



Situation Report #3

UNFPA Response to the Escalation of Hostilities in Lebanon



Photo: © UNFPA/Lebanon

Country:	Lebanon
Emergency type:	ConflictDisplacement
Start Date of Crisis:	Oct 8, 2023
Date Issued:	Nov 11, 2024
Covering Period:	Oct 16, 2024 to Oct 31, 2024
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Key Figures



875,180

Reported internally displaced people (IOM DTM)¹

1.2 million +

Total number of displaced people estimated by local authorities²



336,000

Women of reproductive age³



13,900

Estimated pregnant women³

1,550

expected to deliver in the next month³



3,290

Gender-based violence services provided



3,046

People reached with sexual and reproductive health services

¹ [Lebanon - Mobility Snapshot - Round 60](#)

² [Lebanon - Emergency Flash Update UNHCR](#)

³ Of the 1.2 million people in need

Situation Overview

- Since October 2023, escalating hostilities across Lebanon have resulted in over 3,100 deaths (20% women); more than 13,800 people have been injured. More than 2,000 people have been killed and almost 11,000 injured since September 2024.⁴
- On 20 October 2024, an airstrike destroyed a UNFPA-supported safe space for women and girls in the southern suburbs of Beirut. The facility provided services to, on average, 300 women every month, including survivors of gender-based violence (GBV). Due to the security situation, six UNFPA-supported primary health care centers (PHCCs) and five women and girls' safe spaces are no longer operational in different parts of the country.
- Continuous airstrikes across Lebanon have led to the destruction of critical infrastructure, including health care. As of 31 October,⁵ 108 health practitioners had been killed on duty and 60 health centers attacked. Around 100 PHCCs and dispensaries, as well as eight hospitals, have closed across the country.
- On 30 and 31 October, consecutive forced displacement orders for the entire city of Baalbek (Bekaa) drove new waves of displacement towards Zahle (Bekaa) and Akkar (North Lebanon). Similar orders were issued for Nabatieh, Tyre, Beirut, and, for the first time, the Palestinian 'Rashidieh' refugee camp in South Lebanon. Shortly after the orders, airstrikes targeted these locations.
- As of 10 November, IOM reported that 875,180 people had been displaced within Lebanon (52% women), with 190,212 people registered in 1,019 collective shelters – 86% are at full capacity. Around 49% of internally displaced people are living in the community, 27% in rental housing and 1% in unfinished buildings, tents, public parks, and on the streets, as harsh winter weather conditions prevail. The unprecedented wave of displacement has further strained health care, waste management and shelter services, impacting host communities.
- As of 30 October, an estimated 469,000 people (29% Lebanese and 71% Syrian) have crossed into Syria, and almost 25,500 Lebanese nationals have arrived in Iraq, according to UNHCR.⁶
- During UNFPA and inter-agency field visits to shelters in Tyr, Saida, Beirut, and Mount Lebanon, pregnant women and new mothers shared their concerns about hygiene conditions in shelters and fears for their newborns. As winter arrives, dropping temperatures are increasing their anxieties due to the absence of hot showers, winter clothing and basic items for newborns. Privacy and comfort for breastfeeding is another concern for new mothers. Protection concerns for women and girls have also increased due to poor living conditions in crowded shelters, a lack of lighting/electricity and the limited number of toilets segregated by gender. Adolescent girls and women report they are struggling to manage their menstruation due to shortages of water and limited access to bathrooms.



UNFPA-supported women and girls' safe space destroyed following airstrikes on the southern suburbs of Beirut - Oct 20, 2024, Amel Association

⁴ [OCHA Lebanon Flash Update #42 \(7 November 2024\)](#)

⁵ [Lebanon: At a Glance \(31 October 2024\)](#)

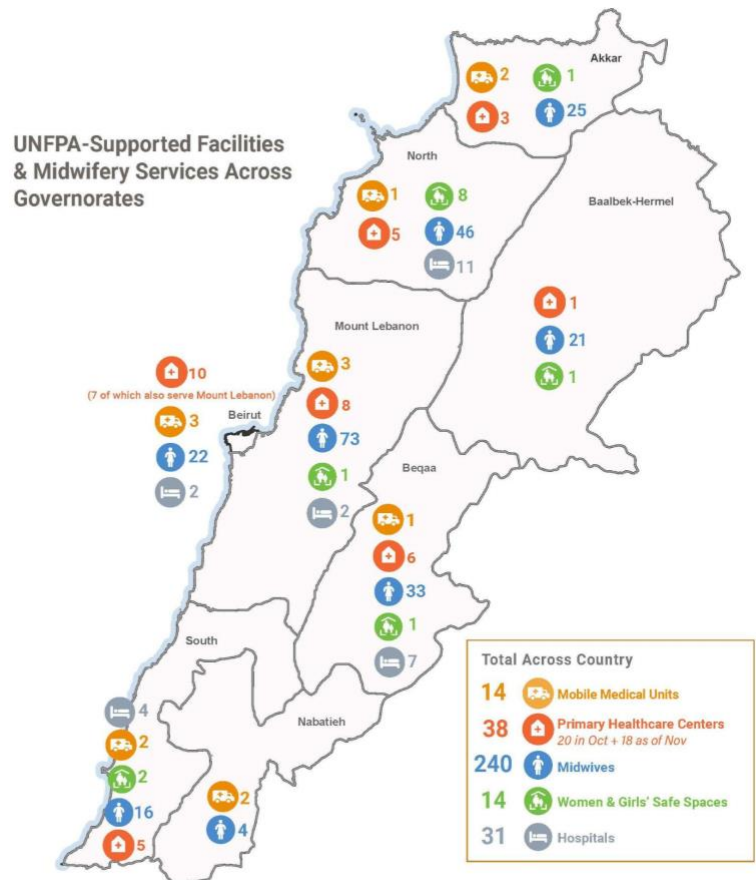
⁶ [UNHCR Syria Short Brief \(24 September - 30 October 2024\)](#)

UNFPA Response

UNFPA continues to deliver sexual and reproductive health (SRH) and GBV mitigation and response services to affected populations through mobile medical units, support to primary and secondary health-care facilities, and women and girls' safe spaces (including mobile spaces and one women's shelter), in close coordination with the Ministry of Public Health (MoPH), the Ministry of Social Affairs (MoSA) and local partners.

Sexual and Reproductive Health Response

- UNFPA supported 114 women to access institutional deliveries (including C-sections) and ensured access to emergency obstetric care services for three women with life-threatening complications. UNFPA's support to 31 hospitals across Lebanon includes financial cover for women's childbirth costs and supplies for emergency obstetric care.
- Between 16 and 31 October, UNFPA supported SRH services at 20 PHCCs and 14 medical mobile units operating at the community level focusing on access to SRH care and pre- and postnatal care alongside the dissemination of information on SRH, i.e. menstrual management, sexually transmitted infections, family planning, nutrition for pregnant and breastfeeding women. UNFPA also supported referrals to specialized services as needed. As of November, UNFPA is positioned to extend its support to 38 PHCCs linked to 93 shelters. Six of the PHCCs are temporarily closed with services being provided through mobile teams.
- By the end of October, UNFPA had deployed a network of 240 midwives to provide maternal health and family planning services to pregnant women and new mothers across Lebanon. UNFPA also deployed 35 social workers across the country to support internally displaced people in 84 shelters – that are not linked to PHCCs – with information on SRH, GBV and mental health services, including psychological first aid (PFA) and psychosocial support (PSS), ensuring support for medical referrals as needed.
- 20 Inter-Agency Reproductive Health kits were delivered to the MoPH for distribution to 10 hospitals. The kits include equipment and medical supplies for emergency obstetric care, and support safe births for an estimated 1,050 pregnant women.
- UNFPA continues to support the MoPH with the transport and delivery of medical supplies, including contraceptives and reproductive health medicines, to 110 PHCCs across the country.






- In partnership with the Lebanese Society of Obstetrics and Gynecology, UNFPA has conducted refresher training for critical emergency obstetric care for 170 health care providers on maternity wards in eight government hospitals.
- UNFPA provided training for 1,034 health care providers and frontline workers on SRH, including danger signs in pregnancy, reproductive health infections, and contraception during crises, to strengthen capacity on how to manage and/or refer women for SRH services.
- To increase survivors' access to services for the clinical management of rape (CMR), UNFPA provided training on CMR to 15 MOPH hotline operators, and training on standard operating procedures for CMR to 44 health care staff at two public hospitals in north Lebanon.





GBV Response

- Since 16 October, UNFPA has distributed 3,627 dignity kits⁷ to women and girls in 203 out of 1,503 identified shelters across Akkar, Beirut, Bekaa, Mount Lebanon, North and South Governorates. These kits are part of a supply of 26,526 that have been distributed to nine partners, including women-led organizations and national and international NGOs.
- UNFPA is using the distribution of dignity kits as an entry point for the provision of PFA; the identification and referral of GBV cases; and the dissemination of information on available services for mental health and psychosocial support, and protection from sexual exploitation and abuse. On 22 October, as part of an inter-agency humanitarian convoy, UNFPA delivered dignity kits to 2,000 women and girls in hard-to-reach villages in Hasbaya, South Lebanon.
- UNFPA is supporting case management for those at risk of or subjected to GBV, including cash assistance. Recognizing the diverse needs of affected individuals and communities, UNFPA is supporting PSS programmes and implementing awareness-raising initiatives to challenge harmful norms and foster a culture of GBV prevention, risk mitigation and support.
- UNFPA has supported training sessions for 54 frontline humanitarian service providers in Akkar and North Governorates on PFA and the identification and referral of GBV survivors, and women and girls at risk.

Results Snapshots (October 15 - 31, 2024)

	117	Displaced pregnant women accessed maternal health care, including for life-saving interventions (intrauterine fetal death, sepsis, bleeding)
	20	Inter-Agency Reproductive Health kits provided to 10 service delivery points to support safe births for 1,050 pregnant women
	14	Mobile medical units supported across Lebanon

⁷ A dignity kit contains essential items to maintain hygiene, health and increase safety. It includes sanitary pads, soap, a torch, socks, underwear, toothbrush, toothpaste, a bag, and a leaflet with key messages on GBV, the prevention of sexual abuse and exploitation, PSS, and how to seek help.

	20	Primary health care centers supported across Lebanon
	14	Safe spaces for women and girls supported, including mobile safe spaces
	3,627	Dignity kits distributed to women and girls of reproductive age
	2,088	People reached with GBV and SRH awareness sessions

Ola's Story

Ola* and 46 members of her extended family, including two pregnant women, fled their village in southern Lebanon to seek shelter at the Lebanese University in Beirut. They crammed themselves into five cars and drove for 14 hours to reach the shelter in heavy traffic amid mass displacement and panic. "We decided to either live together or die together, and now we are all here. It was devastating leaving our home but we need to stay strong for our children." Through UNFPA's local partner, Amel Association, Ola and her female relatives received essential psychological first aid, hygiene items, and attended GBV and SRH awareness sessions. "These sessions are giving us a mental push to stay strong and cope better until we go back home. If we go back home," says Ola.

*Name changed.



Ola and her niece participate in a psychological first aid session following their displacement from South Lebanon to Beirut. © UNFPA Lebanon

Coordination Mechanisms

Gender-Based Violence:

Within the framework of the National Protection Sector, UNFPA co-chairs the Gender-Based Violence Working Group (GBV-WG) with the Ministry of Social Affairs and UNHCR. Between 16 and 31 October, GBV partners supported 13,249 displaced individuals in shelters nationwide, providing information on GBV services and psychological first aid to women and girls. Additionally, 35,555 dignity kits were distributed by partners to women and girls at 362 sites. Some 4,684 individuals—primarily women and girls—received remote support, including GBV case management and psychosocial support.

Partners reported challenges in providing case management for displaced GBV survivors due to the insecurity and limited access in hard-to-reach areas. Survivors and staff are also frequently displaced. There is also a lack of suitable space in shelters for safe disclosure. The GBV-WG is working at the intersectoral level to mainstream GBV minimum standards across the response and to bridge the gaps partners are facing.

Through coordinated efforts, UNFPA is ensuring that partners deliver a unified and comprehensive response through:

- Mapping and updating referral pathways.
- Advocating for prioritized protection and GBV-related issues.
- Providing strategic guidance to partners, including remote case management and dignity kit distribution.
- Monitoring partner activities to prevent duplication of efforts and effectively addressing gaps.
- Strengthening partner capacity on GBV, advocating for GBV mainstreaming, incorporating best practices, and securing funding for the GBV sector.

Sexual and Reproductive Health:

Under the National Health Sector, UNFPA co-leads the Reproductive Health Sub-Working Group in partnership with the MoPH. Members include national and international non-governmental organizations, academics, relevant ministries, and UN agencies. Between 16 and 31 October, health partners reported that a total of 4,445 beneficiaries received SRH services across the country, and 835 menstrual health management (MHM)⁸ kits were distributed to 20 shelters. SRH services are being provided by physicians and midwives at shelters, PHCCs and within the community, and include consultations on family planning.

UNFPA coordination activities focus on:

- Ongoing SRH service mapping updates with a focus on support to hospitals.
- Follow up with MoPH and health partners to expand support to CMR services, and establish new facilities to fill the gaps left by the closure of CMR facilities in some areas and massive displacement to others..
- Follow up with health partners on the utilization of MoPH SRH information prioritized for outreach.
- Providing guidance to health partners distributing MHM kits at shelters.
- Support and follow up with new SRH partners to strengthen the weekly reporting of SRH activities.

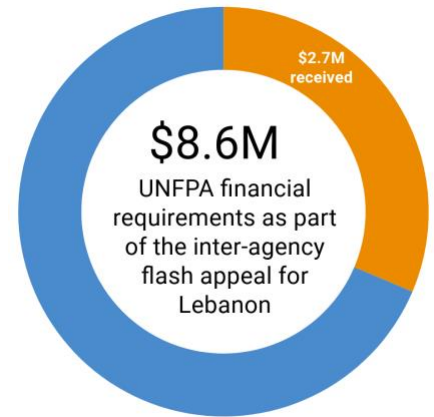
Some partners reported challenges around the mobility of medical mobile unit staff in areas directly affected by conflict (mainly South, Nabatieh, and Baalbak El Hermel Governorates). Access to emergency obstetric care and institutional deliveries is now limited in the Nabatieh Governorate, where six hospitals have been forced to close (either maternity ward or entire facility). Access to CMR services is limited in Nabatieh, Baalbek El Hermel, and South governorates due to the reduced capacity of the Baalbek and Nabatieh Government hospitals and staff displacement from the Amel Association PHCC in Tyre. Health partners are ensuring referrals to the closest facility for institutional deliveries to ensure safe births and mitigate preventable maternal deaths.

⁸ MHM kits contain soap and 30 menstrual pads for each woman/girl (aged 12-49). Two cotton towels are distributed by health partners as part of health education sessions for women and girls.

Funding Status

The Inter-Agency Flash Appeal for Lebanon, launched on 1 October 2024, aims to secure US\$ 425.7 million to address the most urgent needs of 1 million people in Lebanon. Within this framework, UNFPA’s financial requirements until the end of 2024 amount to US\$ 8.6 million, with US\$ 5.5 million designated for SRH programmes and US\$ 3.1 million allocated to GBV interventions. So far, UNFPA has received US\$ 2.7 million: US\$ 1.7 million from the internal Emergency Fund and the Humanitarian Thematic Fund, and US\$ 1 million from Central Emergency Response Fund.

The Flash Appeal complements the UNFPA Appeal of US\$ 19 million for the Lebanon Response Plan. UNFPA extends its sincere gratitude to its recent donors for their support to its humanitarian response in Lebanon prior to the launch of this Flash Appeal, including SIDA, KOICA, the European Union (ECHO), Japan, and France.



Consequences of Inaction and Under Funding

Lebanon’s crisis directly affects more than 1.2 million – close to one fifth of its population. UNFPA is prioritizing its support to the severely strained Lebanese health sector, focusing on sexual and reproductive health services and essential GBV risk mitigation and response for the most vulnerable individuals among the many displaced. As the conflict continues and needs escalate, many firstline responders and partners have themselves been displaced and health facilities destroyed, which is why UNFPA is scaling up its mobile response.

The need to sustain UNFPA’s support to interventions beyond the immediate response is critical. Over 336,000 of the estimated 1.2 million people in need of assistance are women of reproductive age, who are struggling to access sexual and reproductive health services, including maternal health care, menstrual supplies and contraceptives. An estimated 13,900 women are pregnant and 1,550 are expected to give birth in the next month. Protection risks for displaced women and girls, including sexual exploitation and abuse, have also soared in overcrowded shelters at the same time as access to services and support is restricted.

Sustained funding for the humanitarian response, and advocacy to end the conflict, are essential to preserve vital services, strengthen the resilience of the health system and social cohesion, and ensure that Lebanon’s most vulnerable are protected. UNFPA, as co-chair and lead of the SRH working group is in a unique position, in close collaboration with the Ministry of Public Health, to lead the response and ensure that services that are critical to women and girls’ health and well-being are accessible and sustained beyond this crisis.