



Palestinian Refugees in Lebanon

In Their Own Voices: Living in Permanent Survival Mode



Anera Reports
on the ground in the Middle East

Volume 13 | Spring 2026

WAR HAS ACCELERATED DECLINING PROSPECTS

This report captures a critical inflection point for Palestinian refugees in Lebanon, where long-standing structural vulnerabilities have converged with the impact of the 2026 war. The conflict has not created these inequalities, but it has sharply exposed and intensified them, revealing how fragile existing systems had already become.

Even before the latest escalation, years of economic collapse and declining international funding had pushed many families into survival mode, as access to healthcare, education and livelihoods steadily eroded, while humanitarian institutions were forced to scale back services due to sustained funding shortfalls.

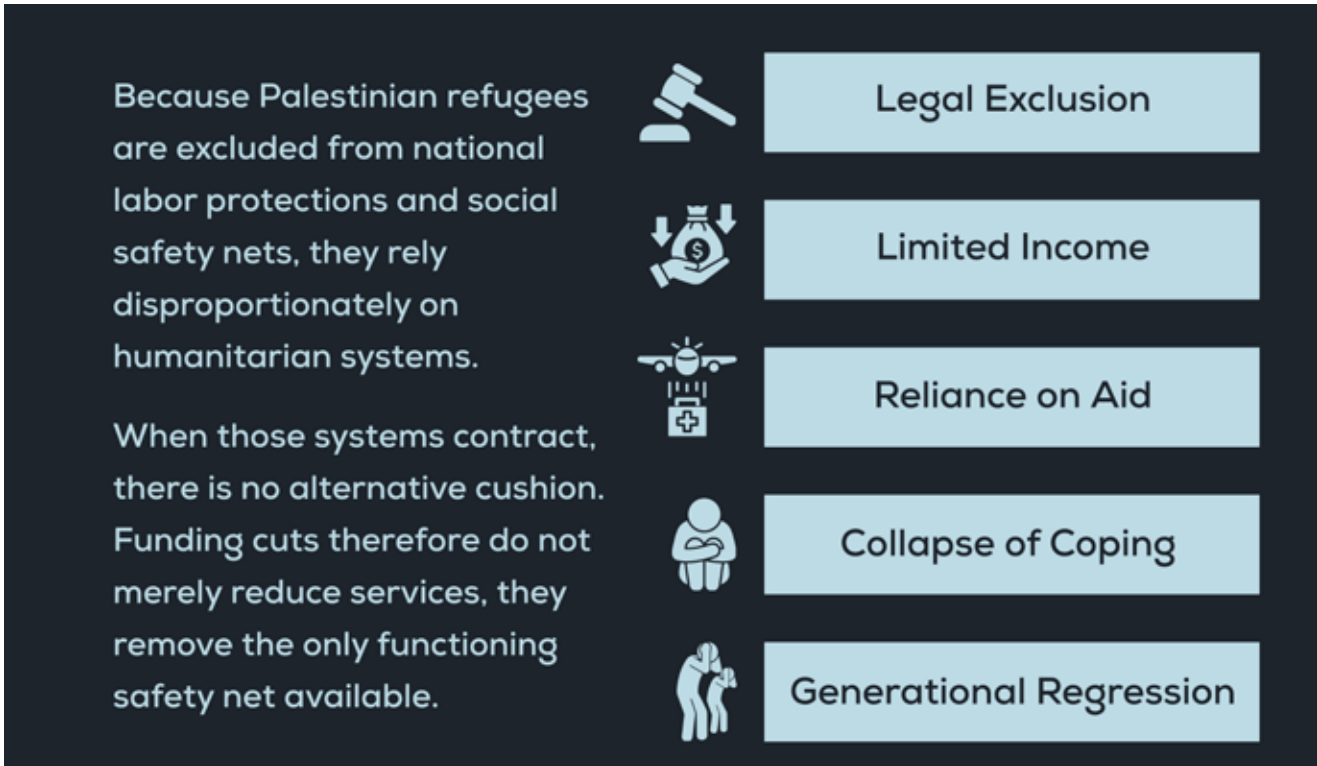
Anera conducted the research, data collection and roundtable consultations that inform this report just months before the escalation. While conditions have since deteriorated further, the findings remain highly relevant in documenting the shrinking support systems shaping how communities are experiencing the conflict's impact. **For Palestinian communities, largely excluded from national safety nets, there are no viable alternatives when aid contracts.**

In December 2025, Anera brought together 15 community-based and international organizations to examine how funding cuts were reshaping daily life in Palestinian communities. Participants described a humanitarian landscape in which needs were rising as resources declined, with Palestinian refugees among the hardest hit. They warned that **reduced support was accelerating deterioration across nearly every aspect of life faster than existing systems could respond.** The subsequent escalation of war has only intensified these pressures, adding new emergency demands and underscoring how little margin for shock remains.

Addressing this crisis requires more than data. It requires close attention to frontline perspectives in order to understand both immediate needs and longer-term consequences. Drawing on organizational perspectives and direct testimony, this report shows that essential **services have been reduced to a minimum, prevention and development programming has largely collapsed, and women and children are bearing a disproportionate share of the burden.**

Ultimately, what emerges is a reality that risks being overlooked: a long-standing lack of legal rights combined with the steady erosion of services and future prospects that the war has accelerated but did not begin. By bringing together the views and experiences of refugees and the organizations that serve them, this report offers a clearer understanding of the crisis and a call for renewed coordination and investment in Palestinians in Lebanon.

For 78 years, Palestinian refugees in Lebanon have lived without citizenship or full civil rights.



PALESTINIAN REFUGEES IN LEBANON

Lebanon hosts one of the highest refugee populations per capita in the world, including Palestinian and Syrian refugees alongside large numbers of migrant workers.

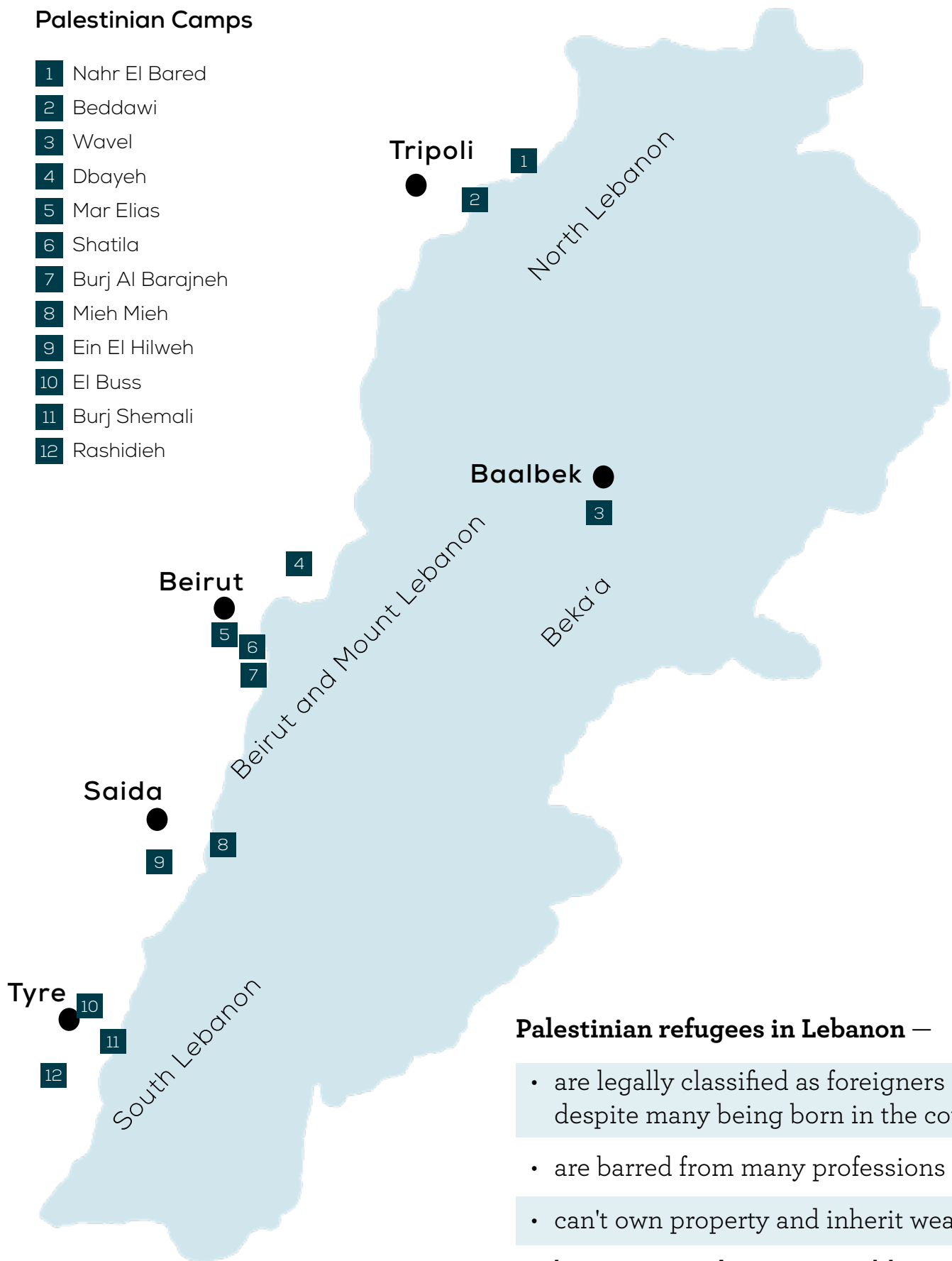
Palestinian refugees have lived in Lebanon since the 1948 Nakba (“catastrophe”), when an estimated 750,000 Palestinians were displaced from their homes in historic Palestine, including roughly 100,000 who sought refuge in Lebanon.¹ More than 78 years later, Palestinians in Lebanon remain without citizenship or full civil rights, living under a legal framework that severely restricts access to work, property ownership, public services and social protection.

Just under 500,000 Palestinians are officially registered with UNRWA in Lebanon.² However, current estimates suggest that only around 220,000 remain in the country, as many have emigrated in search of safety and opportunity.³ Those who remain live mostly in 12 official refugee camps and more than 150 informal gatherings, areas marked by chronic overcrowding and unsafe, unregulated housing.⁴ Infrastructure is deteriorating and access to water, sanitation, electricity and waste management services is limited. Residents also lack the legal leverage to ease their hardships without outside assistance.

222,000
Palestinians
 live in Lebanon today,
 including 27,000 who
 fled the war in Syria ¹⁶

Palestinian Camps

- 1 Nahr El Bared
- 2 Beddawi
- 3 Wavel
- 4 Dbayeh
- 5 Mar Elias
- 6 Shatila
- 7 Burj Al Barajneh
- 8 Mieh Mieh
- 9 Ein El Hilweh
- 10 El Buss
- 11 Burj Shemali
- 12 Rashidieh



Palestinian refugees in Lebanon —

- are legally classified as foreigners despite many being born in the country
- are barred from many professions
- can't own property and inherit wealth
- have restricted access to public healthcare, education and civil services

These long-standing constraints, compounded by Lebanon's economic collapse and sustained reductions in humanitarian funding, have pushed many Palestinian communities into what frontline organizations describe as **a state of permanent survival rather than recovery**. The outbreak of the 2026 war has intensified and accelerated this reality.

The Effects of War in Palestinian Communities


As Israeli military operations intensified in early March following the collapse of the 2024 ceasefire and the escalation of conflict with Iran, the 2026 war began affecting Palestinian camps and gatherings in Lebanon in highly specific ways. The heaviest impact has been concentrated in the south, where many camps and gatherings are located near areas most exposed to military activity. Camps around Tyre – including Rashidieh, Burj El Shemali and El Buss – have faced recurring insecurity, nearby strikes and periods of isolation. Major Palestinian camps elsewhere in Lebanon, including Burj Al Barajneh and Shatila in Beirut, also came under evacuation orders, disrupting every aspect of daily life and placing additional strain on already overstretched services.

Damage to major transport infrastructure, including bridges linking the south to the rest of the country, has further disrupted travel and supply routes, making it harder for residents to leave dangerous areas, reach hospitals, access markets or receive assistance. For Palestinian communities already living under prolonged precarity, the war has stripped away any sense of security.

Public services and humanitarian systems that were already under strain before the war are

HUMANITARIAN RESPONSE IN LEBANON STRUCTURE AND ACCESS


Aid access is often determined by status rather than need




Lebanese Citizens
STATE-LED MECHANISMS
ACCESS: Government/state-subsidized services and aid

DURING WAR:
Access to government schools for shelter

Registered Palestinian Refugees
PRIMARILY UNRWA
ACCESS: UNRWA services in health, education, and social relief



DURING WAR:
Use UNRWA schools for shelter rely on mutual aid and crowded camps



Syrian Refugees
UN-LED COORDINATION FRAMEWORKS
ACCESS: Coordinated aid through UN agencies and partners

DURING WAR:
Rely on continued UN programs and international aid

Legal categories hinder large-scale, need-based aid, leaving already vulnerable groups disproportionately affected by war.

OFFICIAL CAMPS

12 recognized camps

House 45% of the Palestinian refugee population

Established and formally recognized

VS

GATHERINGS

154 Palestinian areas

House 55% of the Palestinian refugee population

Generally located near the camps

Informal



Ein El Hilweh is the largest camp in Lebanon, with 65,000 residents. It is a concrete maze of buildings and narrow alleys.

now struggling to keep pace with rapidly growing needs. As resources become increasingly stretched, organizations that once had the capacity to address multiple challenges simultaneously are being forced to make difficult decisions about where to focus their support. This reality underscores the importance of coordinated humanitarian action involving both international and local actors. In Nahr El Bared camp, for example, the arrival of displaced families displaced by the war significantly increased demand for food assistance. In response, the locally based Women Palestinian Association, in partnership with Anera, helped provide food support to affected families during the crisis.

UNRWA schools, clinics and administrative operations have faced periodic disruption or suspension because of insecurity, reducing access to healthcare, education and social support precisely when needs are increasing. Overcrowding in shelters and private homes has created new protection risks, especially for women and girls, including lack of privacy and heightened exposure to harassment or domestic stress.

In practical terms, the war has transformed many Palestinian camps from already marginalized communities into crisis zones. What was previously chronic deprivation has become acute emergency: insecurity limits movement, displacement strains shelter capacity, lost livelihoods deepen poverty and weakened services leave families with fewer ways to cope.



In Lebanon, **Anera operates as part of broad humanitarian ecosystem**, working in close partnership with large institutional donors such as UN agencies, as well as local organizations deeply rooted in refugee communities where needs are immense. As Anera's largest funder in the country, **UNICEF has made transformative programs possible, but today's shrinking funding landscape is straining organizations of every size**, with the heaviest toll falling on the most vulnerable families in Palestinian refugee camps.

A HUMANITARIAN SYSTEM UNDER STRAIN

At the very moment Palestinian refugees in Lebanon most need international support, the humanitarian system meant to assist them is under severe strain. Funding from bilateral donors, pooled international mechanisms and multilateral institutions such as the United Nations and the World Bank has been declining over many years, alongside sustained cuts to UNRWA, the primary provider of education, health and social services for Palestinian refugees.

These reductions have unfolded against a backdrop of successive shocks: Lebanon's economic collapse beginning in 2019, the COVID-19 pandemic, and the wars of 2024 and 2026. Together, they have eroded already fragile coping systems and sharply increased humanitarian needs.

Today's service gaps did not begin with the latest war or funding cuts, a point that emerges clearly from the comments of participants in Anera's roundtable. **Structural weaknesses in key sectors such as health, education and protection have existed for years. What has changed is the speed and severity of deterioration.** Resources are shrinking just as conflict, displacement and insecurity are driving needs upward.

Cascade of Pressures

Anera's roundtable participants described mounting pressures across the system.

Skilled staff are leaving because salaries can no longer be sustained, weakening already overstretched services.

School dropout rates are rising as families struggle with transportation costs, child labor pressures and displacement.⁵ Early childhood services are contracting at the same time household stress and overcrowding are increasing risks, including gender-based violence.



Batoul, 25, from Mieh Mieh Camp

“ We moved from Mieh Mieh camp to Beddawi [camp] because the [air] strikes were all around us, and the sounds were terrifying for the children, and for me too. My husband is a daily worker, but since we were displaced he has barely earned anything. We have two children and another on the way, and we can no longer afford milk formula, so we buy generic milk instead. We are staying in my parents' two-bedroom apartment, with nine people in total. It's very crowded. My father is retired, but now sells oranges and carrots on the street to help us get by. I am almost six months pregnant and still haven't seen a doctor. I don't know if the baby is okay. With my first two pregnancies, everything was smooth, but this time the stress and loud strikes have caused painful contractions for months. I'm still trying to find a clinic that offers free check-ups.

Longstanding legal restrictions on Palestinian employment continue to undermine household stability and economic independence. Without access to stable livelihoods, many families remain heavily dependent on shrinking humanitarian assistance.

Coordination among service providers has also weakened. Reduced collaboration and data-sharing are limiting the ability to target scarce resources effectively.

Participants stressed that pressures in one sector increasingly spill into others. The crisis can no longer be understood in separate sectors. It is interconnected and mutually reinforcing. **When incomes collapse, children leave school. When services close, protection risks rise. When insecurity restricts movement, access to healthcare declines.**

A Way Forward

Roundtable participants outlined a response centered on collective action. They called for renewed donor commitment; stronger coordination among UNRWA, non-governmental organizations and Lebanese institutions; and expanded consortium-based approaches to maximize limited resources.

They also emphasized the urgency of supporting community-led initiatives, integrating mental health and psychosocial services across sectors, and advancing Palestinian labor rights to reduce long-term dependency.

Their central message was clear: funding cuts are not abstract budget adjustments. They are reshaping daily life and weakening the systems that sustain health,



Shatila camp, in Beirut | Playing soccer on a field Anera rehabilitated.

5 Key Insights

from Anera's roundtable with 15 frontline community-based organizations

- 1. Essential services are contracting fast.** Healthcare, education, cash assistance and protection programs are being reduced simultaneously, leaving critical gaps.
- 2. Development programs are disappearing.** Livelihoods, vocational training and early childhood initiatives are getting cut, eroding long-term resilience.
- 3. Vulnerability is compounding.** Funding losses are intensifying pre-existing risks for children, women, older persons and people with disabilities.
- 4. Humanitarian systems are strained.** Staff attrition, rising costs and reduced coordination are weakening service quality and reach.
- 5. Communities are shifting from coping to crisis.** Families report selling assets, withdrawing children from school and foregoing medical care to survive.

education, protection and dignity. Palestinian refugees in Lebanon are not facing a temporary shock, but a prolonged erosion of rights, services and future prospects.

This report therefore focuses on healthcare, paths to livelihoods and the welfare of women and girls: three areas most affected by shrinking resources and now further strained by the effects of war. **Without immediate donor re-engagement, renewed investment in essential services and a shift toward longer-term solutions, the current trajectory risks causing irreversible harm to an entire generation.**

LIMITED HEALTHCARE

The recent escalation of war has further weakened an already strained healthcare system for Palestinian refugees in Lebanon, turning long-standing service gaps into life-threatening barriers. Chronic underfunding has left the system under severe pressure, and it is now compounded by displacement and disrupted infrastructure.

Precarious Access

For refugees who already depended on limited and overstretched services, access to care has become more unpredictable and costly or, in many cases, out of reach altogether. Disruptions to transport, damage to facilities and breakdowns in supply chains have created compounding impacts across all levels of care, while mental health needs have surged amid ongoing trauma and uncertainty.



Maram from Beddawi Camp

“ My family has lived in Beddawi for more than 40 years. Recently, everything has become harder. After my father died, we relied on food assistance to buy basic necessities. This year, that support was reduced to ration boxes, which are not enough to meet our needs. We haven't received any financial support [from UNRWA] for months, and our living conditions have gotten worse.

The stress has deeply affected my mother. She rarely leaves the house now, and she has stopped taking the medicines she needs because she can't access or afford them. She tells me she feels overwhelmed and exhausted, that life no longer feels bearable... We're being pushed beyond what we can endure.

Healthcare access for Palestinian refugees in Lebanon depends largely on two providers: UNRWA, which delivers primary healthcare through its network of health centers, and the Palestinian Red Crescent Society (PRCS), which provides secondary care, including hospitalization and specialized services. However, years of chronic underfunding have severely weakened both systems. Between 2018 and 2024, UNRWA's health budget was reduced by approximately 30%,⁶ limiting its ability to meet even basic healthcare needs, while conflict-related insecurity and damage from military attacks have disrupted access to clinics, referrals, medicine supply chains and emergency services. At the same time, PRCS has faced funding cuts from both the Palestinian Authority and UNRWA, further straining its capacity to maintain essential services. Delays of up to three months in staff salary payments have compounded these challenges, placing additional pressure on an already overstretched healthcare system serving Palestinian refugees.

More than 160,000 Palestinian refugees rely on 27 UNRWA primary healthcare centers.⁷ **Doctors in those facilities see approximately 100 patients per day,** leading to long waits and rushed consultations.⁸

A Dearth of Medicines and Specialized Care

The shortage of essential medications in Lebanon has become increasingly acute, particularly for patients with chronic illnesses. The World Health Organization (WHO) has warned that medicines such as insulin are running short,⁹ with supply chain disruptions and the closure of the Strait of Hormuz driving up import costs. The WHO and Lebanon's Ministry of Health are redistributing supplies among hospitals, while cautioning that the national health system is under extreme strain.

These pressures are especially severe for Palestinian refugees, around 30% of whom live with at least one non-communicable disease such as diabetes, hypertension or cardiovascular conditions.¹⁰ Many patients go weeks or months without prescribed medications because stocks are unavailable, forcing them to purchase costly drugs out-of-pocket, self-medicate or abandon treatment altogether.

Access to most specialized healthcare remains financially out of reach for many Palestinian refugees in Lebanon, while funding shortages continue to constrain the availability of essential services. Preventive and maternal health services have also declined, with reduced access to antenatal care, cancer screenings and other critical forms of early detection and treatment.

Mental Health

Mental health needs are similarly dire. Few refugees experiencing psychological distress have access to mental health services.¹¹ Displacement, poverty and repeated collective traumas have created widespread unmet needs, compounded by a shortage of trained specialists and underfunded programs. Mental health is a cross-cutting crisis that, if left unaddressed, will undermine education, livelihoods and social cohesion for years to come.

Coping Strategies

Families are increasingly forced to rely on a range of coping strategies to meet basic health needs, including borrowing money from relatives or community networks, delaying treatment, purchasing lower-cost or lower-quality medicines and turning to traditional remedies when formal care is unaffordable or inaccessible. These fragile coping mechanisms have been undermined by the instability and unpredictability created by the war, which has disrupted incomes, movement and access to services. The result is a widening gap between urgent health needs and the ability to meet them, underscoring the need for an equitable healthcare system that serves all populations affected by the crisis.

Drugs in the Camps

The growing presence of drug traffickers in some camps has created serious risks for residents, including shootings, injuries, fatalities and restrictions on movement, particularly after dark. Community protests have reportedly called for those responsible to be removed. At the same time, the increasing availability of drugs has fueled rising substance abuse among Palestinian youth. For many young people facing severe poverty, unemployment and prolonged uncertainty, drug use has become an accessible coping mechanism—deepening long-term social, health and protection risks within already vulnerable communities.¹⁷

“ Funding cuts across the humanitarian sector, particularly the chronic underfunding of UNRWA health services, have severely disrupted care for Palestinian refugees. Access to primary healthcare, medications, specialists and hospital coverage has become increasingly limited, leaving many patients without reliable treatment. The crisis is especially acute for dialysis patients, whose treatment is not covered by UNRWA, placing most of the burden on the Palestine Red Crescent Society, which is itself under severe financial and operational strain while also responding to the growing needs of internally displaced people affected by the latest conflict.



Anera equips refugee youth with marketable skills they can legally use in Lebanon. After training in construction and electrical maintenance, these graduates put their skills to work rehabilitating a staircase in Burj El Barajneh camp.

BARRIERS TO EMPLOYMENT

Even before the renewed outbreak of war in 2026, Palestinian communities in Lebanon were living under conditions of structural exclusion and chronic economic insecurity. Those long-standing vulnerabilities have now been sharply intensified. Displacement, disrupted markets and rising living costs have further weakened income sources that were already informal, unstable and insufficient, pushing many Palestinian refugee families deeper into crisis.

At the same time, years of funding shortfalls have eroded key pathways to self-reliance: UNRWA has reduced services and staffing, including class mergers and teacher layoffs. Vocational training and youth employment opportunities also remain far below demand. UNRWA operates only one technical training center in the country, unable to meet the needs of large numbers of young people seeking skills and work opportunities.

Banned Professions ¹⁸

Medical and Health Sciences

Doctors, dentists, pharmacists, nurses, and physiotherapists (require syndicate membership)

Legal and Advisory

Lawyers and legal consultants

Engineering and Technical

Engineers and related technical professions

Education and Public Sector

Teaching in public schools, working in government hospitals, and employment within state public services

Media and Specialized Roles

Editor-in-chief of newspapers

Regulated Trade

Real estate and other jobs managed by professional orders, which typically require Lebanese citizenship



Asmaa from Ein El Hilweh Camp

“ I am a mother of four living in Ein El Hilweh. I alone carry the full responsibility of providing for my children. We used to receive a cash assistance payment [from UNRWA] every three months. It was modest, but it helped me buy medicines for my child who's chronically ill. For the past four months, that support has stopped.

Since then, I've had to borrow about \$500 just to cover basic needs. Prices keep rising, and medicine is expensive and sometimes impossible to find. I worry constantly about how I will care for my children.

What hurts most is seeing how our community has changed. Families used to help one another, but now everyone is struggling. I worry about the future and whether support will ever return. We urgently need funding restored so families like mine can survive.

An Unfair Job Market Made Worse by War

Palestinian refugees in Lebanon have long faced major barriers to employment and economic self-reliance. Legal restrictions exclude them from scores of professions and prevent access to professional syndicates and unions, leaving most concentrated in low-wage, insecure and informal work such as construction, agriculture, retail and daily labor. Even before the current conflict, the economic collapse that began in 2019 had drastically reduced already limited job opportunities and eroded wages. Those able to find work were rarely protected by contracts, benefits or labor safeguards, leaving them highly vulnerable to exploitation and sudden income loss.

The 2026 war has deepened these structural challenges by cutting off many of the livelihoods that families depended on to survive. In southern camps and gatherings, daily wage labor and informal work opportunities have sharply declined, while seasonal agricultural employment, an important source of income for many residents, has been disrupted by restricted access and damage to farmland as well as insecurity on rural roads. Small trade, transport work and casual labor have likewise slowed or stopped. Because many households already lived with little savings and high debt, even short interruptions in income have had immediate consequences for food security, rent payments and basic household expenses.

At the same time, the cost of living has risen inside camps and surrounding communities. Disrupted supply chains and transport restrictions have increased the price of food, fuel and other essentials, particularly in harder-to-reach southern areas. Families hosting displaced relatives face even greater strain, stretching already scarce resources across larger households. **In many homes, one modest income may now support several generations or multiple displaced families.**

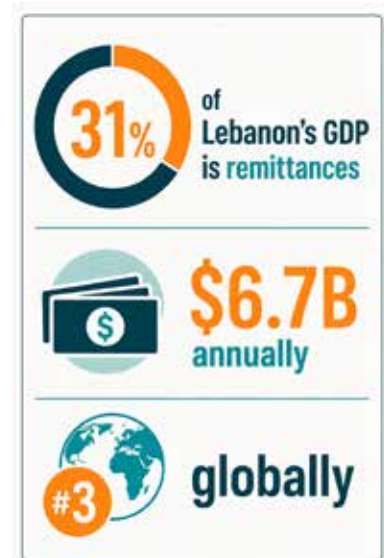
Education's Promise is Shrinking

Access to education and skills pathways that could improve long-term economic prospects is also narrowing. While UNRWA secondary education remains an essential lifeline, university study, vocational training and professional development opportunities are often out of reach because of cost, mobility barriers and legal restrictions. Recent funding cuts have further suspended vocational programs, livelihood initiatives, microfinance schemes and scholarships, closing off vital routes to self-reliance and increasing dependence on aid.

Reductions in support have also disrupted UNICEF-funded programming for Palestinians, including learning support, youth initiatives, early childhood education and child protection services. As these opportunities disappear, so too do prospects for economic independence. Lebanon now risks a deepening brain drain among Palestinian youth, many of whom are educated and capable but see few viable paths to a professional future. Some are compelled to accept unskilled or precarious work far below their qualifications, while others view emigration as their only realistic way forward. For many, repeated exclusion fosters disillusionment and long-term disengagement from formal economic life.

Coping Strategies

In response, refugee families continue to rely on a range of coping strategies: informal labor, small-scale entrepreneurship and remittances (money from family or community outside of Lebanon). These measures may provide temporary relief, but they cannot substitute for structural opportunity. Without legal reform, restored investment in education and livelihoods, and sustained economic support, Palestinian refugees in Lebanon will remain trapped in deepening poverty and long-term aid dependency.



Abdo, an Anera volunteer in Beddawi Camp

“ In Lebanon, Palestinian families rely almost entirely on UNRWA for basic support, but funding cuts have hit everyone I know.

Assistance for children was paused for months and now only covers younger ages, leaving many high school and vocational education students without help. UNRWA provides medications for my mother-in-law and father-in-law, who both have chronic conditions. They used to supply them with all the meds they needed for each month. Now, they're only providing quantities for 10 days at a time.



Rowayda, worker at a local organization, Beddawi Camp

“ Everyone in the Palestinian community is struggling with the displacement, especially women and mothers. And they don't always feel comfortable sharing their needs. At one of the meal distributions, I talked with a woman who had been displaced and who spoke about her needs and struggles. She mentioned that she had to use pieces of cloth instead of [menstrual] pads. They were already having trouble making ends meet before the war, and now the displacement has made it even worse. They have to spend the little money they have on the most basic and essential of needs.

WOMEN AND CHILDREN: UNIQUE VULNERABILITIES

Women and children are disproportionately affected by the multiple crises facing Palestinian refugees in Lebanon. Conflict, poverty, displacement and systemic exclusion intersect to limit their access to education, healthcare and protection. The latest war in Lebanon has further heightened these risks by increasing displacement, family separation, psychological distress and exposure to violence, while reducing already limited protection services.

Gendered Impact of Poverty and Conflict

Conflict and displacement deepen pre-existing gender inequalities and, since the recent outbreak of war, the economic vulnerability of women and girls has significantly worsened.¹² Growing hardship is pushing more families toward harmful coping strategies, including early marriage, often seen as a way to reduce household costs or provide perceived protection for girls. At the same time, women and girls are carrying an even greater burden of care, as they support injured and sick family members, care for children and manage scarce resources, often at the expense of their own self care.



Period poverty has also intensified, forcing women and adolescent girls to rely on unsafe alternatives or to miss school and work entirely. In overcrowded displacement settings with limited resources, risks to safety and exposure to gender-based violence have increased, while access to protection services has diminished. Together, these pressures are driving higher rates of school dropout among girls and deepening long-term economic hardship, undermining both immediate well-being and future prospects for gender equality.¹³

Protection Risks

The erosion of social safety nets has coincided with rising domestic and gender-based violence. Mass displacement since the war began only increases the risks. In shelters or other situations of displacement, women are exposed to harassment, violence and exploitation, particularly in overcrowded settings where privacy is limited and basic protections are strained. Many cases go unreported due to stigma, fear and the absence of safe referral pathways. Women and girls lack safe spaces and psychosocial support, while economic pressures have intensified household tensions, a formula that leaves women and children particularly vulnerable. Restrictions on movement and reduced access to services further isolate survivors, even as risks increase, compounding both immediate danger and long-term harm.¹⁴

Children's Well-being

According to UNICEF, the 2026 war in Lebanon has affected nearly every aspect of children's lives, with marked declines in mental health, nutrition and education even after the ceasefire.¹⁵ These setbacks come on top of a situation where children's physical and mental well-being was already compromised and often deprioritized as families struggled to meet basic survival needs. Rates of malnutrition, anemia and stunting are rising, while declining school attendance, particularly among adolescents, is narrowing future opportunities. At the same time, psychosocial support remains limited, leaving many children without the resources to cope with the trauma and anxiety associated with overcrowded living conditions and prolonged uncertainty.

Coping Strategies

Women and children in Lebanon's Palestinian communities have long had to rely on fragile strategies to survive, but the outbreak of war has placed these coping mechanisms under even greater strain.

Women often turn to informal income-generating activities such as sewing, cooking or caregiving, yet these earnings are rarely enough to meet basic household needs. In many cases, mothers reduce their own food intake so that children can eat. At the same time, children are increasingly pushed into work to help support their families, exposing them to exploitation and disrupting their education. Despite these mounting pressures, community solidarity remains a critical source of strength, with women's committees and grassroots initiatives stepping in where possible to fill urgent gaps.

Women's burden of care has grown amidst war, as they look after vulnerable family members and manage scarce resources, often at the expense of their own self care.

THE IMPACT OF FUNDING CUTS

Across all sectors, funding cuts have shifted programming from development and prevention toward emergency survival. Participants in Anera roundtables emphasized that services aimed at building resilience, such as youth engagement, vocational training, early childhood education and community-based protection, have been scaled back or even eliminated. At the same time, emergency needs stemming from the latest war have forced humanitarian actors to redirect scarce resources toward immediate crisis response, leaving even fewer resources for long-term support to Palestinian refugees.

Organizations are increasingly forced to prioritize immediate life-saving assistance while long-term needs accumulate. Weak coordination, reduced geographic coverage, staff attrition and rising costs further undermine service quality and sustainability, deepening dependency and frustration within communities.

What distinguishes this moment from previous funding contractions is the scale and the simultaneity. **Health, education, cash assistance and protection systems are contracting at the same time, leaving families with no sectoral fallback.**

When hospital referrals shrink, when scholarships disappear, when early childhood programs close and when livelihood training is suspended simultaneously, the disadvantages Palestinian communities in Lebanon face grow exponentially.

The erosion is cumulative and accelerating.

Ahmad from Rashidieh Camp



“ The funding cuts have changed my family's life dramatically. My wife is very ill and can't move. We used to rely heavily on services [from UNRWA] that helped us get the basics. Also, in the past, most of our hospital costs were covered by UNRWA, sometimes up to 90%. Now only about half is covered, and that difference is more than we can manage.

Families caring for people with disabilities or serious illness are suffering the most [in the Palestinian camps]. Local organizations do their best to help, and we are grateful, but they cannot replace international support... Without restored funding and services, the weakest among us will not be able to cope.

How Funding Cuts Have Affected UNICEF

By Nazih Yacoub, Palestinian Programme Manager at UNICEF Lebanon

Over the past two years, all interventions under the UNICEF Palestinian Program have been impacted by funding cuts. No sector has been left untouched. The most significant disruption followed a major donor's shift in priorities toward strictly defined "lifesaving" interventions.

At the start of 2025, we had to review all agreements with partners. Activities across child protection, education, WASH, and youth were either suspended pending review or significantly reduced. The resulting gaps could not be filled.

Two areas were particularly affected due to high dependence on a single donor: education and youth programming. Learning support in education, for example, which was previously fully funded, was severely impacted. As a result, we had to discontinue shadow teachers in UNRWA schools and maintain only limited NGO support. We also had to reduce youth programming through stricter selection criteria and lower seed funding. Early childhood education was also cut by approximately 50%.

Across all sectors, partners adapted by merging roles, reducing salaries, and lowering the number of beneficiaries reached. While no program stopped entirely, all were reduced in scale. Waiting lists, especially in early childhood education, have grown significantly.

The main funding stream for the UNICEF Palestinian Program is now focused almost exclusively on "lifesaving" interventions, with very limited flexibility for other sectors.

In response, we prioritized rather than eliminated programs. Measures included merging positions, increasing class sizes, and adjusting staffing structures. Some NGOs reduced salaries to retain staff. Despite these efforts, overall coverage has declined, and vulnerability-based targeting has become more stringent.

UNICEF is working to diversify its funding base. New contributions are emerging from donors such as FCDO, Monaco, Sweden and Denmark; however, these remain insufficient. **We are also advocating for more flexible, unearmarked funding to allow better adaptation to evolving needs.**

Competition for scarce humanitarian funding continues to intensify, while many local partners remain dependent on UN agencies due to limited fundraising capacity. This dependence is increasingly unsustainable.

Looking ahead, the program's priorities are clear: early childhood education first, followed by child protection (including gender-based violence), and then youth programming.

Coordination remains a key gap. While sectoral structures

exist, weak alignment can lead to duplication, inconsistent quality and uneven implementation. Strengthening coordination and referral systems is essential under current constraints.

Overall, we are operating in an environment of shrinking resources, rising needs, and increasing restrictions. All programs continue, but at a reduced scale, and difficult trade-offs have become the norm.



UNICEF has long been Anera's largest and most consistent partner in Lebanon, playing a central role in sustaining vital services for Palestinian refugees amid deepening crises. UNICEF-supported programming has reached hundreds of thousands of children, adolescents and families across the country.

Their continued engagement is critical to maintaining a baseline of services in vulnerable communities and enabling local partners like Anera to respond.

How Funding Cuts Have Affected UNRWA

By Oliver Bridge, Deputy Director of program at UNRWA Lebanon

UNRWA services have been impacted broadly as the agency has faced major funding constraints and increasing vulnerability to the security environment. Education services in Lebanon have been particularly impacted. **In Lebanon specifically, multiple overlapping crises have compounded the impact on education, with long-term consequences for Palestinian learning outcomes.**

Another major challenge has been cash assistance. **Overall levels of cash support have declined, and we are seeing a donor shift toward in-kind assistance,** which is concerning as it moves away from established best practice. While social safety nets remain important, what is increasingly missing is investment in broader livelihoods programming that can help families move beyond dependency. This area receives less attention because it is not classified as emergency assistance.

Health and hospital support is also under pressure, with

rising costs (particularly increased hospitalization tariffs in Lebanon) driving higher funding requirements without corresponding increases in support.

In terms of impact on vulnerable groups, including women, girls and persons with disabilities, we are seeing clear effects. The main challenge is ensuring that assistance is more precisely targeted. We previously had a dedicated cash program for vulnerable groups, but funding for 2026 under the emergency appeal has not been secured, so we are struggling to maintain direct cash assistance to people in need.

Recent internal decisions will further affect service delivery. **Beginning in February 2026, UNRWA reduced the working week and adjusted salaries in response to a global funding gap of approximately \$220 million. These measures are inevitably affecting services on the ground.**

The most important message in Lebanon is reaffirming UNRWA's centrality. **Unlike other contexts, Palestinians in Lebanon**

have no meaningful alternatives to UNRWA services due to exclusion from national systems. This makes UNRWA not just important, but essential to basic wellbeing and stability for refugees and staff alike.

In education, collaboration with the Lebanese Ministry of Education is strong but constrained by limited resources on both sides. Expanding cooperation remains important, though funding gaps are the main barrier. **Early childhood education is a key concern.** Many children enter Grade 1 without prior kindergarten experience, placing Palestinian students at a disadvantage compared to Lebanese peers. This is a structural issue that needs attention.

On women's protection, our teams are heavily affected by funding shortages, and we increasingly rely on external service providers to fill gaps where possible.

Overall, the system is under severe financial pressure, and while coordination and partnerships remain strong in intent, the constraints on resources are now the defining factor shaping both scope and quality of services.

UNRWA is the primary service provider for Palestinian refugees in Lebanon. Its programming in education, health and cash assistance is critical in a context where refugees have limited or no access to national public services. Despite severe funding pressures, UNRWA continues to be central to maintaining basic services and supporting the wellbeing of Palestine refugees. Coordination with partners like Anera remains essential to meeting urgent needs on the ground.





“ My daughter, her two young children and I came here to Beddawi camp where my other daughter lives. We’re from Saida, but we left when there were airstrikes near our house. We are nine people now crammed into small two-bedroom apartment.

— 73-year-old Fatima, a widow (pictured with her grandchildren in Beddawi camp)

A CALL TO ACTION

The evidence is clear: Palestinian refugees in Lebanon are facing a deepening, protracted crisis that threatens not only immediate survival but the future of an entire generation. Essential services are deteriorating, economic opportunities remain out of reach, and women and children are bearing a disproportionate share of the burden. In this context, further funding cuts will have potentially irreversible consequences.

Donor engagement must move beyond broad calls to "restore funding" and focus on protecting essential services amid shifting global priorities and competing emergencies. Health, education, protection and livelihoods programs cannot be allowed to shrink further. Reductions in education, vocational training, psychosocial support and protection services will deepen long-term harm, entrench dependency and undermine pathways to recovery.

What is needed is a dual commitment: sustaining life-saving humanitarian assistance while preserving the foundations of resilience. This means maintaining essential services despite funding pressures and protecting programs that support children's education, youth opportunity, women's economic participation and psychosocial well-being. These are not optional development initiatives; they are critical safeguards against permanent decline.

A rights-based approach is equally important. Legal barriers that prevent Palestinian refugees from accessing dignified work must be addressed, while coordination among UNRWA, NGOs and international partners should be strengthened to reduce duplication and maximize scarce resources. In a context of scarcity, fragmentation comes at a high cost.

Without decisive, coordinated action, Palestinian refugees in Lebanon will remain trapped in a cycle of survival. The warning signs are already evident: rising poverty, growing food insecurity, increasing school dropout rates, worsening health outcomes and heightened protection risks. The longer these trends persist, the harder they will be to reverse.

The window to prevent long-term systemic decline is narrowing. Preserving dignity requires more than emergency aid—it requires sustained investment in the systems that make recovery possible.

The time to act is now.

Acknowledgements

Writing and editing contributors: Farah Maalouf, Nicole Hansen, Liz Demarest

We thank these organizations that participated in Anera's stakeholder roundtable discussions:

Ahlam Lajea Association	PRCSL	ULYP
ARCPA/ AL-JANA	Shifaa	Unite Lebanon Youth Project
Association Najdeh	Social Support Society	UNRWA
Maan	Taawon (Welfare Association)	Women's Programs Association
Mousawat	The Popular Aid for Relief and Development	

NOTE: AI tools were used in editing and crafting some of the narrative language, using Anera's research and the findings from roundtable discussions.

DISCLAIMER: The facts, data and interviews presented in this report were accurate at the original time of writing. Given the rapidly evolving context, some information may have changed since publication, and certain figures or findings may no longer fully reflect current conditions.

Endnotes

- 1 [Conflicted presence: The many arrivals of Palestinians in Lebanon](#) | Oxford Academic
- 2 unrwa.org/where-we-work/lebanon
- 3 [ibid.](#)
- 4 [Detailed Report of the Population and Housing Census in the Palestinian Camps and Gatherings in Lebanon](#) | Lebanese Palestinian Dialog Committee
- 5 [Socioeconomic Survey of Palestine Refugees in Lebanon 2023](#) | UNRWA
- 6 [UNRWA Faces Greatest Financial Crisis in its History Following 2018 Funding Cuts](#) | UNRWA
- 7 unrwa.org/where-we-work/lebanon
- 8 unrwa.org/activity/health-lebanon
- 9 [Lebanon's hospitals may run out of vital medical supplies within days says WHO](#) | Reuters
- 10 [Socioeconomic Survey of Palestine Refugees in Lebanon 2023](#) | UNRWA
- 11 [Silent Struggles, Mental Health Realities in Palestinian Refugee Camps in Lebanon](#) | UNICEF
- 12 ['It feels like the whole world is complicit': What displacement feels like for women in Lebanon conflict](#) | UN Women
- 13 [Period Poverty in Lebanon](#) | Anera
- 14 ['It feels like the whole world is complicit'](#) | UN Women
- 15 [Decline in children's mental health, nutrition and education after the war in Lebanon](#) | UNICEF
- 16 unrwa.org/where-we-work/lebanon
- 17 [Arrest of One of the Most Dangerous Wanted Individuals at the Entrance of Shatila Camp – Beirut as Part of Combating Drug Trafficking](#) | Lebanese Army
- 18 [Country policy and information note: Palestinians in Lebanon](#), March 2024 | Gov.UK
- 19 [Lebanon received \\$6.7 billion in remittances in 2023](#) | World Bank

Anera's Work with Palestinian Refugees in Lebanon

Anera delivers integrated programs that strengthen health, protection, education and livelihoods for Palestinian refugees across camps and gatherings in Lebanon, combining immediate relief with long-term capacity building and locally led partnerships.



Rashidieh camp

Health

Anera delivers water, sanitation, hygiene, health and nutrition programs in camps across the country. Initiatives include setting the first tailored standards for community centers, training educators and NGO staff, developing age-specific curricula and distributing thousands of hygiene kits. Anera also supports patients by delivering medicine treatments, available free of charge, to local health facilities.

Dialysis care has long been an emphasis in Anera's health programming. We are, for instance, currently renovating the dialysis unit at a hospital in Beddawi camp.

Graduates of Anera's vocational training classes support health centers by making upgrades like adding solar power.



Burj Al Barajneh camp

Education & Livelihoods

Through training, scholarships, mentorship and small-business support, Anera equips women and youth with market-relevant skills and pathways to employment. Programs emphasize income generation and long-term resilience within the legal constraints that limit Palestinian access to many professions.

For instance, Anera is funding nursing scholarships for Palestinian students. This is one of the few licensed professions open to them.

Complementary initiatives, such as rooftop gardening projects, help vulnerable families improve food security, supplement income and build self-reliance.



Nahr El Bared camp

Women & Girls

Anera prioritizes protection, education, nutrition and psychosocial care for women and girls, pairing immediate support with long-term opportunity.

Anera's girl-centered program SAWA supports adolescent girls, ages 13-17, through structured education support, life-skills sessions, psychosocial care and referrals to specialized services. The program trains teachers, engages caregivers and coordinates with community leaders to strengthen protective environments and reduce dropout rates and gender-based violence.

Integral to our work with women and girls is providing menstrual hygiene kits and awareness sessions.



Anera has supported Palestinian refugees in Lebanon for more than 50 years.

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ABOUT ANERA'S ON-THE-GROUND SERIES

The Anera on-the-ground series is designed to add a humanitarian voice to the story of life in the Middle East. With data from Anera's professional staff, people who live and work in the communities they serve, and with over 50 years of experience in the region, Anera has a unique opportunity to build a fuller understanding of what life is like for families struggling to survive within an atmosphere of severe political strife and daily turmoil.

This report is the first in a four-part series examining the evolving challenges confronting Palestinian refugees across the Levant. Subsequent reports will focus on conditions in Jordan, Syria and Egypt, offering a comparative perspective on the social, economic and humanitarian pressures facing refugee communities throughout the region.