

OPERATION UPDATE

Lebanon | Lebanon Complex Emergency

Emergency appeal №: MDRLB017

Emergency appeal launched: 05/11/2024

Operational Strategy published: 24/12/2024

Operation update #3

Date of issue: 19/09/2025

Operation timeframe: 26 months

(05/11/2024 - 31/12/2026)

Funding requirements (CHF):

CHF 80 million through the IFRC Emergency Appeal

CHF 100 million Federation-wide

Glide №:

CE-2024-000196-LBN

Timeframe covered by this update:

From 24/12/2024 to 24/6/2025

Number of people being assisted: 700,000

DREF amount initially allocated: N/A

On 5 November 2024, the IFRC launched an Emergency Appeal to support the Lebanese Red Cross (LRC) in responding to the escalating humanitarian crisis in Lebanon, aiming to assist 700,000 affected individuals. To date, the CHF 80 million appeal remains only 7 percent funded, underscoring the urgent need for additional support to sustain LRC's response and preparedness efforts.



Rationale for the Lebanon Complex Emergency Appeal and Complementarity to the Middle East Crisis Appeal:

This Emergency Appeal was launched in November 2024 to support the Lebanese Red Cross (LRC) in addressing the immense humanitarian impact of the escalation of hostilities in Lebanon.

Since October 2023, IFRC has supported LRC's efforts to prepare for and respond to the spill-over effects of the escalation of hostilities in Gaza through its multi-country Emergency Appeal for the Middle East Complex Emergency, which addresses the regional implications of the humanitarian crisis in Gaza.

The escalation of hostilities in September 2024 led to widespread destruction and mass displacement, exacerbating an already dire socio-economic situation in Lebanon, necessitating a new appeal to address the rapidly evolving humanitarian situation more effectively. The launch of a separate Emergency Appeal for Lebanon will ensure a robust Federation-wide response to the current crisis while also addressing the longer-term consequences of this conflict through recovery efforts as the country faces one of its worst humanitarian crises in decades.

While this new Emergency Appeal has been launched for Lebanon, the Middle East Crisis Emergency Appeal will remain active until December 2025.

The figures presented in the six-month Operations Update reflect the ongoing humanitarian response under this appeal while remaining complementary to the Lebanese Red Cross's activities under the Middle East Crisis Appeal. This alignment follows the National Society's One Response Approach, ensuring a coordinated and effective response across both appeals.

A. SITUATION ANALYSIS

Description of the crisis

Lebanon continues to face one of the world's most complex and multifaceted crises, driven by prolonged political instability, economic collapse, and the spillover of regional conflicts. Since 2019, the country has witnessed a sharp currency devaluation, widespread poverty, and the deterioration of public services, with critical sectors such as electricity, healthcare, and water systems in steep decline.

Between April and June 2025, an estimated 21 percent of the population, approximately 1.17 million people, including Lebanese citizens, Syrian refugees, and Palestine refugees, experienced high levels of acute food insecurity. Lebanon remains one of the top refugee-hosting countries per capita worldwide, currently sheltering an estimated 1.5 million Syrian refugees and tens of thousands of Palestinian refugees.

Since October 2023, escalating violence along Lebanon's southern border has led to repeated waves of internal displacement, affecting communities in the South, the Bekaa Valley, and the outskirts of Beirut. According to Lebanese authorities, the conflict has resulted in approximately 4,000 deaths, including at least 300 children, and around 17,200 injuries. Although a ceasefire was declared in November 2024, hostilities have continued, particularly in southern Lebanon and Beirut's southern suburbs. As of March 22, ongoing airstrikes and ground violations have caused at least 20 additional deaths and 58 injuries², further overwhelming the country's fragile healthcare system, disrupting stabilization efforts, and limiting the return of displaced populations and humanitarian access.

¹ WFP: Food insecurity in Lebanon returns to near pre-conflict levels - but gains remain fragile, new report shows. (June 2025)

² OCHA Lebanon Flash Update #65 (28 March, 2025)

As of early June 2025, an estimated 82,632 individuals remain displaced within Lebanon. This includes approximately 914 internally displaced persons (IDPs) sheltering in 12 collective centers³, while many others are hosted by relatives or living in informal arrangements, further straining the already limited resources of host communities.

Compounding Lebanon's internal challenges, renewed violence in neighboring Syria in early March 2025 has triggered additional waves of displacement. Airstrikes, ground offensives, and inter-sectarian conflict have caused widespread casualties and the destruction of homes and infrastructure. Since December 2024, Lebanon has received 108,032 newly displaced Syrians. Of these, 67,167 remain in the Bekaa and Baalbek-Hermel regions, 29,430 are residing in Akkar and the North, and another 11,435 individuals have settled in other parts of the country, including some who relocated internally after their initial arrival.⁴

The recent influx of Syrian refugees has reignited debates around migration governance, social cohesion, and resource allocation, particularly in regions where both Lebanese residents and long-term refugees are already grappling with severe poverty, unemployment, and limited access to essential services. Rising tensions between host communities and refugee populations have heightened concerns about long-term stability and protection risks.

Summary of response

The Lebanese Red Cross (LRC) is the primary humanitarian organization in Lebanon, established in 1945 and recognized by the government as an auxiliary to the public authorities in the humanitarian field. It is the country's largest national provider of emergency medical services and plays a pivotal role in disaster response, relief, and recovery efforts across Lebanon.

The LRC operates as an independent, neutral, and impartial body, but maintains a close working relationship with various government entities such as the Disaster Risk Management (DRM) unit, the Ministry of Public Health (MoPH), the Ministry of Social Affairs (MoSA), alongside the Lebanese Army Forces (LAF) and Internal Security Forces (ISF). LRC is a key component of the National Disaster Response Plan, often leading the coordination of first responders and working alongside civil defence and municipal authorities during crises.

In response to the ongoing hostilities in southern Lebanon and the wider humanitarian emergency, LRC has been the lead provider of pre-hospital emergency services, deploying over 350 ambulances to affected regions, despite dangerous conditions and attacks on medical personnel. Additionally, LRC is managing and supporting collective shelters and delivering essential relief supplies including food, hygiene kits, and non-food items to displaced people. With regards to its coordination role, LRC is actively participating in national and international coordination forums, including those led by OCHA, UNHCR, and the Lebanese authorities, to ensure harmonized and efficient aid delivery.

Additionally, LRC has focused on preparedness for potential escalation while simultaneously supporting those in conflict-affected areas, displaced individuals, and host families. Key response activities include ambulance services, pre-hospital care, blood transfusion, primary healthcare, psychosocial support (PSS), Urban Search and Rescue (USAR), Water and Sanitation, Cash, the distribution of essential relief items and food, distribution of multi-purpose cash assistance and recovery initiatives.

Given the ongoing volatility and rapidly changing humanitarian needs, this Emergency Appeal seeks to secure sustainable support for LRC's operational priorities through December 2026. A long-term, comprehensive approach is essential to addressing the protracted impact of the crisis, with a strong focus on recovery efforts.

³ Joint report LRC, DRM and IOM Mobility Snapshot (June, 2025)

⁴ WHO: Public Health Situation Analysis. (July 2025)

Needs analysis

Lebanon is experiencing a rapidly worsening humanitarian crisis fueled by economic collapse, the escalation of hostilities, and prolonged displacement. With its GDP contracting by over 38 percent in five years⁵, the country faces surging poverty, weakened public services, and systemic vulnerabilities. The conflict in Lebanon has displaced more than one million people at its peak, with more than 80,000 still unable to return home due to ongoing insecurity and damage to infrastructure.

Civilian infrastructure—homes, schools, clinics, and water networks—has been severely damaged, while public services have collapsed under pressure. The healthcare system is overwhelmed: nearly 100 primary health centers and several hospitals in affected areas have shut down or are operating at reduced capacity due to shortages, damage, and security risks. Emergency services struggle to respond to rising trauma cases, disease outbreaks, and maternal and mental health crises, with over 4,300 acute watery diarrhea cases recorded in 2025 alone. ⁶

Food insecurity remains critical, with over 1.17 million people, around one-fifth of the population, facing crisis or emergency levels of hunger between April and June 2025, and a projected increase to 1.24 million by October.⁷ Agricultural losses, disrupted supply chains, and rising inflation continue to undermine food access, while malnutrition among children and pregnant women is on the rise.

Despite these conditions, the Lebanese Red Cross continues to deliver lifesaving aid under constrained security and logistical conditions. However, with only 7 percent of the Emergency Appeal funded, the risk of further humanitarian deterioration remains high amid ongoing political and economic fragility.

Operational risk assessment

Security: Despite the ceasefire agreement, airstrikes have reduced but continue on a regular basis. These hostilities have not only undermined efforts to stabilize the region but have also further delayed the return of some of the displaced populations, mainly in south Lebanon.

Access: Even in the months immediately following the November ceasefire and despite ongoing coordination between the Lebanese Red Cross (LRC) and UNIFIL, the security situation created access limitations for humanitarian organizations, especially in the South. The uncertainty and residual effects of the conflict likely complicated efforts to reach affected populations consistently during this period.

Protection-related Risks: Ongoing hostilities and displacement pose significant protection challenges, especially for vulnerable groups such as women, children, the elderly, and the injured. The operation prioritizes both mainstreamed and specialized protection services tailored to evolving scenarios to ensure a safe, dignified, and inclusive response.

Funding: The operation has not received significant grants to support the Emergency Appeal (EA) budget of 80M CHF. So far, only 7 percent of the required funds have been raised, leaving a funding gap of 93 percent. The presence of multiple crises unfolding in the region has further constrained fundraising efforts.

Population Movement: Following the ceasefire, most displaced people have returned home, yet their needs and demographic compositions continue to evolve. LRC is currently undertaking response operations to support in the safe return of population to their respective homes and rehabilitating damaged infrastructure. However, the unstable security situation in Syria has affected the speed of return of Syrians displaced into Lebanon

⁵ World Bank, 2025

⁶ WHO: Public Health Situation Analysis. (July 2025)

⁷ WFP: Food insecurity in Lebanon returns to near pre-conflict levels - but gains remain fragile, new report shows. (June 2025)

B. OPERATIONAL STRATEGY

Update on the strategy

The Operational Strategy, published on 24 December 2024, will be revised to reflect the National Society's plan for the upcoming year and the indicators will be amended. The temporary ceasefire agreement remains fragile and the situation unpredictable, which also affects the humanitarian partners' ability to fully plan for recovery.

C. DETAILED OPERATIONAL REPORT

STRATEGIC SECTORS OF INTERVENTION

	Shelter, Housing and Settlements		Total Target: ´	5,000 People	
Objective:	Communities in disaster and crisis affected areas restore and strengthen their safety, wellbeing and longer-term recovery through shelter and settlement solutions				
	IFRC Indicator	LRC Indicator	Actual	Target	
Key indicators:	# of conflict affected individuals receiving mattresses, disaggregated by sex	# of mattresses distributed to conflict-affected individuals	23,651	-	
	# of blankets distributed to conflict-affected individuals	# of blankets distributed to conflict- affected individuals	22,651	-	
	# of conflict affected families receiving cash for rent assistance	# of conflict affected families benefited from the retrofitting and rehabilitation works of residential buildings/shelters through contractor-based intervention	N/A	-	

Despite the ceasefire agreement, violence persists, particularly in southern Lebanon, due to intermittent airstrikes. Combined with the ongoing conflict in Syria and population movement, these conditions have continued to hinder the safe return of many displaced individuals to their homes. A significant number of internally displaced persons (IDPs) remain in collective shelters and other temporary accommodations, where they continue to require humanitarian assistance. In response to these ongoing needs, shelter item distributions have remained a priority. Between the start of January and the end of June, the Disaster Management Sector (DMS) distributed 23,651 mattresses and 22,651 blankets to those affected by the hostilities. Additionally, 1,864 shelter kits containing two tarpaulins and a shelter toolkit (includes tools that are used for shelter repairs) were provided.

While the demand for shelter items has declined as individuals return to their communities, the need for funding to support cash distributions for shelter rehabilitation has increased. However, cash for rehabilitation is not

currently prioritized, and as a result, no dedicated funding has been allocated for this purpose. Instead, the Lebanese Red Cross (LRC) is providing emergency multi-purpose cash assistance, which beneficiaries can use at their discretion.



Food Security and Livelihoods

Total Target: 110,000 People

Objective:	Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods			
	IFRC Indicator	Equivalent LRC Indicator	Actual	Target
Key indicators:	# of people who received ready meals, disaggregated by sex	# of food parcels distributed to conflict-affected families	167,523	-
	# of families who received food parcels	# of families who received food parcels	400	-

The LRC Disaster Management (DM) sector distributed 167,523 food parcels to 400 families between January and June 2025 across several governorates, including Akkar, Baalbek-Hermel, Beirut, Bekaa, Keserwan-Jbeil, Nabatieh, Mount Lebanon, North Lebanon, and South Lebanon. In the first quarter, distributions were concentrated in the Bekaa and North Lebanon, while in the second quarter the scale increased in North and South Lebanon, with steady coverage maintained elsewhere. This approach ensured that conflict-affected families across diverse regions received consistent support throughout the first half of the year.



Multi-purpose Cash

Total Target: 100,000 People

Objective:	Households are provided with unconditional/multipurpose cash grants to address their basic needs			
Key indicators:	Indicator	Actual	Target	
	# of families who received unconditional cash	10,796	-	

Between January and April 2025, the Lebanese Red Cross (LRC) launched Phase I of its cash response, providing one-time emergency assistance to 3,936 vulnerable families. Each received \$200, structured to cover key needs:

- \$100 for food assistance,
- \$45 for basic non-food items, and
- \$55 for water, sanitation, and hygiene (WaSH) support.

From April to June 2025, LRC rolled out Phase II, reaching an additional 2,214 households in Baalbek-Hermel, Mount Lebanon, Nabatieh, and South Lebanon, bringing total households assisted since January to 10,796.

Building on Phase I, the second phase shifted from one-off support to sustained monthly transfers of \$200 over six months for the most vulnerable households. Targeting was refined through a detailed scoring system and phone-based assessments, enabling prioritization despite ongoing security risks, particularly in the South. Additional challenges include new Ministry of Social Affairs coordination requirements currently under review, as well as ongoing funding gaps that continue to limit coverage.

Lessons from Phase I informed improvements in data validation, beneficiary communication, and monitoring. Disbursements were implemented in batches to align with donor timelines and maintain operational efficiency. Phase II reflects a more strategic and adaptive approach to meeting the needs of conflict-affected communities.

In the next quarter (July to September 2025), LRC will continue assistance to current beneficiaries, launch two new batches to reach remaining eligible households, and conduct a Post-Distribution Monitoring (PDM) exercise in August to assess effectiveness, satisfaction, and unmet needs. These findings will inform adjustments for the remainder of Phase II (ending December 2025) and guide the roll-out of LRC's economic recovery strategy, which will run alongside cash assistance, focusing on immediate livelihood stabilization in 2025 and progressive market restoration and financial inclusion through 2026.



Health & Care

(Mental Health and psychosocial support / Community Health / Medical Services)

Total Target: 330,000 People

Objective:	Strengthening holistic individual and community health of the population impacted through community level interventions and health system strengthening			
	IFRC Indicator	LRC Indicator	Actual	Target
	# of conflict-affected people injured transported, disaggregated by sex		15	-
	# of conflict-affected civilians evacuated, disaggregated by sex		16	-
Vov	# of conflict-related dead bodies managed and transported		31	-
Key indicators:	# of non-conflict related emergencies patients served, disaggregated by sex	# of ambulance patients served	81,981	-
	% of beneficiaries reporting that humanitarian assistance is delivered in a safe, accessible, accountable and participatory manner		96	-
	% of patients served during the day (by days shift teams)		66.3	-

#EMS volunteers responded to the conflict emergency		1,116	-
# of ambulances mobilized on- site		1,203	-
Total # of patients served with prehospital emergency care and transportation		81,987	-
# of calls received on LRC's emergency hotline '140'		512,333	-
# of trained and coached EMDs		20	-
# of coaching sessions conducted		153	-
# of ambulances maintained		611	_
# of days shift teams assured		87	-
# number of days when dayshift teams were active		181	-
# of EMS volunteers trained on EMTs		298	-
# of EMS volunteers trained on First Response		312	-
# of drivers trained		109	-
% of health staff trained and who have met the competency standards in their respective field of expertise		100	-
# of blood components distributed to conflict affected people	# of blood units delivered	25,950	-
# of blood components distributed to hospitals directly			-
# of blood units Collected	# of whole blood units collected	21,528	-
# of blood donors appointments fulfilled	# of blood donors donated based on appointments	480	-
# of MMU deployments		876	-

# of medical consultations provided through MMUs and HCs, disaggregated by sex		99,299 (62,846 Females and 36,435 Males)	-
# of medication services provided through MMUs and PHCs		177,332	-
# of group support sessions	# of individuals reached with PFA	0	-
# of people who attended group sessions, disaggregated by sex	# of unique youth beneficiaries attending life skills sessions from youth and health manuals	915	-
# of people reached with MHPSS services, disaggregated by sex	# of unique children, youth, and adolescent beneficiaries attending long term activities under HVP program	1,196	-
# of vaccines administered	# of children vaccinated	146,886	_
# of RC/RC primary healthcare facilities that carried out routine vaccination activities per month	# of unique beneficiaries attending the IHL toolkit	926	-
# of people reached by volunteers during outreach with information on how to access routine immunization services	# of children reached for immunization	164,959	-

Between January and June 2025, the Lebanese Red Cross (LRC) continued to provide lifesaving prehospital emergency medical services amid both conflict-related and non-conflict emergencies. A total of 81,987 patients were served with prehospital emergency care and transportation, including 15 conflict-affected people injured transported and 16 civilians evacuated from conflict areas. In addition, Emergency Medical Services (EMS) teams managed and transported 31 conflict-related dead bodies, ensuring dignified and timely handling.

Beyond conflict situations, the majority of cases were linked to medical and non-conflict emergencies, with 81,981 patients served, reflecting the scale of LRC's essential role in nationwide health response. Support was facilitated through the 1,116 EMS volunteers mobilized, the deployment of 1,203 ambulances on-site, and operations of the 140 emergency hotline, which handled 512,333 calls during the reporting period.

Quality and accessibility of services remained central. 96 percent of beneficiaries reported that assistance was delivered in a safe, accessible, accountable, and participatory manner. Moreover, 66.3 percent of patients were served during the day by dayshift teams, supported by 87 dayshift teams assured and 181 days of active coverage, ensuring continuity of care.

LRC also invested significantly in strengthening its workforce and systems. 20 emergency medical dispatchers (EMDs) were trained and coached, supported by 153 coaching sessions, enhancing the efficiency of call management and dispatch operations. Capacity-building extended to frontline staff, with 298 EMS volunteers trained on Emergency Medical Teams (EMTs), 312 trained on First Response, and 109 drivers trained to improve safe and rapid patient transportation. Importantly, 100% of health staff trained met competency standards in their respective expertise areas.

To sustain readiness, LRC ensured fleet reliability with 611 ambulances maintained, enabling uninterrupted emergency response. This level of preparedness reflects not only operational capacity but also a commitment to continuous improvement in service delivery.

In parallel, blood services were essential to sustaining critical care. The LRC collected 21,528 units of whole blood and delivered 25,950 blood components to conflict-affected individuals. These efforts were supported by 480 fulfilled voluntary blood donor appointments, helping maintain a steady blood supply at a time of heightened demand.

To respond to the collapse or reduced functionality of many local health facilities, the LRC deployed 876 Mobile Medical Units (MMUs) to provide medical services directly to affected communities. These units delivered 99,299 medical consultations—62,846 for females and 36,435 for males—and supplied 177,332 medication services through both MMUs and Primary Health Care Centers (PHCs). These interventions helped fill urgent healthcare gaps and ensured continuity of care for those displaced because of the conflict.

Vaccination efforts were another major component of the LRC's health response. With routine immunization activities continuing across primary healthcare facilities and through Mobile Vaccination Units (MVU), a total of 146,886 vaccines were administered to children. Additionally, 164,959 children were reached with information on how to access routine immunization services, supporting disease prevention and strengthening community health resilience.

Mental health and psychosocial support (MHPSS) activities were more limited in scale due to shifting operational priorities and population movements. Nevertheless, 915 youth participated in life skills group sessions, and 1,196 children, youth, and adolescents were engaged in long-term activities under the Humanitarian Values and Principles (HVP) program. Although no formal Psychological First Aid (PFA) sessions were recorded during the reporting period, these structured engagements contributed to mental well-being and resilience among vulnerable populations.

Further emphasizing its community-based approach, 926 individuals participated in outreach sessions using the International Humanitarian Law (IHL) toolkit, which aims to raise awareness and build local capacity in the protection of health and humanitarian principles during crises.

Together, these efforts reflect the LRC's commitment to a holistic, inclusive health response—one that meets both urgent needs and lays the groundwork for longer-term recovery. By integrating emergency care, public health, psychosocial support, and community education, the LRC continues to serve as a vital lifeline for Lebanon's most affected populations.



Total Target: 100,000

Ensure safe drinking water, proper sanitation, and adequate hygiene awareness of the communities during relief and recovery phases of the Emergency Operation, through community and organizational interventions

	IFRC Indicator	LRC Indicator	Actual	Target
Key indicators:	# of conflict-affected families receiving hygiene kits	# of hygiene kits distributed to conflict affected families	36,900	-
	# of conflict-affected families receiving disinfection kits	# of household cleaning kits distributed to the affected families	152	-
	# of conflict-affected families receiving drinking water packs	Volume of drinkable water distributed by litres	69,486 litres	-

As part of its hygiene and water, sanitation, and hygiene (WASH) interventions, the LRC distributed 36,900 hygiene kits to conflict-affected families. In the first quarter of 2025, the LRC distributed over 22,920 hygiene kits, with the majority reaching households in Beirut, South Lebanon, Baalbek-Hermel, Bekaa, Nabatieh, and North Lebanon. In the second quarter, more than 13,980 kits were provided, again concentrated in North and South Lebanon and Baalbek-Hermel, with notable distributions in Nabatieh. These kits supplied families with essential items to maintain personal and household hygiene despite disrupted services and overcrowded conditions, particularly in temporary shelters and host communities.

Recognizing the importance of clean-living environments in preventing the spread of disease, the LRC also distributed 152 household cleaning (disinfection) kits to families in Baalbek-Hermel. These kits supported safe and effective cleaning practices in homes where sanitation infrastructure may have been damaged or insufficient.

In addition to hygiene-related support, access to safe drinking water remained a priority. The LRC distributed 69,486 litres of potable water to conflict-affected families in Akkar and most of the North of Lebanon, ensuring a critical lifeline for communities facing water shortages or contamination risks due to damaged supply systems.



Total Target: 25,000 People

Obje	ecti	ve:

Communities identify the needs of the most at risk and particularly disadvantaged and marginalized groups, due to inequality, discrimination and other non-respect of their human rights and address their distinct needs

Key indicators:	Indicator	Actual	Target
	# of staff and volunteers trained on PGI, PSEA and child safeguarding, and staff ensure adherence to the Code of Conduct, disaggregated by sex	-	-
	# of RFL services provided	-	-
	# of child friendly space operated	_	_
	# of children participating in child friendly space, disaggregated by sex	-	-

In response to needs identified by the Medical Social Services Sector (MSS), the Disaster Risk Reduction (DRR), the Disaster Management (DM) Sector, and the Youth Sector, the MHPSS & Protection, Gender and Inclusion (PGI) Program developed a new Mental Health and Psychosocial Support (MHPSS) course to strengthen the capacity of staff and volunteers working with children. This course is a prerequisite for anyone seeking training to conduct sessions and activities with children aged 6 to 17. A pilot was delivered in June 2025, followed by two subsequent courses with LRC volunteers as part of the national rollout. LRC sectors and units have begun scheduling additional sessions to train their teams. After successfully completing the Conducting Activities with Children course, staff and volunteers progress to applied modules covering a range of MHPSS interventions, such as community-based PSS programs and summer camps. This continuous learning pathway is designed to ensure the consistent, high-quality delivery of services.

A specialized psychosocial support program targeting women at risk of experiencing Gender-Based Violence (GBV) has also been developed. The program includes a 12-session curriculum, and a cohort of social workers has been trained by the MHPSS and PGI team to lead its implementation. A number of the trained social workers have begun implementing this program within multiple areas across Lebanon. Positive feedback is being collected from social workers and participants following their involvement in this program.

On the ground, several direct MHPSS interventions are being carried out within communities. The Youth Sector has initiated school-based community events aimed at raising awareness on mental health in addition to implementing an MHPSS program with other youth community members. This sector has also been proposing Youth-led initiatives that include MHPSS activities to provide support within their communities. Concurrently, the DRR Unit has begun implementing MHPSS programs targeting children and youth residing in war-affected communities and are working on expanding their coverage on a national scale.

The MSS is implementing MHPSS programs on a national scale, targeting children in schools and offering positive parenting programs to assist struggling caregivers. In addition, MSS teams are providing individual support sessions to people in distress through healthcare centers and Mobile Medical Units (MMUs), alongside disseminating key mental health messages. Across all interventions, referral mechanisms remain in place to link individuals with additional mental health or protection services when needed.



Community Engagement and Accountability

Objective:			
	Indicator	Actual	Target
Key indicators:	# of calls received through the non-emergency hotline (disaggregated by calls for information and requests, feedback and complaints, others)	44,852	-

The Lebanese Red Cross (LRC) non-emergency hotline (1760) functions as both an information hub and a tool for collecting community feedback, concerns, and requests. Volunteers actively support its promotion by informing communities about the service and gathering feedback during field operations. Throughout the reporting period, the hotline handled 44,852 calls, reflecting ongoing community engagement and information needs.

Integrating Community Engagement and Accountability (CEA) into operational planning has been essential in reinforcing transparency and building trust with affected populations. Through its outreach efforts, including the hotline and media platforms, the LRC has ensured a two-way flow of communication, enabling timely responses to public inquiries and strengthening its connection with the communities it serves.

This is how CEA has been integrated into some sectors through LRC:

Emergency Medical Services (EMS): Within the EMS sector, CEA is integrated into key activities. Although service-user satisfaction calls were paused in the first two quarters due to contextual challenges, this mechanism remains a vital indicator of ambulance service quality. Feedback is also collected through the 140 EMS Call Center, where patients and families can share comments or complaints that are promptly relayed to EMS management. In addition, First Aid satisfaction surveys were piloted across several stations, yielding insights that led to facility upgrades and improved connectivity. Expansion of this initiative is underway, with new stations being trained and equipped to gather community input.

Blood Transfusion Services (BTS): The BTS sector integrates CEA primarily through donor satisfaction forms completed at blood donation centers, as well as feedback received via calls redirected from 1760. This system allows blood donors and community members to raise concerns, share complaints, or highlight positive experiences.

Economic Security (EcoSec): CEA remains central to EcoSec programming, especially in the cash assistance response. Throughout both implementation phases, community members were directed to the 1760 hotline for inquiries, complaints, and clarifications. Issues such as name mismatches, transaction errors, or eligibility concerns were promptly referred to the EcoSec team for resolution. Volunteers received tailored training on professional, respectful, and culturally sensitive communication to ensure ethical feedback collection and build trust with affected households. Reflection meetings with hotline staff, volunteers, and other stakeholders generated lessons learned and corrective actions, including stronger data validation, practical FAQs, and new communication tools—such as SMS updates and flyers, to guide households through cash withdrawal procedures.

Through these efforts across EMS, BTS, and EcoSec, the LRC continues to embed CEA in its programs, ensuring community voices are heard and acted upon. This integrated approach reinforces accountability and transparency while strengthening the organization's ability to meet evolving community needs.

Enabling approaches



National Society Strengthening

Objective:			
Key indicators:	Indicator	Actual	Target
	# of volunteers and staff provided with PSS services, disaggregated by sex	-	-
	# of volunteers and staff trained on CFM complaint and feedback mechanism protocols and beneficiary engagement, disaggregated by sex	-	-
	# of staff and volunteers attending PGI, PSEA, and child safeguarding trainings and briefings, disaggregated by sex	-	-

Throughout the conflict and in its aftermath, the support sections of the Lebanese Red Cross played a pivotal role in sustaining the organization's capacity to respond swiftly, transparently, and effectively. Their contributions ensured the continuity of critical operations amid an increasingly complex humanitarian environment. These sections worked in tandem to maintain financial discipline, secure essential goods, and enable the movement of aid across the country, while also driving strategic planning, accountability, and institutional learning. Together, their efforts laid the groundwork for resilient, community-centred responses and long-term operational readiness.

The Finance Section ensured financial integrity and agility by maintaining compliance with regulatory requirements while accelerating workflows to meet urgent needs. Despite high-volume demands and external funding pressures, the team implemented weekly expenditure tracking and expedited payment systems, providing timely support without compromising audit standards. Procurement, meanwhile, ensured uninterrupted supply flows through adaptive sourcing strategies, market monitoring, and close coordination with logistics and suppliers. The team managed price fluctuations, supplier shortages, and accessibility challenges, securing life-saving commodities through flexible procurement mechanisms and leveraging key partnerships. Logistics complemented these efforts by efficiently managing fleet operations, warehousing, and distribution. It enabled the clearance and delivery of shipments and maintained fuel and equipment supplies across high-risk areas, even under immense pressure from resource gaps and warehousing constraints.

The Planning and Development Section served as the strategic backbone of the response, coordinating preparedness and operational planning while embedding data-driven and participatory approaches across interventions. Through the development and continual refinement of the 2025 Plan of Action, PDS ensured that response strategies remained adaptive and impact-focused in light of escalating needs. Their work on real-time monitoring systems, results-based frameworks, and community engagement mechanisms strengthened accountability and positioned LRC to manage both immediate relief and long-term recovery with agility and coherence. Collectively, these sections have reinforced LRC's institutional resilience, enabling it to remain effective and accountable amidst evolving crises.



Coordination and Partnerships

Objective:

Membership & Movement Coordination

Regular coordination meetings for this operation continue to inform the response and ensure that all relevant stakeholders are updated. Ongoing dialogue with PNs is facilitated to ensure efforts are aligned and complimentary to ensure improved collective collaboration.

Among the activities carried out so far to ensure good coordination:

- The Emergency Appeal and Operational Strategy have been developed and published. The Operational Strategy will be revised in the near future based on the National Society's plan for the recovery period and onwards in upcoming year in line with the Unified Plan for Lebanon.
- Movement partners engage with external partners, coordinate with authorities and other stakeholders and participate in various working groups.

Engagement with external partners

The Lebanese Red Cross (LRC) actively engages with international stakeholders and development agencies, participating in the Humanitarian Country Team (HCT) and the OCHA Emergency Operations Center (EOC) for collaborative efforts with global bodies and development agencies. This involvement underlines the commitment to effective coordination and cooperation. The LRC aligns its initiatives with the United Nations (UN) framework, engaging in sectoral and bilateral meetings with UN agencies. This strategic alignment ensures the synchronization of efforts with international frameworks, enhancing the impact and reach of LRC's humanitarian efforts. Furthermore, the organization collaborates closely with the International Organization for Migration (IOM) and the Disaster Risk Management (DRM) Unit. This collaboration contributes to the Displacement Tracking Matrix (DTM) Mobility Snapshot, a crucial resource for displacement data in Lebanon. Working in tandem with IOM and the UN Disaster Risk Management (DRM) Unit, LRC contributes to the generation of valuable insights that inform effective responses to mobility and displacement challenges within the region.



Secretariat Services

Objective:

IFRC is working as one organization, delivering what it promises to National Societies and volunteers, and leveraging the strength of the communities with whom they work as effectively and efficiently as possible.

Resource mobilization

Regarding resource mobilization, the revised Emergency Appeal with the 100 million CHF Federation-wide Funding requirements and 80 million CHF IFRC Secretariat Funding requirements has been published and shared with potential donors. This appeal underscores the urgent need to address the significant 93% funding gap, which remains a critical challenge. Discussions are ongoing with partner National Societies, governments, the private sector, and other stakeholders, which could result in financial support. Contributions received so far have made a

tangible difference, enabling the provision of essential support, including medical supplies, food assistance, and emergency shelter. This is a testament to the collective impact we can make when we work together.

The Secretariat will continue to monitor funding progress. IFRC remains steadfast in its commitment to transparent communication with all stakeholders. IFRC will carry on with regular updates as new contributions are confirmed as deployed to the field, ensuring our partners are always informed about the progress and impact of your support.

Quality Assurance and Accountability, Including Planning, Monitoring, Evaluation and Reporting (PMER)

The PMER and IM functions aim to provide accurate, timely, and credible information to support decision-making, accountability, and learning. For Lebanon, a list of relevant indicators was developed based on the planned interventions, which was then aligned with indicators from National Societies/Country Delegations.

At LRC:

The Planning and Development Section, in close collaboration with the LRC IM Unit, as well as the operational sectors, and units responding to the conflict, has been actively coordinating reporting efforts. This process was developed based on the updated conflict logic within a results-based management framework.

In addition to reporting, the Planning and Development Section led the planning and development session to update the 2025 Plan of Action, ensuring it encompasses both the response and recovery phases. This updated framework serves as a package, incorporating a log frame, M&E plan, Plan of Action (PoA), and Indicator Tracking Table (ITT), which is being used for monthly reporting across all LRC operational sectors and units for the year 2025.

Building on previous Planning, Monitoring, Evaluation, Accountability and Learning (PMEAL) implementation, two additional initiatives were undertaken at LRC. First, the LRC PMEAL framework and handbook, along with its toolkit, were disseminated internally to the LRC management team, emergency and operational teams, as well as technical PMEAL/CEA focal points. The objective of this handbook is to strengthen institutionalization, provide standardized guidance, and ensure coherence in planning, monitoring, evaluation, accountability, and learning processes across the organization. Second, in relation to the recent Syrian influx, a sectoral reporting tool was developed and collected from the different sectors, leading to the production of a weekly report that was shared with all partners to enhance coordination, transparency, and responsiveness.

Humanitarian Diplomacy (HD)

Humanitarian diplomacy (HD) has been a key component of this crisis given the global attention it is receiving, the complexity of political dynamics, and the challenges facing the humanitarian response. The IFRC Secretariat has created and maintained a set of resources for the IFRC network. These resources aim to ensure that the IFRC network can contribute to positive humanitarian outcomes on the ground, such as the protection of civilians, humanitarian workers, the medical mission and the RCRC emblem as well as increased humanitarian access, as well as to highlight and generate further diplomatic and financial support for the response of the IFRC network.

Importantly, the IFRC Secretariat leadership remains regularly engaged. In March, the IFRC President met with Lebanon's President, Prime Minister, and Speaker of Parliament to advance the work of the LRC and the Movement components supporting humanitarian response. In January and February, the Regional Director visited Austria, France, Norway, Sweden, and the United Kingdom to brief policymakers on the rapidly evolving context, advocate for overcoming constraints to principled action, and encourage flexible funding.

Building on this diplomacy, the LRC—together with the IFRC and ICRC—convened a diplomatic briefing in Beirut in May that showcased the strength of the Red Pillar in Lebanon, particularly the National Society, with participation from about 12 embassies and key external stakeholders, including UN agencies and ECHO. In July, the IFRC also

joined the LRC and the Grand Bargain Ambassador in Lebanon for a focused discussion on localization and the need for predictable, flexible support to frontline responders.

In parallel, the IFRC continues to organize high-level events, such as the forthcoming Member State briefing, where the LRC will share operational achievements, highlight humanitarian concerns, and present Movement perspectives to decision-makers.

Security

Since the situation remains volatile, security advisors collaborate to ensure the security of the operation with following tasks:

- Monitor and analyse the security situation in Lebanon and identify related trends and issues that affect the IFRC and RC/RC Movement.
- Maintain internal and external security related contacts and participate in security networks.
- Systematically assess safety and security risks, implement effective risk mitigating measures and formulate contingency plans.
- Advise IFRC and RC/RC Movement on required changes to operations and procedures to address identified trends and issues.
- Advise and assist IFRC managers and LRC in the development of appropriate security plans and procedures.
- Ensure implementation and compliance with IFRC Minimum-Security Requirements (MSR).
- Disseminate and promote the various IFRC security tools and initiatives.

D. FUNDING

To date, **7 percent** of the funding requirements of the Emergency Appeal have been covered. The IFRC expresses its gratitude to donors and kindly encourage further contributions to fill the remaining gap to enable the Lebanese Red Cross, with the support of the IFRC, to continue with humanitarian assistance efforts as well as the required recovery actions.

The financial report reflects a discrepancy between the 3-month Operational Update and the current 6-month Operational Update. This difference is attributed to a funding gap of CHF 360,548, which was recorded in WBS during the period between the two updates.

Operational Strategy

INTERIM FINANCIAL REPORT

Selected Parameters Reporting Timeframe 2024/12-2025/6 Operation MDRLB017 Budget Timeframe 2024/12-2025/6 Budget APPROVED	ı			
Reporting Timeframe	2024/12-2025/6	Operation	MDRLB017	
Budget Timeframe	2024/12-2025/6	Budget	APPROVED	

Prepared on 07 Aug 2025

All figures are in Swiss Francs (CHF)

MDRLB017 - Lebanon - Complex Emergency

Operating Timeframe: 05 Nov 2024 to 31 Dec 2026; appeal launch date: 05 Nov 2024

I. Emergency Appeal Funding Requirements

Total Funding Requirements	80,000,000
Donor Response* as per 07 Aug 2025	5,347,828
Appeal Coverage	6.68%

II. IFRC Operating Budget Implementation

Planned Operations / Enabling Approaches	Op Budget	Expenditure	Variance
PO01 - Shelter and Basic Household Items	0	0	0
PO02 - Livelihoods	0	0	0
PO03 - Multi-purpose Cash	0	0	0
PO04 - Health	3,871,413	3,336,656	534,756
PO05 - Water, Sanitation & Hygiene	0	0	0
PO06 - Protection, Gender and Inclusion	0	0	0
PO07 - Education	0	0	0
PO08 - Migration	0	0	0
PO09 - Risk Reduction, Climate Adaptation and Recovery	124,017	121,807	2,210
PO10 - Community Engagement and Accountability	0	0	0
PO11 - Environmental Sustainability	0	0	0
Planned Operations Total	3,995,430	3,458,463	536,966
EA01 - Coordination and Partnerships	2,400	0	2,400
EA02 - Secretariat Services	222,420	7,535	214,885
EA03 - National Society Strengthening	0	0	0
Enabling Approaches Total	224,820	7,535	217,285
Grand Total	4,220,250	3,465,999	754,252

III. Operating Movement & Closing Balance per 2025/06

Opening Balance	0
Income (includes outstanding DREF Loan per IV.)	4,027,249
Expenditure	-3,465,999
Closing Balance	561,250
Deferred Income	1,320,539
Funds Available	1,881,789

IV. DREF Loan

* not included in Donor Response	Loan :	Reimbursed :	Outstanding :



Operational Strategy INTERIM FINANCIAL REPORT

Selected Parameters Reporting Timeframe 2024/12-2025/6 Operation MDRLB017					
Reporting Timeframe	2024/12-2025/6	Operation	MDRLB017		
Budget Timeframe	2024/12-2025/6	Budget	APPROVED		

Prepared on 07 Aug 2025

All figures are in Swiss Francs (CHF)

MDRLB017 - Lebanon - Complex Emergency

Operating Timeframe: 05 Nov 2024 to 31 Dec 2026; appeal launch date: 05 Nov 2024

V. Contributions	by	Donor	and	Other	Income
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Opening Balance	0

Income Type	Cash	InKind Goods	InKind Personnel	Other Income	TOTAL	Deferred Income
APPLE	83				83	
European Commission - DG ECHO	3,748,985				3,748,985	
French Government	73,986				73,986	394,063
Japanese Red Cross Society	29,378				29,378	
Latvian Red Cross (from Latvian Government*)	18,870				18,870	
On Line donations	317				317	
Red Crescent Society of the Islamic Republic of Iran	82,106				82,106	
Swiss Government	73,524				73,524	926,476
Total Contributions and Other Income	4,027,249	0	0	0	4,027,249	1,320,539
Total Income and Deferred Income					4,027,249	1,320,539



Contact information

For further information, specifically related to this operation please contact:

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In the IFRC

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IFRC Regional MENA Office for Operations Coordination:

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IFRC Country Delegation - Lebanon:

Ruben Romero, Head of Delegation-Lebanon; ruben.romero@ifrc.org

For IFRC Resource Mobilization and Pledges support:

IFRC Regional Office for MENA

Yara Yassine, Regional Senior Officer – Acting Head of SPRM, Strategic Partnerships and Resource Mobilization; yara.yassine@ifrc.org.

How we work

All IFRC assistance seeks to adhere the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief, the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere**) in delivering assistance to the most vulnerable, to **Principles of Humanitarian Action** and **IFRC policies and procedures**. The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.