Protection Sector Weekly Response Sitrep

1,049,328 Displaced people
Source: DRM - As of April 1, 2026

8,910 Incidents

2,483 Deaths

7,707 Injured

642 Open Shelters

121,225 IDPs in shelters

31,717 HH in Shelters

Source: *MoPH - As of April 23, 2026*

Protection, Child Protection, and Gender-Based Violence Situation Overview

Following the ceasefire announcement on 17 April, the humanitarian and protection situation in Lebanon remains fragile and unpredictable, particularly in the South and El Nabatieh regions. While some returns to areas of origin have been observed, displacement patterns remain fluid, with many families undertaking short-term returns followed by re-displacement. A shift in movement patterns has also been noted, with families spending daytime hours in their villages and returning to shelters in the evening, affecting the planning and consistency of activities. Ongoing access constraints, widespread infrastructure damage, and the presence of unexploded ordnance (UXO) continue to hinder safe and sustainable returns and limit humanitarian access. Although the number of IDPs in shelters have decreased, vulnerabilities persist, and in some cases, have intensified within communities of return. Protection monitoring indicates sustained psychological distress among affected populations, alongside increasing reliance on negative coping mechanisms, disproportionately impacting vulnerable and marginalized groups. Frontliners report alarming behavioral changes among children, including aggression and use of dangerous objects, linked to disrupted routines, lack of safe play, and high caregiver stress. Many displaced households remain unable or unwilling to return due to insecurity, lack of shelter, and limited access to services. At the same time, access to populations outside collective shelters remains constrained, limiting service delivery and needs assessments. Overcrowded conditions in hosting areas continue to heighten risks of exploitation, neglect, and gender-based violence. Overall, the situation remains volatile, requiring sustained access and a scaled-up protection response to address evolving risks.

Key Response Highlights[1]

- **Up until 24 April, 140,220 displaced people** have been reached with protection, GBV and child protection services, including **64,816 individuals through information and awareness sessions** on available services, **with 53,627 psychosocial support** inside collective sites, and targeted case management for high-risk cases outside shelters. In addition, **14,963 women and girls received dignity kits**, and **4,808 non-Lebanese households** received Emergency Protection Cash (ECA).
- **Geo-split exercise** ongoing across all subnational coordination structures to ensure a weekly real-time assessment of presence, capacities and gaps of protection, CP and GBV programmes inside collective sites.
- **Protection monitoring on returns and dissemination of EORE and child-friendly IEC materials** are ongoing, through relevant actors which is a critical entry point to reach returning populations to raise awareness on safe behaviors and reduce the risk of injury or death.

140,220 People Reached

64,816 Awareness and Information Sessions

14,963 Dignity Kits

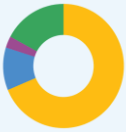
53,627 PSS and Case Management

Top 3 Governorates by reach

South	31,790
Mount Lebanon	31,712
Beirut	20,695

Female 70%
Male 30%

Lebanese 68%
Syrian 11%
Migrants 3%
Others 17%



Source: *ActivityInfo Reporting for IDP Emergency as of 24 April 2026. People reached includes PRT/CP/GBV activities not under the main 3 categories.*

[1] All figures of the response included interventions reported by partners recording their activities on the ActivityInfo platform.

Protection

29,282 People Assisted

33 Partners

Activity	# of People Assisted
# of people benefiting from awareness /information sessions on risks and access to services	19,362
# of people at risk receiving group or individual psychosocial support and/ or case management	4,226
# of people who received Emergency Protection Assistance	5,215
# of protection staff trained on protection CM, MHPSS, CBP, PM or other interventions	298
# of people reached through one-way communication channels on protection and services	~74,000

The protection environment continues to be shaped by highly fluid displacement dynamics following the ceasefire, with ongoing cycles of short-term returns and renewed displacement. Access constraints remain significant, particularly in reaching IDPs outside collective sites, limiting a comprehensive understanding of protection needs among different population groups. Protection monitoring indicates sustained pressure on household resources, including reduced access to services and increased exposure to eviction, exploitation amongst vulnerable and marginalized groups. Psychological distress remains widespread and with exacerbated impact on children, women and marginalized groups.

Protection partners focused on the below prioritized response interventions:

- **Protection awareness and information sessions:** Continued dissemination of protection messaging, engagement and awareness with increased emphasis on risks associated with returns, including UXO contamination, damaged or partially destroyed housing, and service availability in areas of origin.
- **Access to dignified displacement Persons with Disabilities:** OPDs continue to closely follow up on the pressing needs for persons with disabilities and older persons who have faced utmost challenges during displacement, including lack of access to inclusive latrines. Most follow up is done through active community channels and WhatsApp groups to identify concerns and get community feedback and complaints.
- **Protection Monitoring and mainstreaming:** Monitoring activities have been intensified following the ceasefire announcement, with increased engagement on return intentions and safety conditions in areas of origin, and strengthened dissemination of risk information to support informed decision-making.
- **Upscaled community engagement and mobilization:** Continued engagement with displaced communities in collective sites, with support to community-led maintenance and community-based sports and recreational activities.

Child Protection

70,306 People Assisted

51 Partners

Activity	# of People Assisted
# children, caregivers and women at risk and other persons with specific needs reached with information & awareness on services	21,688
# of persons benefitting from psychosocial support, including community-based PSS for children and caregivers	48,291
# of children referred to life saving specialized services through quality case management	327
# of unaccompanied and separated children identified	58

Following the ceasefire, **child protection partners** have shifted focus toward addressing **child protection risks linked to returns and continued displacement**, while maintaining services for populations still residing in collective shelters and host communities. The return of families to areas potentially affected by hostilities has increased risks related to **family separation, exposure to explosive hazards, and limited access to services**. Frontliners continue to share observations of alarming behavioral changes, including frequent physical aggression and the use of dangerous objects (glass, sticks) during interactions. These indicators of severe distress and anger issues are attributed to the loss of routine, lack of play spaces, and the high stress levels of caregivers.

Child Protection partners focused on the below prioritized response interventions:

- Partners are prioritizing the identification and support of unaccompanied and separated children (UASC), alongside the continuation of family tracing and reunification (FTR) efforts to restore family unity. Case management services remain active for children at heightened risk, with efforts to ensure continuity of care despite population movements. To date 58 UASC were identified, 50 were united and/or provided with alternative care arrangements.

- Psychosocial support (PSS) activities continue to be delivered and expanded to support children and caregivers coping with distress linked to conflict, displacement, and return.
- Following the ceasefire, **dissemination of** Explosive Ordnance Risk Education (**EORE) messages** and child friendly IEC material are ongoing through relevant actors to raise awareness on safe behaviors and reduce the risk of injury or death of children and caregivers.

Gender-Based Violence

40,594 People Assisted

30 Partners

Activity	# of People Assisted
# of people benefitting from information sessions, GBV awareness sessions, and individual consultations on how to access services	23,766
# of people who received dignity kits	14,963
# of individuals supported with ECA	755
# of people at risk of GBV and survivors accessing quality GBV response services, including focused and non-focused PSS	1,110
# of Women and Girls Safe Spaces (WGSS) and other centers providing GBV prevention and response services	13

Women and girls continue to be disproportionately impacted by the crisis, with vulnerabilities shifting as a gendered return pattern emerges following the ceasefire agreement. While displacement numbers in collective shelters have decreased, families have been adopting a place-holding strategy where men return to assess property damage while women, children, and the elderly remain in shelters due to fear, vulnerabilities and restricted mobility. This family separation, combined with ongoing overcrowding and a lack of WASH-related risk mitigation, continues to drive high risks of GBV. When it comes to the IDPs outside the collective shelters, reports of landlords demanding up to three months' rent in advance in some locations reaises concerns about increased risk of sexual harassment and exploitation, particularly for female-headed households who cannot afford these rising costs. Moreover, as for many families displacement has severely limited livelihood opportunities, some women and children are pushed to engage in work to help support their families, increasing GBV risks and vulnerabilities.

The GBV response is currently focused on the following key operational areas:

- **Integrated GBV Services Outside Collective Shelters:** Partners continue to provide GBV support and are encouraged to adapt service delivery to track the fluid movement of populations, prioritizing integrated GBV services through static, mobile, and remote modalities to reach women and girls outside the formal shelter system. These efforts focus on providing a comprehensive GBV support package —including awareness rising, PSS, case management, dignity kits distributions and emergency cash. However, the operational response in the areas of return is severely hindered by infrastructure destruction and accessibility limitations, with many previously closed facilities unable to reopen.
- **GBV Safety Audit Rollout:** The GBV safety audit exercise is continuing, with preliminary findings revealing major gaps in the WASH and Shelter GBV risk mitigation - as well as concerns with the NFI distributions modalities, with the most vulnerable groups being adolescent girls, female headed households, elderly women, women and girls with disabilities, pregnant and lactating women, children and female caregivers. At the moment, **25 partners** are engaged across **358 sites** (covering 45% of all collective shelters). A detailed analysis and a dashboard of these results are scheduled for release in the coming week to drive evidence-based advocacy across the Shelter and WASH sectors.
- **Maintained Presence within Collective Shelters (Geosplit):** While 478 shelters (67%) have been assigned to specific partners for the rollout of the GBV package—including awareness raising, PSS, and dignity kit distribution—the rapid closure of some sites and the fluid movement of the accommodated population have made the continuity of GBV services difficult to maintain. Despite these challenges, the GBV WG continues to encourage a sustained GBV partner presence in remaining shelters.
- **GBV Needs Assessment:** Under the coordination of the GBV WG, the joint GBV needs assessment rolled out by the UNFPA, CARE, and HDA is under development, with the inception report and tools developed and reviewed by the GBV core group members.

Key Challenges and Needs

- **Increased needs for communication with communities and dissemination of EORE sessions to reduce risks.** The presence of UXO in areas of return necessitates an immediate scale-up in Communication with Communities (CwC). Heightened outreach and EORE are critical to ensure returnees can identify hazards and navigate damaged neighborhoods safely.

- **Enhanced needs for monitoring of the protection situation** and trends amidst a high fluid displacement and return situation.
- **Critical Service Gaps in Areas of Return:** Extensive infrastructure damage and UXO contamination prevent the reopening of static facilities in the areas of return. This is further exacerbated by the continued displacement of frontline staff and fluid population movements, leaving returnees with limited access to essential protection, child protection and GBV services.
- **Access to people displaced outside collective sites, people remaining in unsafe, hard-to-reach areas or marginalized groups remains a key challenge**. Partners have increased outreach and monitoring missions to those living in streets, squares or unsafe buildings but limited alternative housing options impact on the sector's ability to support their access to shelter and services. For those living in hard-to-reach areas, remote support is provided but the closure or inaccessibility of centers, GBV safe spaces and CRM facilities has sharply reduced access to life-saving services. Combined with earlier funding cuts, this creates an urgent need to expand community-based outreach and support modalities, access to safe spaces and enhanced linkages with SDCs and operational centers.
- **Mental health needs are rising among displaced populations**, particularly for children and caregivers after the recent large-scale aggression and attacks of this week. An increased number of people, including children, face loss or separation from parents or family members requiring dedicated grief and MHPSS services.
- **Lack of sufficient funding to holistically respond to the protection risks including for persons with disabilities**. Funding care activities and larger-scale distribution of adult diapers is critically underfunded. This has led to critical programmatic gaps to address complex protection, health and disability-specific needs.
- **Growing tensions within host communities and overstretched services** are increasing discrimination and protection risks and further reduce access of vulnerable groups to services.
- **Linked to growing needs, capacities of Protection/CP/GBV Sector staff are stretched** significantly with limitations shared by partners to cover all collective sites or geographical areas assigned to them. Upscaling of outreach, case management, MHPSS and Cash for Protection, inclusive of Lebanese is required. Insecurity in large parts of urban areas also increased the impact on social workers and protection staff with an urgent need to enhance staff welfare support.
- **Pending approval for Protection, GBV, and CP cash assistance** for Lebanese IDPs hinder urgent support for safe accommodation and other immediate protection needs. The revised Cash for Protection Guidelines were submitted for endorsement by the CWG and MoSA. Questions are also raised on the effectiveness of the current transfer value given the increase in rental prices in perceived safer areas.
- Child safeguarding risks remain high in shelters and during return movements, including limited supervision, overcrowding, and increased stress among caregivers. Access constraints, overstretched frontline capacity, and gaps in specialized services, particularly case management and focused PSS, continue to affect the scale and quality of the response.

Engagement of Women-Led Organizations (WLOs) in the Emergency Response

Since the onset of the conflict, Women-Led Organizations (WLOs) have served as the backbone of the protection response, leveraging their unique community trust and proximity to reach populations largely missed by traditional humanitarian systems. Members of CAFI network of WLOs led by HIMAYA DAEEM AATAA (HDA), have been instrumental in identifying overlooked GBV risks and service gaps for IDPs living outside formal shelters, including those in host communities, rented apartments, and informal settings. By deploying mobile outreach, survivor-centered case management, and dignity kit distributions directly within these underserved areas, WLOs have ensured that women and girls excluded from formal systems can still access life-saving protection. This localized approach extends beyond immediate relief to include critical peacebuilding and social cohesion efforts, where WLOs facilitate community dialogue and mediation to reduce tensions between displaced and host populations. Ultimately, the WLO model demonstrates how frontline, gender-responsive leadership bridges critical gaps in emergency response through rapid, inclusive, and context-sensitive service delivery, without leaving hard-to-reach and underserved areas behind.

Good Practices: Engagement of Women-Led Organizations (WLOs) in Protection Response

- **Localization and proximity-based delivery**: WLOs' embedded presence in communities enables rapid identification of protection risks and timely delivery of GBV and protection services, particularly in hard-to-reach and displacement-affected areas.
- **Community-based outreach and trust-building**: WLOs leverage established social networks to conduct awareness-raising, risk communication, and referrals, improving early identification of cases and reducing barriers to access.
- **Targeting of underserved groups**: WLOs are effective in reaching highly vulnerable populations, including displaced women, migrant women, women with disabilities, and other at-risk groups often excluded from formal systems.