



UNICEF continues to support the Ministry of Education and Higher Education (MEHE) in ensuring access to learning for public school students residing in collective shelters.

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Humanitarian Situation Report No. 3

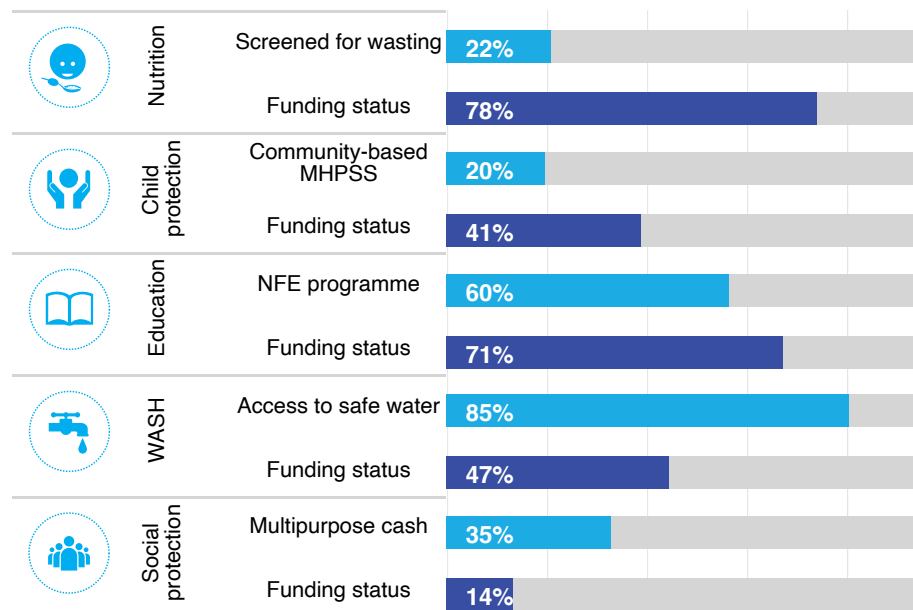
Reporting Period
May 2026

Lebanon

HIGHLIGHTS

- Despite ceasefire announcements, airstrikes, displacement orders, and civilian casualties continued in May 2026, with more than 3,400 people killed and over 10,200 injured. Children accounted for 9 per cent of total casualties.
- Emergency rapid needs assessments reveal that multilayered and cross-sectoral humanitarian needs are increasing, and severity deepening.
- In May, UNICEF and partners continued to adapt programming to maintain critical services. UNICEF-supported water interventions reached over 167,000 people and wastewater interventions benefited 110,000 people; primary healthcare satellite units reached 19,391 women and children; the Call and Learn hotline provided academic support to 18,386 children; and community-based MHPSS sessions reached 6,931 children and caregivers.
- UNICEF's 2026 Humanitarian Action for Children appeal requires US\$388.5 million and is 49 per cent funded. Significant gaps persist in social protection, the Palestinian Programme in Lebanon, and child protection.

UNICEF RESPONSE AND FUNDING STATUS*



* UNICEF response % is only for the indicator, the funding status is for the entire sector.

SITUATION IN NUMBERS



1,061,968
Children in need of humanitarian assistance¹



2,990,000
People in need of humanitarian assistance²

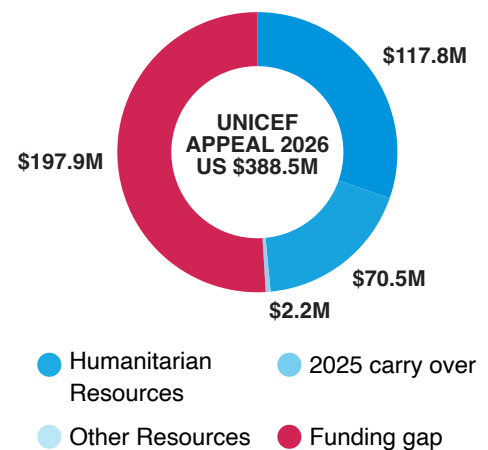


241
Children killed in the conflict since 2 March 2026³



308,000
Children displaced by the conflict⁴

FUNDING STATUS (IN US\$)**



** Funding available includes: funds received in the current year; carry-over from the previous year; and repurposed funds with agreement from donors

FUNDING OVERVIEW AND PARTNERSHIPS

UNICEF's revised 2026 Humanitarian Action for Children (HAC) appeal for Lebanon requires US\$388.5 million to deliver lifesaving and life-sustaining assistance to 2 million people, including 700,000 children, aligned with the LRP 2026 and the Flash Appeal.⁵ As of reporting, the appeal is 49 per cent funded, leaving a US\$197.9 million gap at a time of intensifying needs.

The revised inter-agency Flash Appeal, extended to end August 2026, underscores that needs are not receding.⁶ Children in Lebanon are navigating complex and overlapping crises, including multiple displacements, disrupted access to health, education, and social protection supports, and the psychological toll of the conflict. UNICEF and partners have continued to operate under volatile conditions to provide emergency assistance while strengthening systems across sectors. The investments made in Lebanon's health, nutrition, education, WASH, and protection systems represent opportunities to ensure children and their families have access to the critical services and systems they need to survive and thrive.

Interruptions to these programmes risk reversing critical gains, with the most vulnerable children often disproportionately impacted. These risks are salient when looking at the programmes most at risk – the Palestinian Programme in Lebanon faces an 85 per cent funding gap, social protection 86 per cent, adolescents and youth program 67 per cent, and child protection 59 per cent. Delays in funding will significantly constrain response capacity and increase risks for children across sectors.

UNICEF expresses its sincere appreciation to all partners who have contributed to supporting us to date — including the European Commission and the Governments of Australia, France, Germany, Monaco, the Netherlands, the Republic of Korea, Switzerland, Canada, the United States and United Kingdom; additional contributions have been received from the UNICEF National Committees for Australia, Germany, Japan, Canada, Liechtenstein and Switzerland, the United States Fund for UNICEF, the OCHA Central Emergency Response Fund (CERF), IOM, ESCWA and through UNICEF global Thematic Funds — and calls on donors to support UNICEF and partners in closing the remaining gap and ensuring that all children in Lebanon are supported during and following the current crises.

SITUATION OVERVIEW AND HUMANITARIAN NEEDS

Since the renewal of hostilities on 2 March 2026, Lebanon has faced a severe and deteriorating humanitarian crisis, with needs increasing and severity deepening. Throughout May 2026, the security situation remained unstable, with continuous Israeli military operations concentrated in the South and Nabatieh and periodic strikes affecting areas near Beirut.⁷ Despite ceasefire extension announcements in April and May, airstrikes, displacement orders, civilian casualties, and infrastructure damage have continued. Between 2 March and 31 May, the Ministry of Public Health (MoPH) reported more than 3,400 people killed and more than 10,200 injured. Children accounted for 9 per cent of total casualties, with 241 children and 936 injured.⁸

As of May 2026, close to one million people remained internally displaced, however following the latest ceasefire announcements, these numbers have significantly dropped.^{9 10} Over 135,000 people are hosted across 636 collective shelters operating at or beyond capacity, while the majority live outside shelters with host families, in

rented accommodation, or in informal and precarious conditions. Between 29 May and 1 June alone, 10 new displacement orders affected at least 34 localities, and threats of major airstrikes forced an estimated 50,000 families from Beirut's southern suburbs, alongside 30,000 families from the South and 4,000 from Nabatieh.¹¹ Displacement remains concentrated in Beirut, Mount Lebanon, South Lebanon, and North Lebanon, with communities in the South and El Nabatieh facing compounding safety and protection risks and restricted access to essential services and humanitarian assistance.¹²

Emergency Rapid Needs Assessments (ERNA) conducted between April and May 2026 highlight the severe and multilayered impacts of the conflict on children and families.¹³ Outside shelters, displaced families survive on food assistance, depleted savings, and support from others, with cash for rent and temporary cash assistance identified as high-priority needs. Inside shelters, physical conditions further compound these pressures. Overcrowding, and absence of functioning communal kitchen and safe spaces were reported across many sites. Food insecurity remains acute, consistent with IPC projections that nearly one in four people analyzed faced crisis or emergency levels of acute food insecurity between April and August 2026.¹⁴ Psychosocial distress and trauma pose significant risk protections for displaced children, followed by school dropouts and lack of access to education.

Infrastructure for basic social services have continued to be affected, eroding emergency response capacities. In May 2026, attacks on health care have continued, with 191 incidents recorded between 2 March and 2 June resulting in 128 deaths and 371 injuries among health workers and patients, 17 hospitals damaged, three fully non-operational, and 42 primary health care centres closed.¹⁵ Preliminary Rapid Health Assessment findings from 15 of 26 districts indicate that 60 to 80 per cent of households cannot afford health services, with non-communicable diseases, mental health conditions, and sexual and reproductive health needs rising.¹⁶

Learning disruption has been severe across all displacement settings. Approximately 447 schools and technical institutes, of which 329 are public schools, continue to be used as shelters. School closures, insecurity, and lack of access to devices and internet have been the primary drivers of education disruption. Financial strain heavily compounds these barriers, as many families can no longer afford to send their children to school, raising concerns about long-term dropouts and exclusion.

Overcrowded shelters and hosting environments, and the erosion of safe spaces and community support systems have affected protective environments and increased exposure to gender-based violence and neglect, compounding pre-existing child protection vulnerabilities. An estimated 770,000 children are experiencing heightened distress due to repeated exposure to violence, displacement, and loss. As the school year ends and summer begins, sustained and scaled-up support to boys and girls will be particularly critical, including through outreach beyond collective shelters where most displaced people now reside. The fragile ceasefire has prompted some families to begin returning to conflict-affected areas, raising additional concerns about exposure to explosive remnants of war. Focused engagement with child protection sector partners has highlighted that identification of the most vulnerable children outside shelters relies heavily on collaboration with municipalities and community-level networks established prior to the escalation, underscoring the importance of locally anchored response approaches.

Water and sanitation infrastructure is severely strained, with increased pressure on water networks and reliance on water trucking. Around 700,000 displaced people are concentrated in just

five districts already supporting approximately 1.4 million Lebanese residents and existing refugee populations, placing major strain on overstretched infrastructure at a time of rising operational costs and continued risk of infrastructure damage.¹⁷ Across the South and Nabatieh, water sources remain unavailable or insufficient in several operational areas, and with summer approaching, risks of heat exhaustion and disease outbreaks are rising.

Non-Lebanese populations, including Syrians and migrants, represent a significant share of those affected and face additional structural barriers to services, shelters, and documentation. Between March and the end of May 2026, over 44,000 Syrians crossed from Lebanon into Syria.¹⁸ However, among the remaining Syrian refugee population in Lebanon, the overall intention to return within the next 12 months remains low.¹⁹ Return decision-making is currently driven predominantly by barriers inside Syria, such as the lack of available housing, high cost of living, and poor livelihood opportunities, with 92 per cent of surveyed refugees indicating that ongoing hostilities in Lebanon have little to no impact on their plans.²⁰

SUMMARY ANALYSIS OF PROGRAMME RESPONSE

Health (including public health in emergencies)

UNICEF has continued to support the delivery of essential health services to women and children across Lebanon's public health system, spanning primary healthcare centres (PHCCs), community-based platforms, and public hospitals, while advancing systems strengthening efforts to sustain an enabling environment for improved health outcomes. This included working closely with the MoPH to preserve the functionality of the primary healthcare system amid active hostilities, and ensuring uninterrupted access to life-saving services, including immunization, through both fixed facilities and outreach modalities. PHCCs remained the first line of response, reinforced through the activation and scale-up of Primary Healthcare Satellite Units (PSUs) and the expanded role of AaSalameh-supported centres. Between January and May 2026, 936,954 children and women were reached through UNICEF-supported primary healthcare facilities, 48,100 children were vaccinated against vaccine-preventable diseases including measles, and 616 newborns and children received intensive healthcare services through UNICEF-supported hospitals.

In May 2026, 61 UNICEF-supported PSUs were operational across the country, providing essential health services including consultations, basic treatment, and referrals to 19,391 women and children in shelters, host communities, and hard-to-reach areas. Immunization remained fully integrated into the emergency health response to mitigate the heightened risk of outbreaks associated with displacement and overcrowding, with 31,755 children vaccinated against vaccine-preventable diseases, including 9,239 reached with measles vaccination. To sustain emergency preparedness and service continuity, UNICEF delivered more than one ton of essential medical supplies and trauma kits including medications and critical consumables to governmental hospitals in Tebnin and Jabal Amel through supported convoys. UNICEF continued to prioritize community-based care as a critical lifeline for vulnerable populations. Through the AaSalameh programme, 7,379 children received home-based services and follow-up, including 2,231 pregnant women who received antenatal care and 1,318 newborns visited within 7 to 60 days of delivery, facilitating early detection of risks and timely referrals. At the hospital level, UNICEF supported access to critical care services for vulnerable children by

covering co-payments and service gaps. 176 children, including both Lebanese and Syrian patients, received neonatal and pediatric intensive care services across 11 public hospitals, ensuring access to life-saving treatment. Of these, 115 were Lebanese children. Additionally, through the Assistance and Care for War-Wounded and Affected Children programme (ACWA), 61 children remained under active follow-up for surgical care and rehabilitation, two children were supported with prosthetic and assistive devices, and 111 children and caregivers received mental health and psychosocial support services, including through remote modalities where access remained constrained.

Rapid Response Mechanism

Through the Rapid Response Mechanism (RRM), UNICEF has continued to deliver essential non-food items to internally displaced persons, people on the move, and populations in hard-to-reach areas across Lebanon. Despite a volatile operating environment and persistent access constraints, UNICEF adapted its delivery modalities through a combination of convoys, prepositioning, and joint operations with WFP and the Logistics Cluster to sustain life-saving assistance and maintain a continuous, child-centred response. Between January and May 2026, UNICEF, through the RRM, reached 284,290 IDPs across more than 378 shelters, including people on the move, populations in hard-to-reach areas, and post-December 2024 new arrivals, with essential non-food items. The second and third rounds of RRM distributions for IDPs in collective shelters reached approximately 83,935 people.

In May 2026, 40,495 IDPs and affected people were reached with life-saving assistance, including 73,175 bottles of water (1.5L each), 8,099 family hygiene kits, 10,320 baby kits, 10,320 dignity kits, 222 packs of adult diapers and sanitary pads, and 85 boxes of high-energy biscuits for children aged six months and above, as well as pregnant women. UNICEF convoys supported approximately 500 families in the Tyre Union of Municipalities, while joint WFP-UNICEF-Logistics Cluster convoys reached seven villages in the Arkoub area as well as the frontline villages of Chebaa and Fardis, delivering essential supplies to approximately 400 families in communities intermittently cut off due to insecurity and damaged infrastructure. Nine UNICEF convoys also reached the Rashidye, Burj El Chemali, and Al Bus Palestinian camps near the frontline in Naqoura, where displaced Palestinian, Lebanese, and Syrian families from southern Lebanon have sought refuge, delivering essential hygiene supplies to approximately 5,000 families.

Water, sanitation and hygiene

UNICEF has continued to sustain and expand WASH service delivery across Lebanon, covering water supply, wastewater management, and emergency hygiene response for displaced populations in collective shelters, informal tented settlements, and hard-to-reach communities. Across all settings, UNICEF's approach has prioritised system-level interventions to maintain functionality of public water and sanitation infrastructure alongside direct service delivery to the most vulnerable populations, including through child-focused, gender-responsive, and disability-inclusive modalities. Between January and May 2026, 1,700,000 people had access to sufficient quantity and quality of water for drinking and domestic needs through UNICEF-supported efforts, and 1,093,550 people were served by functioning wastewater treatment plants.

In May 2026, UNICEF carried out more than 29 repair and maintenance interventions at the water station level, ensuring continuity of supply for over 167,000 individuals including 32,000 IDPs. This was complemented by the delivery of 14,325 litres of diesel to nine water stations across Bekaa and Beirut Mount Lebanon Water establishment, benefiting more than 50,000 people. On sanitation, UNICEF supported more than five repair and

maintenance interventions and two supply provisions across three wastewater treatment plants and two pumping stations, benefiting 110,000 individuals. More than 91,000 litres of diesel were delivered to six wastewater treatment plants and 13 pumping stations in Bekaa, Baalbek, and the North, reaching more than 124,000 people including 31,000 IDPs. In informal tented settlements (ITSs), UNICEF sustained essential WASH service delivery for 62,000 displaced Syrian populations through 3,416 cubic meters of trucked water and 1,900 cubic meters of desludging to maintain safe sanitation conditions. Across 129 collective shelters nationwide, UNICEF and partners also continued to deliver child-focused, gender-responsive, and disability-inclusive emergency WASH assistance. 30,557 IDPs were reached through these efforts, which included the rehabilitation of 30 internal showers and 10 internal latrines, the installation of 60 external prefab showers and 101 external prefab latrines, the provision of 20,520 cubic metres of water through trucking, 227 cubic metres of desludging, and the distribution of 66 cleaning kits, with a minimum of 10 per cent of facilities operating in a disability-inclusive manner.

Nutrition

UNICEF has strengthened emergency nutrition programming across Lebanon in close collaboration with the Government of Lebanon and the nutrition sector, integrating essential nutrition and early childhood development interventions across PHCCs, PSUs, and nutrition and education partners to reach the most vulnerable groups, including pregnant and breastfeeding women, infants, young children, and adolescent girls. Between January and May 2026, 69,559 children aged 6 to 59 months were screened for wasting, 10,771 children aged 6 to 23 months were reached with micronutrient powder, small quantity lipid-based nutrient supplements, or ready-to-use complementary foods, and 9,532 caregivers of children aged 0 to 23 months were reached with infant and young child feeding counselling. Since January, 976 frontline workers have been trained on emergency nutrition supplies, prevention and management of wasting, infant and young child feeding in emergencies, early childhood development, and nutrition for school-aged children. Additionally, 48,024 caregivers have been reached with nutrition and early childhood development counselling and awareness, with 11,288 children and adolescents reached through nutrition education and awareness activities.

In May 2026, UNICEF supported 61 PSUs with capacitated nutritionists who delivered life-saving nutrition interventions across 170 shelters, with services maintained in communities to increase total coverage to over 615 shelters, including nine PSUs in high-risk areas across Nabatieh and Bekaa Baalbek-Hermel.²¹ Technical assistance, emergency nutrition supplies, and capacity building were extended to food security partners operating in 13 villages across South Lebanon and Nabatieh. A total of 4,223 children were screened for acute malnutrition, with 1,628 identified and referred for treatment and 312 admitted to treatment programmes. To prevent malnutrition, 3,301 children under two years received emergency food rations (SQ-LNS, complementary food) and micronutrient supplements, 8,551 children under five received fortified biscuits including 6,166 reached in collaboration with the municipality of Ghobeiry, and 6,886 pregnant and breastfeeding women and adolescent girls received micronutrient supplementation.

Also in May, 16,904 caregivers were reached with nutrition and early childhood development counselling and awareness, of whom 2,360 received specialised infant and young child feeding counselling, and 4,589 children and adolescents benefited from nutrition education and awareness activities. Outside shelters, identification and prioritization of populations in need was conducted through community outreach, nutrition screening, rapid nutrition assessments, hotline referrals, PSUs, and DRM structures,

particularly in hard-to-reach areas. To strengthen infant and young child feeding support, UNICEF expanded support to four additional Mother-Baby Corners and ECD corners, bringing the total to eight, providing safe, private, and supportive spaces for breastfeeding, early stimulation activities, and hygienic IYCF practices. In parallel, 2,000 breastfeeding covers were distributed, providing breastfeeding mothers with increased privacy and comfort while breastfeeding, particularly in overcrowded and emergency settings. To further support displaced families, UNICEF also developed a Baby nutrition and ECD kit promoting early stimulation and IYCF practices, with 5,000 kits currently in the pipeline. In collaboration with the Nutrition Sector and WFP, two national guidance notes and caregiver awareness materials were developed providing practical guidance on healthy diets for children and adolescents during emergencies, promoting healthier food choices among families receiving food assistance, and ensuring appropriate management of financial and in-kind contributions from the food and beverage industry. Additionally, UNICEF trained 153 frontline workers on emergency nutrition supplies and 61 on prevention and management of wasting.

Child Protection (CP) and Gender-Based Violence (GBV)

Prolonged displacement and insecurity continue to intensify child protection and GBV risks, including violence, abuse, exploitation, child labour, family separation, and psychosocial distress, driving families toward harmful coping mechanisms such as increased violence in the home, street-connectedness, and child labour. In response, UNICEF and partners have continued to scale up outreach and service delivery, with a focus on reaching vulnerable children and women beyond collective shelters. Collaboration with municipalities and community-level networks established prior to the escalation has been critical for identifying the most vulnerable children outside formal settings. With the school year concluding and family movements toward conflict-affected areas increasing, UNICEF is scaling up both psychosocial support and explosive ordnance risk education to respond to emerging protection needs during the summer period. Between January and May 2026, 28,108 children, adolescents and caregivers were reached with community-based mental health and psychosocial support, 10,568 women, girls and boys were reached with gender-based violence risk mitigation, prevention and/or response interventions, and 92,932 with explosive ordnance risks education.

In May 2026, UNICEF-supported mental health and psychosocial support services reached 6,921 children and caregivers through community-based psychosocial support sessions delivered in collective shelters, community settings, and detention facilities, providing structured group support, safe spaces, and coping activities to address distress and strengthen resilience. In underserved and hard-to-reach areas, particularly in the South, UNICEF distributed 500 individual psychosocial support kits, enabling an estimated 1,650 children, adolescents, and caregivers to engage in guided wellbeing and stress-management activities at the household level, bridging service gaps where in-person support remained limited. In parallel, 4,068 individuals were reached with key psychosocial and child protection messages through face-to-face outreach and digital channels, strengthening awareness on coping strategies, positive caregiving, and safe identification and referral pathways. Case management support was provided to 66 children affected by violence-related risks or survivors of violence, and three unaccompanied and separated children were identified and successfully reunified with their families. Explosive ordnance risk education interventions reached 5,783 individuals, with plans to scale up in response to increasing family movements toward conflict-affected areas. In response to findings from GBV sector

safety audits identifying risks facing women and girls inside and outside collective shelters, UNICEF GBV partners reached 4,547 women and girls through awareness-raising efforts and information-sharing on GBV risk mitigation and protection from sexual exploitation and abuse, with POWER4Girls emergency sessions remaining a key entry point to reach adolescent girls with life-saving information on protection from violence, online safety, menstrual hygiene management, and coping with stress.

Education

Since the start of the emergency, UNICEF has sustained access to education for children and youth across Lebanon, maintaining continuity of learning across formal, non-formal, and remote modalities despite widespread school closures and displacement. Following the emergency, 45 Dirasa schools and 45 Makani centres remain operational, with 44,920 children, 5 per cent of whom have disabilities, accessing integrated education services across 114 temporary learning spaces, including Makani centres, Social Development Centres, Dirasa schools, and 18 newly established guest schools.²² Based on outreach and referral from nearby shelters and communities, 1,450 internally displaced children are currently participating in Makani activities. Support for children with disabilities is integrated across all shelter-based activities through assistive devices, therapy, and referrals, with 698 children with disabilities and 571 persons with disabilities identified to date. Between January and May 2026, 348,628 students from kindergarten to grade 12 enrolled in public schools were supported by UNICEF, 55,910 students in formal education benefited from retention support or complementary services, and 43,028 out-of-school children and youth accessed non-formal education or catch-up programmes.

In May 2026, an increasing number of schools in safe areas resumed in-person learning, while several schools previously reported as closed reopened through online modalities. The end-of-year memorandum was issued confirming the conclusion of the academic year, with AM shift schools scheduled to close on 4 June and PM shift schools on 11 June. PM shift teachers received payments covering February and March with the second batch of School Fund payments successfully finalised. The UNICEF Call and Learn hotline, deployed to support learning during the current emergency, provided academic support to 18,386 children through 43,003 calls in May, including 56 percent girls, 61 percent Lebanese, and 39 percent non-Lebanese children. Together, the hotline has reached more than 31,000 children since the start of the emergency. The majority of beneficiary children are in cycles 1 and 2 (67 percent), while 33 percent are in cycle 3 and 4. UNICEF also supported the printing and distribution of CERD-developed Education Learning Packs (ELPs), aligned to the national curriculum, reaching over 28,251 crisis-affected children across shelters, temporary learning spaces, and hard-to-reach areas. A total of 8,592 children (41 per cent girls and 59 per cent boys) with special needs are being supported across 180 inclusive schools, with 110 schools operating in person (4,967 learners) and 70 schools online (3,625 learners). Referrals to Mouvement Social remain the primary pathway for accessing therapy services and assistive devices, with over 1,000 referrals tracked to date. UNICEF further supported the Ministry of Education and Higher Education (MEHE) in strengthening its Student Information Management System (SIMS) and digital learning platforms, notably in the development of the non-formal education data system and its linkage to SIMS. By May 2026, a first draft of the data system was developed and presented to the MEHE for review and comments.

Social protection

Following the activation of emergency financial support in March

2026 through a shock-responsive expansion of the National Disability Allowance (NDA), UNICEF, the Ministry of Social Affairs, and ILO have continued scaling up assistance to conflict-affected families with persons with disabilities, eligible²³ children and youth, and those over 65 years of age. Since January, 54,534 people have been reached with humanitarian multipurpose cash assistance under the NDA emergency expansion, and 39,902 people with disabilities have received cash assistance under the regular NDA programme.

In May 2026, 37,801 persons with disabilities redeemed the NDA payments, 85 per cent of whom were Lebanese and 15 per cent percent non-Lebanese. A third phase of the emergency response was implemented, reaching an additional 1,453 families (approximately 6,030 individuals) with a one-off US\$100 cash grant. This phase expanded eligibility to include households with young persons aged 27 years living with disabilities, building on the initial prioritization of children and adolescents thus reaching a total of 12,916 families (approximately 58,000 individuals), of whom 20,000 were children. This scale-up was enabled by established NDA delivery systems and registries, allowing for rapid identification and enrolment of eligible households despite ongoing displacement and access constraints. The intervention continues to form part of a phased approach to reach up to 45,000 families (157,500 individuals), while complementing broader government-led shock responsive social protection efforts.

Youth and Adolescent Development

Under the Youth and Adolescent Development programme, between January and May 2026, 7,216 adolescents and youth were enrolled in formal and non-formal technical and vocational training including entrepreneurship and digital skills, 2,839 young people were engaged through employment support services and income generation interventions, and 4,164 adolescents and youth were engaged through volunteering, civic engagement, and psychosocial support. Despite the escalation of hostilities in March 2026, UNICEF continued to advance its Youth and Adolescent Development response, reinforcing emergency learning continuity, vocational training, and youth-led service delivery. Youth played a direct and substantial role in the humanitarian response, with 997 youth involved in work-based learning and income-generation activities producing and distributing 42,577 essential relief items including sleeping bags, blankets, and seasonal clothing kits, and producing over 770,020 hot meals and more than 130,206 cold meals in coordination with WFP across shelter kitchens, bringing the cumulative total of food and non-food items produced by youth for emergency relief support to 942,803. Complementing these efforts, 71 trained youth facilitators delivered psychosocial support and structured activities, reaching over 833 children and adolescents across multiple shelters and distributing adolescent kits to support wellbeing and protection. On learning continuity, 72 public TVET schools had progressively resumed in-person learning in safer areas by May, while 55 schools that were either closed or repurposed as shelters transitioned to online learning delivered by TVET teachers. Five temporary TVET learning hubs were established in Mount Lebanon hosting approximately 10,000 internally displaced persons, and 250 TVET modules were digitized and uploaded to the Madristi and Learning Passport platforms, with further modules under development to meet growing demand.

Throughout May 2026, UNICEF continued to implement its Learning-to-Earning programme across Lebanon, maintaining continuity of learning, skills development, and economic engagement opportunities for young people despite an increasingly volatile context. A total of 133 youth were reached through youth basic literacy and numeracy programmes and 750 through functional skills and competency-based training, while 430 transitioned to

work-based learning and cash for work. The Generation of Innovation Leaders initiative equipped 45 youth with entrepreneurship and business development skills and supported the establishment and funding of five youth-led startups, and 128 youth were trained in digital skills and referred to employment opportunities.

Palestinian Programme

UNICEF's Palestinian Programme has continued to sustain essential services for Palestinian children, adolescents, and caregivers across UNRWA shelters, Palestinian camps, and gatherings, maintaining an integrated multisectoral response in the context of repeated and complex displacement. Between January and May 2026, 13,076 girls and boys were engaged in community-based child protection activities, 7,000 girls and boys enrolled in early childhood education interventions, and 23,568 children, adolescents, and caregivers accessed community-based mental health and psychosocial support.

In May 2026, UNICEF continued to strengthen the quality of essential services for over 6,000 IDPs across UNRWA shelters and host communities. Integrated multisectoral services, including Makani programming, were delivered through operational centers, reaching 5,518 children with combined education, child protection, health, and nutrition support, while enabling early identification and referral of vulnerable cases. Health and nutrition awareness sessions reached an additional 6,485 children, adolescents, and women, supporting improved hygiene practices and health behaviors in emergency conditions. Education support reached 1,800 children following learning assessments, with children grouped by academic level to enable targeted support. Retention learning programmes are ongoing for 600 children aged 6-14 years, focusing on foundational skills and learning recovery. In parallel, early childhood education is provided to 1,200 children aged 3-5 years through play-based and psychomotor approaches, supporting cognitive and social development. Child protection and psychosocial support remained central to the response. A total of 3,621 children accessed community-based psychosocial support, providing safe spaces for expression and emotional relief. In parallel, 60 children received case management and specialized services. Preventive and awareness-raising activities reached 5,016 individuals through child protection and justice for children's sessions, promoting positive coping strategies. Adolescent and youth engagement contributed to resilience and social cohesion. A total of 494 adolescents participated in life skills and healthy lifestyle sessions, 427 benefited from non-formal skills training, and 242 youth actively engaged in community-led initiatives, including supporting learning and recreational activities for affected children. Additionally, 227 adolescent girls participated in POWER4Girls emergency transformative life skills sessions. A total of 7,846 individuals were reached through awareness-raising activities on safe and accountable access to services, including 4,352 individuals reached through PSEA sessions and 3,494 individuals reached through AAP sessions, providing information on available services and feedback and complaint mechanisms.

Accountability to Affected Populations, Prevention of Sexual Exploitation and Abuse, Gender, and Disability Inclusion

Social media listening and field reports from UNICEF staff and partners continued to reveal worsening humanitarian needs driven by insecurity, rising food insecurity, and increasing pressure on households, with essential services remaining strained across health, WASH, and education. Field and online data also revealed heightened public concern and social tensions, fueled by attacks on

civilian infrastructure, economic hardship, sectarian polarisation, and dissatisfaction with assistance levels, underscoring the importance of sustained community engagement, accessible feedback mechanisms, and accountable service delivery.

In May 2026, UNICEF-supported hotlines responded to 8,293 callers. Of these, 6,126 were Lebanese nationals, 1,596 were Syrian refugees, and 571 were Palestinian refugees from Lebanon and Syria or refugees of other nationalities. The highest number of calls originated from Mount Lebanon (2,027 calls), followed by the South (1,430 calls) and lowest number calls came from Nabatieh (692 calls) and Akkar (720 calls). Analysis of hotline data indicated that an increasing demand for cash assistance has been reported through UNICEF-supported hotlines. Received calls and callers also revealed shortage of shelter in Beirut/ Mount Lebanon remains a major concern, as well as concerns/complaints about limited services for PWDs were reported and operational challenges to navigate referral pathways for the most vulnerable groups. Approximately 109,188 individuals were reached with information on and had access to safe, confidential, and trusted channels for reporting SEA and other serious safeguarding concerns. For instance, the national IYCF hotline received 223 calls in May, of which 199 were referred to specialized support, bringing the cumulative totals to 860 calls and 598 referrals since January. To ensure awareness of the available support from the hotline and strengthen community engagement, UNICEF also developed and disseminated an IYCF Chatbot link, with 400 participants engaged by the end of May. Additionally, to ensure better protection for children in their early years, UNICEF, in partnership with the Ministry of Public Health and Save the Children, initiated a series of 15 workshops with 400 daycare centres to introduce the Child Safeguarding Policy and its requirements for early childhood settings, following its launch in 2025. Notably, the Ministry of Public Health emphasized during these workshops that compliance with the Child Safeguarding Policy is a mandatory requirement for the renewal of Ministry accreditation, marking an important milestone in institutionalising child safeguarding standards across early years services.

Social and Behavioral Change (SBC), Risk Communication, Community and Digital Engagement

UNICEF has continued to sustain efforts to promote social and behavioural change, risk communication, and community engagement across Lebanon, reaching communities through participatory approaches, digital platforms, and capacity strengthening of frontline actors. Since January 2026, 23,131 people have participated in engagement activities for social and behavioural change, and 3,728 U-Reporters have engaged with UNICEF's chatbot for emergency-related information, with more than half seeking information on available services and hotlines, followed by child protection issues and public messages on shelters, children with disabilities, and sexual exploitation and abuse reporting channels.

In May 2026, capacity-strengthening efforts reached 108 frontline actors and community representatives, enhancing their ability to promote positive social and behavioural change across child protection, health, and inclusion programming. This included 44 participants, primarily child protection partners and Ministry of Social Affairs representatives, who were trained to engage religious leaders as allies in preventing child marriage, child labour, and violence against women and children; 23 Lebanese Red Cross volunteers trained on HPV and risk communication and community engagement skills; and 41 community mobilisers, including six persons with disabilities, who strengthened their capacity to foster

participation and inclusive community engagement, contributing to efforts to reduce stigma and discrimination against persons with disabilities. UNICEF interventions continued to contribute to deeper community engagement. A total of 16,365 people (6,966 males and 9,399 females) were engaged through participatory approaches such as community dialogues, edutainment activities, games and drawing, interactive theatre and storytelling. These interventions targeted caregivers, children, adolescents, people with disabilities, displaced families, host communities, volunteers, and local representatives, and focused on key health and protective practices, including immunization, hygiene, psychosocial wellbeing, social cohesion, prevention of sexual exploitation and abuse, and reporting mechanisms. For instance, thirty-three clown show performances were delivered in shelters and host communities focusing on hygiene and healthy behaviours, reaching 2764 people, including 841 girls and 846 boys. In parallel, inclusive community-based initiatives promoted disability inclusion, empathy, diversity, and equal rights, contributing to efforts to reduce stigma and discrimination against persons with disabilities.

Through multiple feedback channels, a total of 2,229 (964 males and 1,265 females) shared concerns, asked questions, or sought clarification on available support services. The most commonly reported need was financial assistance and psychosocial support. Analysis of the feedback also indicated overall support for routine immunization and positive health-seeking behaviours, alongside a decline in vaccine-related rumours and misconceptions. Feedback additionally highlighted the influential role of fathers in family health and vaccination decisions, underscoring the need for targeted male engagement strategies. Additionally, a total of 154,600 people were reached through UNICEF social media with information relevant to mental health, assistance & care for war-wounded and affected Children (ACWA), other protective messages, as well as UNICEF programmatic related information for the emergency response (ECD, cash programme and youth's Learning to Earning). These publications generated over 300,000 digital engagements.

HUMANITARIAN LEADERSHIP, COORDINATION AND STRATEGY

The 2026 LRP has shifted to a more prioritized and streamlined approach, reflecting reduced funding and a focus on efficiency and transition. Planning for 2026 was guided by the Humanitarian Reset, aimed at simplifying coordination structures, improving implementation efficiency, and aligning the response with available resources. As part of this shift, the sector structure was reduced from 11 to nine sectors: Health; Protection (including Child Protection and GBV); WASH; Education; Social Stability; Livelihoods; Shelter; Nutrition; and Basic Assistance/Multi-Purpose Cash.

Coordination is increasingly centred at the national level, with a gradual reduction of sub-national structures and the introduction of Operational Coordination Groups (OCGs) to support more targeted, area-based coordination. Within the humanitarian coordination architecture under the joint Government of Lebanon–United Nations Steering Committee, UNICEF continues to lead the WASH, Education, and Nutrition sectors, as well as the Child Protection Area of Responsibility. UNICEF also actively participates in the Health, Basic Assistance, Livelihoods, and broader Protection sectors, including working groups on GBV, gender, and humanitarian access.

In response to the current crisis, additional coordination mechanisms have been activated, including the Logistics and Emergency Telecommunications Clusters, as well as the Site Management Sub-Cluster under Shelter. The AAP and Gender in Humanitarian Action working groups are also operational.

Emergency response coordination is overseen by the Inter-Sector Coordination Group (ISCG).

In 2026, UNICEF supported the establishment of the Community Engagement and Communication Sub-Working Group under the AAP Working Group. The new sub-working group will aim to harmonize multi-sector, evidence-based messaging and strengthen partners' capacities in community engagement, data and feedback collection. This will further strengthen our accountability to affected populations.

UNICEF co-leads the national Assessment and Analysis Working Group (AAWG) with IOM. Under the AAWG the Emergency Rapid Needs Assessments in and out of shelter have been conducted, with the results due to be released in late May to contribute to the development of the updated inter-agency Flash Appeal revision.

In collaboration with the Disaster Risk Management Unit and the Lebanese Red Cross, UNICEF supports emergency preparedness and response planning across all governorates. UNICEF also contributes to the inter-agency response on returns, participating in the Durable Solutions Working Group and Technical Group, and supporting the implementation of the inter-agency returns action plan. This includes child protection case management, the provision of WASH services at staging areas, support to pre-departure health screenings and vaccinations, and advocacy for the recognition of educational certification for Syrian children.

HUMAN INTEREST STORIES AND EXTERNAL MEDIA

During May, communication efforts focused on highlighting the impact of the conflict on children, particularly mental health and psychosocial wellbeing. Advocacy messaging emphasized that an [estimated 770,000 children are experiencing heightened distress](#) due to repeated exposure to violence, displacement, and loss. UNICEF also leveraged global advocacy opportunities, including [Palais briefings](#), to sustain international attention on the [situation of children in Lebanon](#).

[Human-interest stories](#) and [multimedia content](#) continued to highlight the impact of the crisis on children's access to services. At the same time, programme-related information was disseminated to support families with [guidance on children's anxiety and distress](#), as well as [routine immunization services](#), [access to water](#) and [cash assistance](#).

These efforts generated over 600 media mentions and reached more than a million people across social media platforms.

HAC APPEALS AND SITREPS

- All Humanitarian Action for Children Appeals <https://www.unicef.org/appeals>
- All Situation Reports <https://www.unicef.org/appeals/situation-reports>

NEXT SITREP: JUNE 2026

ANNEX A - PROGRAMME RESULTS

Consolidated Programme Results

Sector			UNICEF and IPs response			Cluster/Sector response		
Indicator	Disaggregation	Total needs	2026 targets	Total results	Progress*	2026 targets	Total results	Progress*
Health (including public health emergencies)								
Children vaccinated against measles, Supplemental dose	Total	-	118,000	48,100	▲ 9%	-	-	-
Children and women accessing primary health care in UNICEF-supported facilities	Total	-	500,000	936,954 ²⁴	▲ 15%	-	-	-
Newborns and children receiving intensive healthcare services at UNICEF supported hospitals	Total	-	350	616	▲ 50%	-	-	-
Nutrition								
Number of children 6-59 months screened for wasting	Total	-	320,600	69,559	▲ 1%	320,622	69,559	▲ 1%
Number of caregivers of children 0-23 months receive infant and young child feeding counselling	Total	-	50,500	9,532	▲ 5%	90,967	15,887	▲ 4%
Number of children 6-23 months receiving micronutrient powder, small quantity lipid-based nutrient supplements, or ready-to-use complementary foods	Total	-	107,000	10,771	▲ 3%	107,753	10,771	▲ 3%
Child protection, GBViE and PSEA								
Children, adolescents and caregivers accessing community-based mental health and psychosocial support	Total	-	137,625 ²⁵	28,108	▲ 5%	340,000	88,213	-0%
Women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions	Total	-	57,000	10,568	▲ 8%	300,000	138,032	▲ 28%
Individuals reached with Explosive Ordnance Risks Education	Total	-	87,000	92,932 ²⁶	▲ 7%	87,000	92,932	▲ 7%
Education								
Out of school children and youth access non-formal education or catch-up programmes	Total	-	50,000	29,848	0%	145,711	43,028	0%
#Students in formal education benefitting from retention support or complementary services	Total	-	60,000	42,000	0%	65,900	55,910	0%
#Students (from KG to grade 12) enrolled in public schools and supported by UNICEF	Total	-	321,000	348,628 ²⁷	▼ -12%	403,048	348,628	▼ -9%
Water, sanitation and hygiene								
People accessing a sufficient quantity and quality of water for drinking and domestic needs	Total	-	2 million	1.7 million	0%	2.8 million	1.7 million	0%

Sector			UNICEF and IPs response			Cluster/Sector response		
Indicator	Disaggregation	Total needs	2026 targets	Total results	Progress*	2026 targets	Total results	Progress*
Number of people assisted with temporary access to adequate quantity of safe water for drinking and water for domestic use (meeting sector standards) ²⁸	Total	-	179,000	107,866	▲ 9%	200,000	241,466	▲ 73%
People assisted with temporary appropriate sanitation services (ITS + IDP) ²⁹	Total	-	179,000	127,753	▲ 19%	200,000	171,758	▲ 31%
People served by functioning wastewater treatment plants	Total	-	1.3 million	1.1 million	▲ 13%	1.5 million	1.2 million	0%
Social protection								
People reached in households receiving humanitarian multipurpose cash assistance	Total	-	157,500	54,534	▲ 4%	-	-	-
People with disabilities receiving cash assistance	Total	-	100,000	39,902	0%	-	-	-
Cross-sectoral (HCT, C4D, RCCE and AAP)								
People participating in engagement actions for social and behavioural change	Total	-	50,000	23,131	▲ 33%	-	-	-
People with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations	Total	-	300,000	109,188	▲ 9%	-	-	-
Rapid Response Mechanism								
People reached with multi-sector essential supplies including for winterization	Total	-	300,000	284,290	▲ 3%	-	-	-
People reached with rapid response winterization supplies	Total	-	40,000	28,710	▲ 1%	-	-	-
Adolescents & Youth								
Adolescents and youth enrolled in formal and non-formal technical vocational training (including entrepreneurship and digital skills) ³⁰	Total	-	10,000	7,216	▲ 72%	-	-	-
Number of young people engaged through employment support services and income generation interventions ³¹	Total	-	11,000	2,839	▲ 3%	-	-	-
Number of adolescent and youth engaged and reached through volunteering, civic engagement and PSS support ³²	Total	-	10,000	4,164	▲ 42%	-	-	-
Food and non-food items produced by youth for emergency relief support ³³	Total	-	150,000	942,803	▲ 629%	-	-	-
Palestinian Programme in Lebanon								
Palestinian girls and boys enrolled in early childhood education interventions	Total	-	7,000	7,000	▲ 26%	-	-	-

Sector			UNICEF and IPs response			Cluster/Sector response		
Indicator	Disaggregation	Total needs	2026 targets	Total results	Progress*	2026 targets	Total results	Progress*
Palestinian children, adolescents, and caregivers accessing community-based mental health and psychosocial support	Total	-	25,000 ³⁴	23,066	▲ 20%	-	-	-

*Progress in the reporting period May 2026

ANNEX B — FUNDING STATUS

Consolidated funding by sector

		Funding available			Funding gap	
Sector	Requirements	Humanitarian resources received in 2026	Other resources used in 2026	Resources available from 2025 (carry over) ³⁵	Funding gap (US\$)	Funding gap (%)
Health (including public health emergencies)	20,000,000	6,929,830	-	5,098,671	7,971,499	40%
Nutrition	6,500,000	3,080,620	-	1,987,580	1,431,800	22%
Education	130,000,000	59,965,631	610,000	31,314,520	38,109,849	29%
Water, sanitation and hygiene	100,000,000	26,588,783	-	20,369,631	53,041,586	53%
Social protection	55,900,000	7,228,913	-	574,553	48,096,534	86%
Cross-sectoral (AAP, SBC, and PSEA)	2,300,000	220,883	-	399,635	1,679,482	73%
Child protection and GBViE	21,176,000	5,009,099	-	3,653,590	12,513,311	59%
Rapid Response Mechanism	8,000,000	2,367,412	-	3,457,610	2,174,978	27%
Adolescents & Youth	28,000,000	5,159,583	1,581,490	2,379,828	18,879,099	67%
Being Allocated	-	90,802	-	-	-	-
Palestinian Programme in Lebanon	16,600,000	1,187,838	-	1,303,221	14,108,941	85%
Total	388,476,000	117,829,394	2,191,490	70,538,839	197,916,277	51%

Funding available - funding available in the current appeal year to respond in line with the current HAC appeal.
Humanitarian resources– humanitarian funding commitments received from donors in the current appeal year.
Other resources– non-humanitarian funding commitments received from donors and/or funding repurposed in the current appeal year
Resources available from 2025 (carry over)– funding received in the previous appeal year that is available to respond in line with the current HAC appeal

Who to contact for further information:

ENDNOTES

1. The People in Need and sector needs figures are from the Lebanon Response Plan (LRP) 2026. <https://lebanon.un.org/en/309523-lebanon-response-plan-2026>. The children in need figure is based on the number of children in need of child protection services according to the LRP 2026
2. The People in Need and sector needs figures are from the Lebanon Response Plan (LRP) 2026. <https://lebanon.un.org/en/309523-lebanon-response-plan-2026>.
3. Ministry of Public Health, 31 May 2026
4. IOM Displacement Tracking, children is based upon estimates from the LRP population package for 2026
5. UNICEF 2026 Revised Humanitarian Action for Children (HAC), 1 April 2026
6. Revised Flash Appeal, Lebanon, March - August 2026
7. WHO Lebanon Health Emergency Situation update #27, 11 June 2026
8. Lebanon Ministry of Public Health, 31 May 2026
9. Revised Flash Appeal, Lebanon, March – August 2026
10. As of the OCHA Flash Update on 29 June 2026, the total displaced IDPs are estimated at 704,445.
11. WHO Lebanon Health Emergency Situation update #27, 11 June 2026
12. Revised Flash Appeal, Lebanon, March – August 2026
13. Emergency Rapid Needs Assessment Outside Collective Shelters and Inside Collective Shelters, 2026
14. IPC Lebanon Acute Food Insecurity Projection Update for April - August 2026
15. WHO Lebanon Health Emergency Situation update #27, 11 June 2026
16. Revised Flash Appeal, Lebanon, March – August 2026
17. Revised Flash Appeal, Lebanon, March – August 2026
18. UN Durable Solutions Technical Working Group, June 2026
19. Regional eRPIS December 2025
20. RFM Interviews conducted by UNHCR
21. The number of supported shelters remains dynamic and fluctuating in line with the opening and closure of shelters according to the evolving situation.
22. Makani and Dirasa are core components of UNICEF's MFP programme with MEHE. Makani provides community based non formal education, psychosocial support, life skills, and referrals for vulnerable children and youth. Dirasa is a school based non formal education programme offering foundational literacy and numeracy and complementary services to help out of school children transition to formal education and support the retention of vulnerable in school children.
23. Children and youth aged 0-32 (born 1994-2026) and those over 65 (born 1961 and below) are currently eligible for the NDA.
24. The activation of emergency response service delivery modality through mobile clinic and PSUs increased reach enabled improved access to services for vulnerable displaced populations as well as host communities.
25. The target initially included beneficiaries reached through the Palestinian Programme for community-based mental health and psychosocial support. However, as the Palestinian Programme will report separately against this indicator, the target has been adjusted to avoid double counting and ensure accurate reporting.
26. The reach includes direct EORE beneficiaries (around 2,000 individuals), as well as indirect beneficiaries (around 90,000 individuals) benefitting from the distribution of EORE Materials.
27. Figures have been updated based on the latest MEHE enrollment data. A slight decrease reflects the impact of the emergency; however, most students enrolled in formal education were retained through online learning and emergency learning measures despite disruptions to access and participation.
28. Indicator definitions and targets were adjusted to include both IDPs and populations in informal tented settlements (ITS), reflecting the full scope of UNICEF-supported WASH emergency interventions and avoiding underreporting of beneficiaries reached.
29. Indicator definitions and targets were adjusted to include both IDPs and populations in informal tented settlements (ITS), reflecting the full scope of UNICEF-supported WASH emergency interventions and avoiding underreporting of beneficiaries reached.
30. The April SitRep retained the previous wording of this indicator. For the May SitRep, the indicator wording has been updated to align with the revised HAC. The changes are editorial only and do not affect the reported results.
31. This indicator was proposed as part of the HAC revision but was not carried forward into the final approved HAC. It is included here to reflect programme results under youth employment support services and income-generation interventions.
32. This indicator was proposed as part of the HAC revision but was not carried forward into the final approved HAC. It is included here to reflect programme results under youth employment support services and income-generation interventions.
33. This indicator was introduced in the revised HAC and was not reported in the April SitRep. The April SitRep instead reported the previous HAC indicator, "Adolescents and youth participating in skills building and empowerment programmes.
34. The target for this indicator was increased during the HAC revision to reflect the consolidation of the previous indicator, "Palestinian girls and boys engaged in community-based child protection activities," under the revised indicator, resulting in a broader scope of reporting.
35. This includes unutilized balances as well as open commitments.