Response to New Arrivals in the North and Akkar

As of 31 August 2025

General Overview

The hostilities in the Tartous, Lattakia, Homs, and Hama Governorates of Syria in early March have forcibly displaced thousands of vulnerable families into the North and Akkar Governorates of North Lebanon. Newly arrived refugees are now located across 39 distinct locations, predominantly in Akkar in 30 villages near to the border with Syria. The Disaster Risk Management (DRM) of Akkar cites 14,949 individuals (3,477 families) as of 31 August.

The highest concentrations are in Massaaoudiye, Hissa, and Tall Hmayra. Following the Lebanese Red Cross's enumeration exercise, a total of 10,973 individuals (2,549 families) were counted in North Lebanon. Geographically, most families are residing in Jabal Mohsen area of Tripoli and Dhour el Hawa.

Frequency of new arrivals decreases over months. For August DRM has recorded a decrease of 53 families/273 individuals in Akkar comparing to July (1%); figures in North remain stable. Decrease in figures might be explained by movements to other governorates or families not seeking humanitarian assistance over the month.

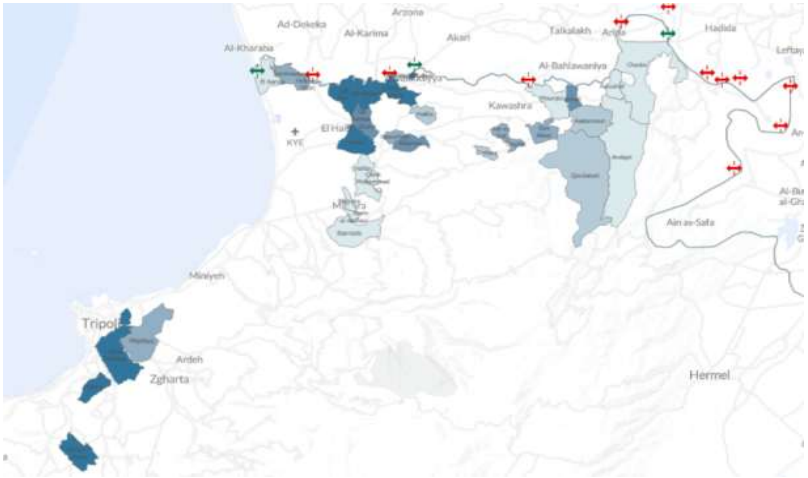
Population

	Akkar	North	Total
individuals	14,949	10,973	**25,922**
Families	3,477	2,549	**6,026**

Collective Shelters

	38	8	**46**
individuals	4,116	348	**4,464**
Families	943	103	**1,046**

Distribution of population



Basic Assistance

Mattresses	**26,502**	Blankets	**32,036**
Sleeping Mats	**23,137**	Pillows	**4,431**
Kitchen Sets	**7,744**	Clothing items	**57,877**

Gaps

Winterization preparedness.

Actors	
13	AICA, ANERA, DRC, IOM, IRC, LRC, NRC, SC, SI, UNICEF/AND, UNHCR/Caritas, WVI

Food Security and agriculture sector

Hot and cold meals	Ready to eat meals	Food Parcels	Bread Packs
1,669,674	**19,993**	**12,933**	**91,790**

Gaps

RTE, and hot meals remains a significant concern for the upcoming period, with limited capacity to meet the needs of all new arrivals in North and Akkar.

Actors	
14	AICA, B&Z, Caritas, CIL, DRC, ICRC, LRC, Nusaned, PCPM, RMF, SCI, SI, WeWorld,WFP

Wash

Bottled water (2L) **163,096**	Family hygiene Kits **12,597**	MHM kits **11,510**	
Center kits **147**	Water storage tanks installed **154,000**	Portable showers* **62**	
Baby Kits **2,162**		Portable latrines* **86**	

** Installed or rehabilitated*

Water quality testing completed in 39 shelters out of which 20 with clean sources.
ACF has the capacity to support in the WASH response with a full WASH package. WV expressed as well their interest. Save the Children can be mobilized in case of further influx under UNICEF.

Gaps: Data per shelter not updated impacting the upgrade of the response (number of individuals very dynamic within the shelters);Some shelters lacking sufficient space for additional external facilities;Access to sufficient quantity of water from existing sources as water flow started to drop during summer (subject to monitoring by WASH partner(s) with capacity for water trucking).

Actors	
9	ACF, CARE, DRC, I'm Possible, UNICEF/AND, UNICEF/LRC, UNICEF/SI, WE World GVC

Education

Under the LHF project, AICA supported 640 children in Retention Support and 1,245 through Walk-in activities during the first six months, now extended for an additional three months, while also launching Sports for Development (S4D) and Digital Hub initiatives across North Lebanon and Akkar. In parallel, AICA is implementing a CRS-funded EiE project (May–September 2025) for 100 Syrian newcomer children in Jabal Mohsen/Mankoubin. SHiFT under UNICEF funds supported three-month education program, PSS, parenting sessions, and youth S4D activities, set for a likely three-month extension. Meanwhile, RMF is rolling out EiE, SEL, and FPSS, under LHF in Akkar, targeting 1,290 children and 290 caregivers across Tal Bireh, Hekr-Dahir, Masaoudiye, Sommaqeye, and Aboudiye.

Gaps: New arrivals face major challenges in accessing education and child-focused services. Limited space makes it hard to find suitable locations for activities, while security and access issues hinder safe travel to learning sites. Funding gaps and restrictive earmarked funds prevent partners from adjusting programs to meet rising needs, leaving many newly arrived children without adequate educational or psychosocial support.

Actors: 5	AICA, AND, Shift, RMF, UNICEF

Health

Nbr of children vaccinated	1,929
Nbr of Health Consultations	21,132
Nbr of NCD consultations	4726
Nbr of people benefited from MHPSS services	954
Nbr of RH consultations	743
Number of People scanned for TB	5,286

Gaps

Lack of MHPSS services due to funding cuts.

Limited coverage of Secondary Health Care services (hospitalization) by UNHCR (60% lifesaving only and 50% deliveries)

No coverage of critical non-acute health conditions such as cancer, dialysis, blood disorders and others.

Gaps in Chronic Medications at PHCCs/PSUs level.

Overcrowding increasing risk of outbreaks.

Actors 13: Caritas, ICRC, IMC, IOM, IRC, LRC, MSF-B, Order of Malta, PUI, UNFPA, UNHCR UNICEF, WHO

Nutrition

Caregivers received awareness and counseling on IYCF and ECD.	366
Children supported through developmental milestones monitoring.	215
Children received protein and energy nutritional and micronutrients supplements.	599
Children under 5 years old receiving Vitamin A supplement.	13,327
Adolescent girls and PBWs received MMS supplements	85
PBWs screened for Wasting, from which one 2 identified and referred to treatment.	28

53,370 infants and children screened for Wasting, from which 383 identified and referred to treatment.

Protection

Individuals receiving counseling **2,524**	Individuals attended awareness/PSS sessions **930**	Indiv. receiving emergency protection case management **157**
Dignity kits distributed **12,274**	Individuals receiving PSEA messages (GBV response) **12,274**	Individuals receiving awareness sessions on legal topics **2,949**

Protection Monitoring & PWSN

Protection partners mainly provide counseling and PSS for persons with specific needs, prioritizing referrals for the most vulnerable. As of 31st August, 2,524 new arrivals received counseling; Due to limited funding, case management is restricted to high-risk cases, with 157 cases initiated. Identification and referrals is supported by mobile info-desk, having reached out to 47 in need of referrals till date.

Gaps: Partner capacity to outreach and identify cases in need of protection assistance remain limited and only high-risk cases benefit from case-management. CBP structures are weak or inexistent hence the challenge to reach out to individuals who might be in need of protection assistance outside of collective shelters. Other key issues include limited freedom of movement, lack of livelihoods opportunities and related negative coping mechanisms, including child labor.

Actors: 8 DRC, IRC,NRC, PUI, UNCHR/InterSOS, UNHCR/IOCC, UNHCR/Caritas, UNHCR/Lecorvaw

Legal

MOSA and legal actors have held awareness sessions on civil documentation and legal residency for newcomers, reaching 2,949 individuals till date.

Gaps: A significant challenge is the widespread lack of legal identification, restricting movement, access to services, and employment opportunities. Addressing this gap remains a key priority.

Actors: 5 DRC, MOSA, NRC, UNHCR/INTERSOS

Child Protection

397 children are benefiting from FPSS and CBPSS.

84 cases of children facing high risk received or still receiving case management.

Gaps

Child labor is most common coping mechanism adopted by new arrivals families and requires dedicated funding to be addressed. Lack of access to education for newly arrived children contributes to create unsafe environment. Partners also observe high number of children in need of PSS following the trauma witnessed in Syria. Current living conditions in collective shelters are considered a child protection risk being mixed-gender environments that do not provide the personal space for play; the lack of safe spaces is key gap too.

Actors: 7 AICA, AND, Intersos, IRC, Himaya, RMF, SCI

GBV

GBV partners focus on awareness, counseling, and PSS, prioritizing high-risk referrals. By 31 August, ~1,000 joined awareness sessions and 200+ received PSS. Funding gaps mean no safe spaces or shelters, and case management is limited to <100 severe-risk cases.

Gaps: Major gaps remain, including no safe spaces or shelters, limited PSS/MHPSS, and barriers from overcrowding, documentation issues, and disrupted services. These increase risks of exploitation, early/child marriage, IPV, SEA, and harassment, which often go unreported due to stigma and unsafe reporting channels.

Actors 9: ABAAD, AKKAROUNA, AND, DRC, IMPOSSBILE, Shift,UNHCR and UNFPA through LECROVAW

Shelter and site coordination

26 CSs have the shelter repairs work completed, 3 CSs have the shelter repairs work ongoing.

3 CSs have no shelter needs identified, 10 CSs were deprioritized due to being transit sites or less than 6 HHs.

34 MSNAs were conducted by the shelter sector partners.

270 households, out of CS, have their shelters repaired. Another 120 HHs will be targeted in the coming period.

Gaps

Risk of evictions as landlords started asking for rent; Nearly 90% of newcomers are residing in shelters out of CS; Shelter with structural damages cannot be repaired. Minor repairs in the CS are limited; Overcrowded conditions with no housing stock capacity; No connection to the water nor to sewage networks; Access to the electricity; UNHCR is the only agency with shelter kits.

Actors 7: Careliban, NRC, PU-AMI, SI, UNHCR/RMF, UNHCR/Concern

Solid Waste

As part of its SWM projects, UNDP provided 105 metal bins to Akkar Governorate.

Gaps: There is a clear and critical gap in solid waste management, with only limited interventions implemented so far. This has led to mounting complaints from local authorities and the risk of evictions, particularly in areas like Tel Bire where frustration is escalating. Urgent, substantial interventions are essential to prevent further displacement.

Actors: 2 UNDP