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Situation Report #6

UNFPA Response in Lebanon

Country:	Lebanon ▾
Emergency type:	Conflict ▾ Displacement ▾
Start Date of Crisis:	Oct 8, 2023
Date Issued:	Mar 3, 2025
Covering Period:	Jan 1, 2025 to Jan 31, 2025
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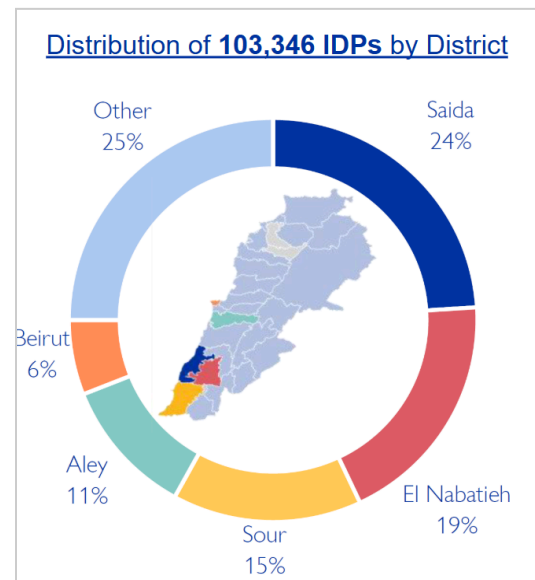
Key Figures



1. 103,356 people remain internally displaced; 883,203 displaced people have returned to their areas of origin and are in need of assistance; 87,000 people have arrived in Lebanon from Syria - [IOM Mobility snapshot - round 74](#).

Situation Overview

- The 60-day ceasefire agreement was extended from 27 January until 18 February, however, violations have continued with airstrikes, gunfire, and the destruction of infrastructure across the Bekaa, South, and El Nabatieh governorates. The Ministry of Public Health reported that 51 people have been killed since the ceasefire took effect on 27 November, 2024, including nine women and five children.
- **19 Primary Health Care Centres (PHCCs) and three hospitals remain closed**, severely impacting the delivery of medical services, including emergency obstetric care and deliveries, particularly in Bent Jbeil, Marjaayoun and El Nabatiyeh districts, southern Lebanon. In El Nabatieh, access to emergency obstetric care and institutional deliveries is limited near the border, with three government hospitals partially or fully closed. Health partners are coordinating referrals to nearby facilities to ensure safe deliveries and prevent maternal deaths. However, partners continue to face access challenges in conflict-affected areas, particularly in villages in the South and El Nabatieh governorates.
- Post-ceasefire, access to clinical management of rape (CMR) services has been restored, and facilities in South, Nabatieh, and Baalbak El Hermel Governorate have resumed operations.
- **More than 103,300 people remain internally displaced, including close to 54,500 women.** In addition, an estimated **87,000 Lebanese and refugees**, who either fled to Syria due to the hostilities in Lebanon or are leaving Syria due to recent developments, have **crossed the borders into Lebanon**, with 35,000 (mostly Syrian refugees) residing in 224 shelters in the Bekaa, many of them overcrowded.²
- Displacement and overcrowded living conditions are exacerbating protection risks for women and girls. Vulnerability to gender-based violence, sexual exploitation and abuse have all increased, particularly for women and girls on the move or returning to unsafe/damaged homes and communities. Reports of psychological distress are rising, and family separation is leading to more women-headed households, further elevating protection risks.
- On 28 January, the Lebanon Protection Working Group issued a monitoring update report, stressing the urgent need for GBV services for women; child protection; and mental health support, including the provision of psychosocial assistance, legal aid, protection for survivors, and improved healthcare.³



UNFPA Response

UNFPA is coordinating closely with the Ministry of Public Health (MoPH), the Ministry of Social Affairs (MoSA), and local partners to address the immediate and evolving health and protection needs of affected women and girls.

² [UNHCR Regional Flash Update #12](#)

³ [Protection Working Group Lebanon - Monitoring update](#)

UNFPA is also focused on strengthening reconstruction and recovery efforts at the national and community level, ensuring that women, girls, and youth are at the centre of an inclusive recovery process.

UNFPA is expanding access to reproductive health and protection services for all women and girls in need, including internally displaced people (IDPs); returnees; and Palestinian and Syrian refugees, including new arrivals from Syria.

Sexual and Reproductive Health Response

- UNFPA supported 38 women to access institutional deliveries (including C-sections). UNFPA's support to 21 hospitals across Lebanon, including financial cover for childbirth costs and supplies, is ensuring pregnant women can continue to access emergency obstetric care.
- UNFPA is supporting sexual and reproductive health (SRH) services at 67 PHCCs and 10 medical mobile units that provide services in communities. Services include pre- and postnatal care, alongside the dissemination of information on menstrual management, sexually transmitted infections, family planning, and nutrition for pregnant and breastfeeding women. UNFPA is also supporting referrals to specialized services as needed.
- UNFPA's network of 45 midwives continues to provide maternal healthcare and family planning services to pregnant women and new mothers across Lebanon.
- 34 Inter-Agency Reproductive Health kits were delivered to the MoPH for distribution to hospitals nationwide. The kits include equipment and medical supplies for emergency obstetric care, and will support safe births for an estimated 1,680 pregnant women.
- UNFPA supported the Order of Malta in Lebanon with capacity building training on CMR, which will be rolled out to 58 PHCC staff, including nurses, midwives, and physicians.

GBV Response

- UNFPA distributed 12,331 dignity kits⁴ to women and girls in shelters and areas of return. These kits are part of a supply of more than 14,100 kits that were prepositioned in early December 2024 with nine partners, including women-led organizations, and national and international NGOs. The distribution of kits is being used as an entry point to provide psychological first aid (PFA), identify and refer GBV cases, and disseminate information on available services for mental health and psychosocial support (MHPSS) and protection from sexual exploitation and abuse (PSEA).
- UNFPA is supporting five women and girls' safe spaces, which provide comprehensive medical and psychosocial support for women and girls at risk of or being subjected to violence. This includes the provision of cash assistance. UNFPA is also supporting awareness-raising initiatives to challenge harmful norms and drive change around beliefs that perpetuate violence against women and girls.
- In collaboration with the inter-agency coordination group, UNFPA provided four online training sessions in January 2025 on psychological first aid and safe referrals for GBV survivors. The sessions targeted more than 100 frontline workers across multiple sectors, including education, child protection, nutrition, and health. Since the launch in September 2024, a total of 248 participants, including staff from UN agencies and international and local NGOs, have received training.

⁴ A dignity kit contains three months' supply of essential items to maintain hygiene and health. It includes sanitary pads; soap; a torch; socks; underwear; toothbrush and toothpaste; a bag; and a leaflet with key messages on GBV, the prevention of sexual abuse and exploitation, psychosocial support, and other available services.

Results Snapshots (January 1 - 31, 2025)

	38	Pregnant women accessed maternal healthcare, including for life-saving interventions (intrauterine fetal death, sepsis, bleeding)
	34	Inter-Agency Reproductive Health kits provided to service delivery points to support safe births for 1,680 pregnant women
	10	Mobile medical units supported
	67	Primary health care centres supported
	5	Safe spaces for women and girls supported, including mobile safe spaces
	12,331	Dignity kits distributed to women and girls of reproductive age through UNFPA
	17,610	People reached with GBV and SRH awareness sessions

Rasha's* Story

Rasha* is from Dhayra, a village in the south of Lebanon. Rasha and her four children were forced to flee when their house was damaged by Israeli Forces. "We went back to try to collect some things but there was nothing to salvage – even the blankets were ruined," said Rasha. She has been temporarily renting a home in Tyre.

Rasha was able to access a primary healthcare centre in Tyre, run by UNFPA's implementing partner, Caritas, where she received a referral for a routine mammogram and echography. With funding from KOICA, the costs of the medical consultation and tests are being covered by UNFPA to ensure that women affected by the conflict can receive the reproductive health services they need.



*Name of patient changed.

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 MoSA and UNHCR. As of 31 January, GBV partners provided information on available GBV services to 20,464 displaced people in shelters. As part of this support, psychological first aid was given to 7,898 women and girls, offering immediate emotional and psychological care to help them cope with trauma and reduce stress. The protection sector distributed dignity kits to 58,716 women and girls, and 7,360 of these women and girls also received psychosocial support.

Following the ceasefire, GBV actors have discussed strategies to resume activities and expand access to services for women, girls, and other individuals at risk of GBV. The GBV-WG is closely monitoring the situation and supporting partners in delivery. It is also providing guidance on selecting geographic areas of intervention based on the evolving situation.

UNFPA coordinates efforts for partners to deliver a coordinated and comprehensive response through:

- Mapping and updating referral pathways.
- Strategic guidance to partners, including remote case management.
- Dignity kit distribution.
- Monitoring partner activities to prevent duplication of efforts and effectively address 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 NGOs, academics, relevant ministries, and UN agencies. As of 31 January, health partners reported that almost 18,478 people had received SRH services across the country. Services, including family planning, are being provided by physicians and midwives at PHCCs, through mobile medical teams in the community, and at some of the remaining shelters.

UNFPA coordination activities focus on supporting and engaging with:

- Health partners on reprogramming efforts following the ceasefire, in addition to responding to cross border displacement from Syria in Baalbak/Hermel governorate.
- MoPH and health partners to expand support for institutional deliveries (childbirths) at hospitals and CMR services.
- Health partners on the utilization of MoPH SRH information prioritized for outreach.
- New SRH partners to strengthen delivery of SRH services and bi-weekly reporting.

Funding Status

UNFPA's overall humanitarian appeal under the Lebanon Response Plan is US\$40 million for humanitarian and recovery needs in 2025. As part of this appeal, UNFPA is requesting US\$11 million to continue delivering essential SRH and GBV services, of which US\$7 million is needed for SRH interventions and US\$4 million for GBV activities. As of January 2025, UNFPA Lebanon's appeal is only 14% (US\$5.6 million) funded.

UNFPA extends its thanks to the UNFPA Emergency Fund and Humanitarian Thematic Fund, the Central Emergency Response Fund (CERF), SIDA, KOICA, EU/ECHO, Japan, and France for their unwavering support in addressing the needs of women and girls in Lebanon.

