

LEBANON

Health Emergency

Situation update #7
12 March 2026



Day 11 of escalation

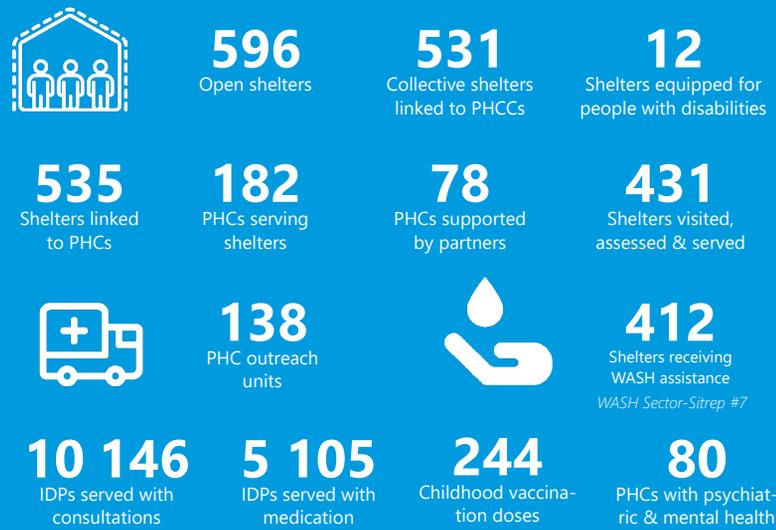
CASUALTIES MOPH on 12 March 2026



DISPLACEMENT DRM on 12 March 2026



PHC department - MOPH on 11 March 2026



Situation updates

Impact of ongoing airstrikes

- In the past 24 hours, multiple areas across the country have been affected by continued hostilities, resulting in casualties and significant damage to infrastructure.
- On 11 March, a strike hit the seafront area of Ramlet al-Baida in Beirut, where displaced families had been sheltering in tents along the Corniche, resulting in several civilian casualties.
- Overall, hostilities have intensified across several areas of Lebanon, reaching 1,623 (DRM, 12 March 2026).
- The impact is particularly severe in locations hosting displaced families, where repeated evacuation orders are forcing people to move again within short periods. Areas such as Haret Saida and Tyre (recently receiving displaced families) also came under new evacuation orders, forcing at least 570 people to leave a collective shelter and many residents to flee their homes. Some families reportedly spent the night in open areas due to the lack of shelter options.
- Evacuation orders have also expanded to hard-to-reach border villages, including Alma el Chaab and Rmeich, prompting further displacement, with roughly 250 displaced people from Rmeich relocating to Tyre. On 10 March, local authorities and UNIFIL coordinated evacuation convoys from Alma el Chaab, underscoring mounting concerns for civilians in high-risk border areas (OCHA Flash Update #6).

Casualties and injury overview

- MoPH reported a cumulative number of casualties since 2nd March has reached 2,461 including 687 deaths and 1,774 injuries as of 3:00pm on March 12, 2026. *Fig 1.*
- Out of the total injured, 51% (908) were treated at Emergency room as outpatient, 39% (693) admitted to regular wards and 10% (173) admitted to ICU.
- The majority of fatalities and injuries occurred in Nabatiyeh (697 injured, 289 deaths), followed by the South (631 injured, 235 deaths), and Mount Lebanon (233 injured, 59 deaths), Additional cases were reported across other governorates. *Fig 2.*
- Of the total casualties, 80% (1142 injured, 537 death) were male, and 20% (328 injured, 62 death) female, *Fig 3.*
- Of the total casualties, 16% are children (304 are injured and 98 are dead). *Fig 4.*
- Nationality data shows that 90% were Lebanese, 7% Syrian/Palestinian, and 3% from other nationalities, *Fig 5.*

Displaced people and shelters

- As of 12 March 2026, DRM reported a total of 822,600 self-registered displaced individuals, of whom 128,200 (33,200 families) are residing in 596 collective shelters across the country.
- The highest concentration of shelters is in Beirut and Mount Lebanon, with several facilities already overcrowded.

- Around 25 shelters with remaining capacity are currently available, mainly in Akkar and North governorates.
- Many displaced households are staying with host communities or in informal sites, unfinished buildings, public spaces, or vehicles. With cold weather and overcrowded conditions, needs for shelter, basic services, health care, and protection are increasing—particularly for vulnerable groups such as women, children, older persons, and persons with disabilities.

Impact on Health Services and Vulnerable Groups

- The ongoing conflict is placing significant strain on the already fragile health system and is increasingly affecting access to essential health services. The impact is being felt across multiple levels, including health care workers, health infrastructure, and the delivery of critical health services.
- Since 2 March 2026, 33 attacks on Emergency Medical Services (EMS) have been reported, resulting in 45 injuries and 18 deaths. These incidents also caused damage to 10 EMS centres and 11 ambulances.
- Health infrastructure has been further affected, with five hospitals forced to close (Bahman Hospital, Al-Sahel Hospital, Bint Jbeil Public Hospital, Mays al-Jabal Public Hospital, and Al-Burj Hospital), while four hospitals sustained partial damage (Hasbaya Hospital, Bahman Hospital, Jabal Amel Hospital, and Al-Najda Hospital).
- In addition, 45 primary health care centres (PHCs) across Lebanon have closed, further limiting access to essential health services.
- The crisis is disproportionately affecting vulnerable populations, including children, women, persons with disabilities, refugees, and migrant workers.
- Persons with disabilities face additional challenges in displacement settings, including limited accessibility, lack of adapted spaces, and reduced access to specialized health services needed.
- Access to essential health services is also being disrupted. Emergency obstetric and maternal care has been significantly affected, particularly for women on the move, including displaced Syrian women. Reports indicate that some women are delivering outside health facilities or arriving late to hospitals, increasing the risks of maternal and neonatal complications and mortality.

WHO response efforts

Enhancing health emergency preparedness and response capacities

- The Public Health Emergency Operations Center (PHEOC) has been reinforced to enhance the management and coordination of public health emergencies. This strengthened operation allows for rapid, organized action around the clock, ensuring critical incidents are addressed without delay. WHO has supported the expansion of the PHEOC core team by surging 12 new positions including data analyst to support the operations of the Command-and-Control Center. The full PHEOC structure will be composed of 18 members.

- To ensure real-time information sharing and data-driven decision-making, all collective shelters linked by the MoPH with PHCCs and supporting partners have now been connected to the [Health Sector portal](#).

Access to essential medicine and emergency medical supplies

- WHO supported the delivery of surgical trauma emergency kits to a frontline hospital to strengthen trauma care capacity and support the management of conflict-related injuries.
- A total of 4,244 Insulin Mixtard vials are being prepared for urgent delivery to the Ministry of Public Health (MoPH) Primary Health Care (PHC) Department to help ensure continued access to treatment for people living with diabetes.
- WHO is also preparing an order of essential Interagency Emergency Health Kit (IEHK), including:
 - o IEHK 2024 – Basic Equipment Units: 100
 - o IEHK 2024 – Supplementary Medicines (Controlled): 10 units
 - o IEHK 2024 – Supplementary Renewable Supplies: 10 units
 - o IEHK 2024 – Supplementary Equipment: 10 units
 - o First Aid Kits (Class A): 120 units
 - o Water purification tablets (NaDCC 167 mg, 400 tablets per box): 660 boxes
- In addition, 165 supplementary NCD medicine orders were delivered to referral PHC centres as of 12 March 2026 to support the continuity of care for patients with chronic conditions.

Strengthening integrated disease surveillance for effective public health response

- Support is being provided to the Epidemiologic Surveillance Unit (ESU) to enhance early warning systems, enabling prompt detection, investigation, and response to potential disease outbreaks. This aims to protect the health of displaced and affected populations. Ongoing support includes the surveillance call center-1787, while a training-of-trainers (ToT) program is underway to establish dedicated disease monitoring at the shelter level.

Ensuring scalable health care during health emergencies

- The WHO hospitalization network for life-saving and limb-saving care, supported by ECHO, has been expanded to include the management of war-related trauma among Syrian refugees and migrant workers. Coverage will be provided in any hospital delivering care to war casualties among these populations.

Strengthening continuity of care

- WHO is working closely with the MoPH PHC department to identify and address gaps in care at the shelter level and to support PHCs that do not receive partner assistance.

Priority activities

- Preposition Trauma and Surgical Emergency Kits at referral hospitals and trauma centers to support life-saving and limb-saving care for severe trauma and conflict-related injuries.
- Preposition essential medicines, including insulin, dialysis supplies, and other critical medical items, at frontline facilities to ensure timely emergency care.
- Identify and utilize alternative transport routes to mitigate shipment disruptions caused by ongoing hostilities.
- Strengthen referral hospital capacity and optimize referral pathways to ensure timely access to critical care.
- Ensure all hospitals treating war casualties can provide trauma care for Syrian refugees and migrant workers.
- Enhance disease surveillance and early warning systems through support to the ESU and implementation of shelter-level monitoring.
- Mobilize financial and operational resources to maintain health system functionality during the crisis.
- Strengthen coordination with national authorities and international partners to support an effective and integrated health sector response.



Calls on the MOPH hotline **1787** since 2 March 2026

Cumulative calls: **3,033**

- o 19% of the calls related to access to chronic medications
- o 16% of calls related to hospital referral/admission
- o 9% of the calls requesting info on MoPH/Hospital Coverage
- o 7% of the calls related to access to acute medications
- o 22% of the calls were received from Beirut, followed by 14% received from Aley District.

Calls received by National Lifeline: 1564 for emotional support, suicide prevention and telehealth:

Cumulative calls: **366** (Four psychiatric emergency dispatches were conducted)

Ministry of Public Health hotlines

- 1787 – Referral to hospitalization
- 1214 – Inquiries about cancer & other catastrophic diseases
- 1564 – Mental health support

Casualty segregation

Fig 1. Casualty Distributed by day

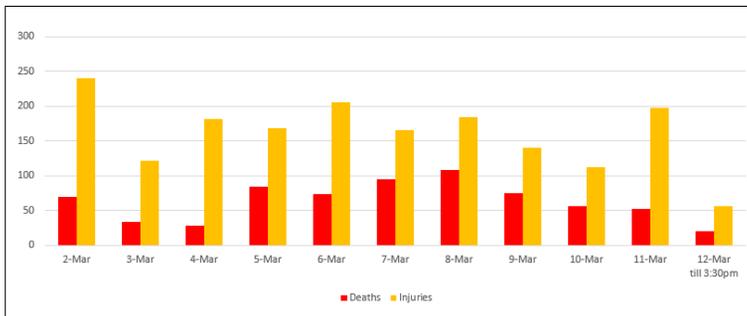


Fig 2. Casualty distributed by Governorates

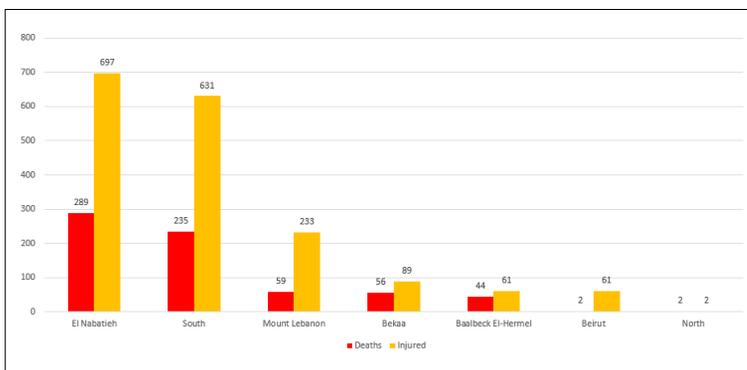


Fig 3. Distribution of Casualties by gender

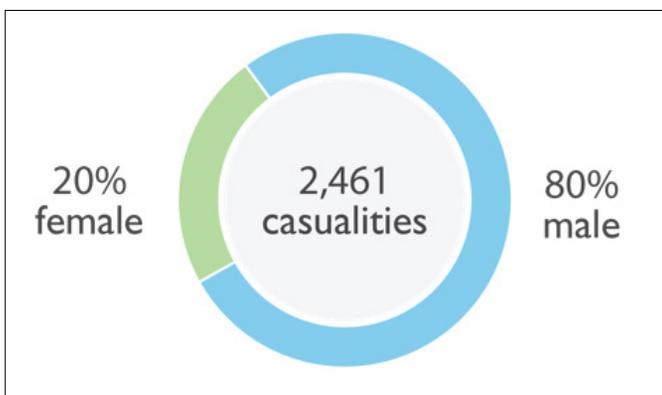


Fig 4. Distribution of casualties by age category

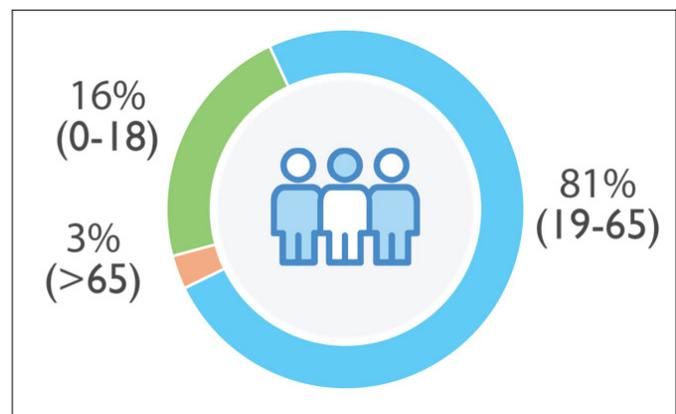


Fig 5. Casualty distributed by Nationality in Lebanon

