



2026 Lebanon Emergency Response

Situation Report #7

May 6, 2026

Project HOPE continues to scale our response in Lebanon. As hostilities persist and displacement pressures intensify, the team is expanding access to essential health services through the operation of four mobile medical units and improving readiness for large-scale emergencies by supporting Mass Casualty Management training.

Situation Overview

Despite the recent ceasefire, the humanitarian and public health crisis in Lebanon is continuing and expected to worsen without additional investment in relief services. The continuous airstrikes and insecurity in southern Lebanon and other affected areas is causing civilian casualties, damaging infrastructure, and creating waves of displacement.

According to the latest reporting from the Ministry of Public Health (MoPH), at least 2,702 people have been killed and 8,311 injured since the escalation began in early March. Currently, 625 government-run shelters remain open, hosting more than 124,231 people living in suboptimal conditions with intermittent access to electricity, water shortages, and limited hygiene supplies.

In recent weeks, there has been a disturbing escalation in attacks on first responders and emergency personnel in southern Lebanon. Multiple paramedics and volunteers have been killed. Airstrikes have hit clearly marked ambulances, Red Cross facilities, and civil defense (emergency medicine) teams while they were actively responding to emergencies. **This level of insecurity makes civilians hesitant to seek care and increases fear among health workers, who are working overtime to save lives.**

Key Updates

- Recent hostilities have caused **over 2,700 deaths, more than 8,300 injuries, and the displacement of over 1.2 million people.**
- Project HOPE is working to launch **Mass Casualty Management training** for health workers at 12 hospitals in at-risk locations.
- Project HOPE has activated **four mobile medical units**, which are now providing primary healthcare services to 14 shelters across 10 villages, including Halba in North Lebanon, Al-Akbiye and Toura in South Lebanon, and the Beirut/Mount Lebanon area.

According to the [World Health Organization](#), there have been 151 attacks on healthcare since March 2, 2026, resulting in 103 deaths and 238 injuries. In addition, three hospitals are completely closed, 16 hospitals have sustained partial damage, at least 41 primary health clinics have closed their doors, and other facilities are operating at reduced capacity. Project HOPE continues to call for a lasting ceasefire, but humanitarian needs are expected to remain critically high even in the event of de-escalation. The ripple effects of this humanitarian emergency will be felt for decades.

As displacement and insecurity worsens, Project HOPE knows that health threats will become more acute, and humanitarian needs will become even more urgent.



Project HOPE's CEO, Rabih Torbay, and members of our team in Lebanon meet with staff at a Lebanese Red Cross Center and Disaster Risk Reduction Unit in southern Lebanon to assess the community's most urgent needs. Photo by Ahmad Chihadeh for Project HOPE, 2026.

“We’ve developed urinary tract infections; we can’t drink enough water, we don’t have proper bathrooms, and we can barely change our clothes.”

— An anonymous internally displaced person in Lebanon

Project HOPE’s Response

Project HOPE continues to operate four mobile medical units (MMUs), which are increasing access to essential healthcare services in underserved areas. MMUs are providing care and conducting outreach sessions across 14 shelters and 10 villages, including Halba in North Lebanon; Al-Akbiye and Toura in South Lebanon; and the Beirut/Mount Lebanon area. Project HOPE’s MMU operations are adaptable, able to flex services and coverage as needed, and operate in coordination with local officials and partner NGOs. The team is committed to continuously assessing the most urgent health needs and displacement dynamics to ensure we have the greatest impact.

To date, Project HOPE’s MMUs have delivered 8,950 medical consultations to 3,611 individuals in underserved, conflict-affected areas, addressing critical gaps in access to primary healthcare services. Women account for 60% of patients. Most (52%) are adults between the ages of 18–59, 22% are adults older than 60, 19% are children between the ages of 5–17, and 7% are children younger than five. This distribution shows that MMU teams are covering a wide spectrum of patients. As such, Project HOPE’s teams provide a range of medical services, including chronic disease management, treatment of acute conditions, pediatric care, and preventative care. To date, most patients are Lebanese nationals, and the team has referred 150 people to higher levels of care to ensure adequate treatment and follow-up.

MMU teams have also conducted 63 outreach and awareness sessions, reaching 559 individuals with key health education messages on hygiene practices, disease prevention, and early health-seeking behavior. These sessions strengthen community awareness, promote healthier practices, and encourage timely utilization of health services, particularly in communities and shelter settings with limited access to reliable health information and overstretched services.

In partnership with the Public Health Emergency Operations Center (PHEOC) at the MoPH, Project HOPE is supporting the implementation of Mass Casualty Management (MCM) training in 12 public hospitals. These trainings aim to strengthen hospital preparedness for mass casualty incidents, which remains a critical national priority.

MCM training will include theoretical and practical drills on the following:

- Principles of MCM
- Hospital MCM plan development
- Triage systems and patient flow
- Roles and responsibilities of hospital teams
- Red and Green zone setup and management
- Simulation-based exercises

In addition, Project HOPE continues to work with the PHEOC to assess needs and identify critical gaps. **The following gaps persist:**

- Availability of essential medications and medical supplies/consumables for hospitals and primary health facilities
- Adequate additional deployment of MMUs to sustain services in shelters and high-displacement areas.

Across the region, Project HOPE is scaling up its field presence to support displaced individuals and host communities in vulnerable positions. The safety and well-being of Project HOPE's staff remains a top priority and operations are conducted under strict security protocols, with continuous monitoring of the security situation and implementation of appropriate risk mitigation measures to ensure staff can safely deliver critical assistance.

Project HOPE has extensive experience delivering lifesaving health and humanitarian assistance in complex emergencies and active conflict settings. In Lebanon, Project HOPE has maintained an established, long-term operational presence, working closely with the MoPH and national partners to strengthen primary health services, respond to public health emergencies, and support Lebanese and refugee populations. These relationships provide Project HOPE with the contextual knowledge, partnerships, and operational readiness needed to scale emergency health; mental health; and water, sanitation, and hygiene (WASH) interventions.

Project HOPE continues to act in coordination with partners in impacted areas to assess how and when we can best support the health and humanitarian needs of affected communities across the Middle East region, while remaining committed to the humanitarian principles of humanity, neutrality, impartiality, and independence.

“People don’t want to feel that they’re forgotten. That’s when they lose hope. Humanitarians must say: you still exist, we care, we want to help, and we are with you.”

— Rabih Torbay, Project HOPE CEO