Lebanon to deliver wasting treatment and maintain service continuity. Overall, through the multi-sectoral implementation of nutrition activities, screening reached 6,216 children under five and 1,037 PBW, identifying 165 children and 35 women with wasting, all of whom were referred for treatment.

To prevent wasting among high-risk groups, UNICEF pre-positioned 262,900 high-energy biscuits (HEBs), 205,107 ready-to-use complementary food (RUCF) jars, and other energy-protein supplements, sufficient to support over 31,863 children under 5 and pregnant and breastfeeding women (PBW) for one month.

To date, 10,576 children under five have received emergency food rations and micronutrient supplementation, including HEBs, small-quantity lipid-based nutrient supplements (SQLNS), and complementary food jars. In addition, 994 pregnant and breastfeeding women and adolescent girls received micronutrient supplementation to prevent deficiencies.

## Social Protection and Humanitarian Cash Assistance

As part of the immediate response to the current escalation and to support beneficiaries of the National Disability Allowance (NDA), UNICEF and the Ministry of Social Affairs (MoSA) advanced the regular cash assistance payment for 38,000 Lebanese and non-Lebanese NDA beneficiaries nationwide, beginning on 10 March.

Building on previous emergency cash responses in 2024, UNICEF, MoSA, and the ILO have activated emergency financial support for families with persons with disabilities affected by the conflict. This shock-responsive expansion of the NDA has provided urgent cash assistance to offset additional costs related to disability during displacement, including access to healthcare, assistive services, and basic needs. Using established NDA delivery systems and registries, the first phase of this intervention was launched on 11 March and has reached approximately 8,000 families (6,000 Lebanese and 2,000 non-Lebanese, or around 33,000 individuals) as of 19 March, with each household receiving a US\$100 grant for households with a child or young person aged 0–19 years living with a disability.

A second phase of the shock-responsive expansion of the NDA has been initiated, through an additional allocation of resources. In this second phase, an additional 4,000 families (3,000 Lebanese and 1000 non-Lebanese, or around 16,000 individuals) with a young person aged 20–27 years living with a disability will be receiving, starting 2 April, a US\$ 100 emergency grant.

The overall target for this emergency support is 45,000 families with a person with a disability from affected areas, to be reached in a phased approach over three months through a one-off cash transfer based on the availability of resources. This programme complements the national Shock-Responsive Social Protection system, also led by the government, ensuring continuity of support and mitigating the immediate financial impact of displacement on vulnerable households.

## Youth and Adolescent Development

UNICEF continues to engage youth as active contributors to the emergency response, supporting both service delivery and community resilience. To ensure continuity of formal TVET education, UNICEF is supporting the TVET Directorate in implementing its learning continuity plan, in line with the Government's directive to resume learning from 30 March 2026. The plan targets 51,600 TVET students and youth across Lebanon through both online and in-person modalities. To date, 55 public TVET schools have progressively resumed in-person learning in safe areas, while 103 schools, either closed or serving as shelters, have transitioned to online learning delivered by TVET teachers.

UNICEF, in coordination with the TVET Directorate, has established two temporary TVET learning hubs in Mount Lebanon (Dekwaneh and Bir Hassan), hosting 5,000 IDPs, to enable blended and online learning for displaced youth. Digital TVET modules are being prepared for rollout in selected shelters, with additional modules under development to expand access further.

In parallel, 15 TVET schools currently functioning as shelters and hosting 8,161 IDPs have received in-kind support from UNICEF, valued at US\$50,000, covering urgent needs such as basic supplies, fuel, and essential materials. Non-formal skilling programmes continue in non-affected areas, reaching 635 youth, while delivery in affected locations has shifted to online modalities where feasible.

Youth are also actively contributing to emergency response through practical action and service delivery. Items produced by youth have been distributed across 27 TVET shelters, including 682 sleeping bags, 500 blankets, 470 clothing kits for Ramadan and Easter, and 3,744 winter kits. Under work-based learning and income-generation programmes, 46 youth supported food security efforts by producing 38,778 hot meals in coordination with WFP across three TVET shelter kitchens, while 48 youth in Baalbek produced and distributed 28,945 cold meals across 35 shelters. An additional 163 youth completed the production of 1,800 light clothing kits, 500 blankets, and 700 sleeping bags. Six youth barbers also provided hygiene support, offering haircuts to 65 IDPs in two shelters.

Youth engagement in social cohesion and psychosocial support activities continues, with 21 trained youth facilitators delivering sessions and adolescent kits, reaching 461 children and adolescents across six TVET shelters.

## Risk Communication and Community Engagement, Accountability to Affected Populations, Prevention of Sexual Exploitation and Abuse, Gender, and Inclusion

Between 1 and 7 April, UNICEF call centres received 1,655 calls from IDPs and host communities. Inquiries primarily related to access to shelter for non-Lebanese populations, emergency cash assistance, non-food items (NFIs), including milk and diapers, access to online learning services, registration through MoSA, and payments for teachers engaged in UNICEF programmes. All cases were referred and followed up to ensure timely responses.

UNICEF convened 179 frontline workers from implementing partners across governorates to strengthen safeguarding and Prevention of Sexual Exploitation and Abuse (PSEA) measures, with a focus on community awareness, reporting mechanisms, and engagement with informal leaders during assistance delivery. In parallel, 42 healthcare professionals from mobile clinic teams were trained in collaboration with the MoPH, reinforcing their role in communicating free access to services and available feedback mechanisms, including the UNICEF hotline. Efforts to strengthen disability inclusion are ongoing. UNICEF, in collaboration with Organizations of Persons with Disabilities and the Emergency Taskforce for People with Disabilities, is leading a national service mapping to improve access to inclusive and specialized services.

Gender-transformative leadership activities for girls are being implemented across 87 shelters and 33 multi-functional platforms, including POWER4Girls emergency sessions, girls' groups, and community initiatives. To date, 1,012 displaced adolescent girls (694 in shelters and 318 in communities) have been reached, while 115 facilitators have been trained to deliver these sessions.

Risk Communication and Community Engagement (RCCE) mechanisms have been activated to support the response, including a communication tree, updated information platforms, and 11 information, education, and communication (IEC) materials disseminated across shelters and communities. These cover key sectors, including education, child protection, mental health and psychosocial support, and public health. Partners are integrating RCCE approaches through schools and community networks, engaging 2,509 individuals in participatory activities. An online chatbot was also shared with 2,071 users through U-Report.

Capacity-building efforts continue across RCCE, Accountability to Affected Populations (AAP), and PSEA. A social listening dashboard is actively monitoring community tensions and misinformation to inform response adjustments, while rapid RCCE assessments are being integrated into the Emergency Rapid Needs Assessment (ERNA).

## Palestinian Programme

Essential services are reaching 22,344 IDPs (5,498 families) across UNRWA shelters and host communities in Palestinian camps and gatherings, including populations experiencing repeated displacement.

Integrated multisectoral services, including Makani programming, are delivered through operational centres, reaching 7,922 children with combined education, child protection, health, and nutrition support, while enabling early identification and referral of vulnerable cases.

Child protection and psychosocial support remain central to the response. A total of 5,860 children accessed community-based psychosocial support, providing safe spaces for expression and emotional relief. In parallel, 45 children received case management and specialized services, while 139 adolescent girls participated in life skills emergency sessions.

Preventive and awareness-raising activities reached 6,154 individuals through child protection and justice for children sessions, promoting positive coping strategies. Health and nutrition awareness sessions reached a further 6,722 children and adolescents, supporting improved hygiene practices and health behaviours in emergency conditions.

Adolescents and youth engagement is contributing to resilience and social cohesion. A total of 434 adolescents participated in life skills and healthy lifestyle sessions, 318 benefited from non-formal skills training, and 65 youth actively engaged in community-led initiatives, including supporting learning and recreational activities for affected children.

Education support has reached 3,100 children following learning assessments, with children grouped by academic level to enable targeted support. Retention learning programmes are ongoing for 800 children aged 6–14, focusing on foundational skills and learning recovery. In parallel, early childhood education is provided to 2,300 children aged 3–5 through play-based and psychomotor approaches supporting cognitive and social development.

Efforts to strengthen safe and accountable access to services included PSEA and AAP awareness sessions, reaching 10,000 individuals with information on available services and feedback mechanisms.

## Supply and Logistics

Since the onset of the emergency, UNICEF has mobilized US\$ 5.1 million in procurement to support its multi-sectoral response in Lebanon. An airbridge between Copenhagen and Beirut, established with support from UNICEF Supply Division and partners including ECHO, the EU Humanitarian Air Bridge (EU HAB), and DSV Logistics, has enabled the rapid delivery of critical supplies. To date, two charter flights carrying 72 metric tons of medical and emergency supplies have arrived, with a third shipment of 20 metric tons currently in preparation.

In parallel, US\$ 5.3 million worth of prepositioned supplies, equivalent to 1,300 metric tons, have been dispatched since the beginning of the response. This includes US\$ 2.8 million in emergency supplies, comprising 86,712 emergency kits, 17,323 winter clothing kits, and 450,000 bottles of water, as well as US\$ 2.1 million in medical and nutrition supplies, in addition to education and WASH materials. Distributions have been implemented through government and local partners, including the MoPH, MEHE, MoSA, and civil society organizations. The replenishment of emergency stocks is underway through local procurement, with 73,135 kits, including baby kits, hygiene kits, and dignity kits, currently in production. Orders for an additional 38,250 emergency kits and 200,000 bottles of water are being issued.

In hard-to-reach areas, distributions continue through coordinated convoys. Additional service providers have been mobilized to support critical infrastructure and service continuity, including the installation of latrines and showers in shelters, fuel delivery to water establishments, and maintenance of water systems nationwide. Printing of emergency learning materials for 50,000 children is also ongoing. To enhance operational safety and access, an additional armoured vehicle has been procured to support staff deployment to hard-to-reach and high-risk areas.

UNICEF is also supporting the MoPH logistics operations at the Karantina Central Medical Store, with the deployment of a logistician contributing to warehouse and inventory management, as well as emergency distributions. Additional manpower and transport capacity are being provided to reinforce day-to-day operations.

## Humanitarian Leadership, Coordination and Strategy

On 28 February 2026, MoSA, designated by the Government as the sole authority to coordinate with the Humanitarian Country Team (HCT) in the event of displacement, convened a meeting with Heads of UN Agencies to align on preparedness measures in anticipation of a potential escalation. During the meeting, MoSA confirmed that the agreed coordination architecture falls under the Lebanese Response Plan (LRP), through the Inter-Sector Coordination Group (ISCG) framework, led jointly by MoSA and the Ministry of Interior and Municipalities (MoIM). At the sub-national level, coordination is led by Governors in coordination with the National Disaster Risk Management Unit.

Within this framework, UNICEF co-leads the Education sector and leads the WASH and Nutrition sectors, as well as the Child Protection Working Group, at both national and sub-national levels. UNICEF also contributes to the Health, GBV and AAP, Gender, Livelihoods, and Basic Assistance sectors. UNICEF is also the co-lead of the Assessment and Analysis Working Group. At the sub-national level, the Operational Coordination Group (OCG) is coordinating the response in close collaboration with MoSA and Governors. UNICEF-led sectors are continuously monitoring partners' emergency response capacities and contingency stock levels, while ensuring that sector-specific preparedness actions are undertaken in coordination with partners.

## Funding Overview and Partnerships

UNICEF's three-month Preparedness and Response Plan requires US\$ 48.3 million to reach 1 million people in need. There is US\$ 12.5 million in available funds for this response, in addition to an internal Emergency Programme Fund (EPF) loan of US\$ 6 million, an internal UNICEF financial mechanism that helps ensure readiness and rapid response during emergencies which will need to be reimbursed once funding is received. A 74 per cent funding gap remains. Without additional resources, UNICEF will be unable to maintain critical services or respond to the escalating needs of affected children and their families.

Funding Needs	Funds Available	Funding Gap
\$48.3m	\$12.5m	\$35.8 (74%)

## Next Update: 16 April

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