



LEBANON POLICY PAPER

Uncounted

How Lebanon's Invisible Disability Data Gap Has a Human Cost in Crisis



Photo Caption: An HI field staff member assists a person with a disability during the distribution of assistive devices in Beirut, Lebanon. © HI/Lebanon Team

Executive Summary

In Lebanon, the same population is described by wildly different numbers depending on who is counting. An estimated **10 to 15 percent of the population in Lebanon** — well over **600,000 people** — is thought to live with a disability¹. Yet the number varies depending on the source. The country's only standing disability registry, the Ministry of Social Affairs' Personal Disability Card system, counts just **103,000 persons**², and it is limited to Lebanese citizens. A separate UNDP estimate, released before the large-scale refugee returns of 2025 and 2026, places the figure closer to **900,000**³. Each of these figures is based on a different methodology, covers a different population, and reflects a different moment in time. They cannot be reconciled, and that, in itself, is the challenge.

This is the starting point of this paper: knowing who persons with disabilities are and where they are located is itself a condition for protecting their rights, especially in situations of displacement and conflict that Lebanon has experienced repeatedly in recent years and continues to encounter today. This paper traces how this gap in knowledge emerged, what it costs in moments of crisis, and what donors, humanitarian actors, and the Lebanese Government can each do to address it.

1. Introduction: Why Counting Is a Rights Issue

Data collection can feel like a back-office concern, a technical step that occurs before the “real” work of service delivery begins. But data are not a precursor to rights realization; they are part of it. Article 31 of the UN Convention on the Rights of Persons with Disabilities (CRPD) requires states to collect appropriate data, including statistical and research data, to enable them to formulate and implement policies that reach people. Without those data, even the best-intentioned policy is built on assumptions rather than evidence.

Lebanon formally ratified the Convention on the Rights of Persons with Disabilities (CRPD) and its Optional Protocol on June 5, 2025, following a multi-stage legislative process. While the country originally signed both instruments on June 14, 2007, domestic implementation stalled for nearly two decades. Momentum was restored when Parliament adopted authorizing legislation, which the President signed into domestic law in April 2025, paving the way for the formal UN deposit two months later. With the treaty officially entering into force for the country on July 5, 2025, Lebanon is now one of the Convention's newest States Parties⁴. This status converts Article 31's data obligations from an aspiration into a binding international commitment. Consequently,

¹ WFP Lebanon, Disability Inclusion Survey Results (Beirut: WFP, May 2023); ILO/CAS, Labour Force and Household Living Conditions Survey 2018–2019 (Beirut: Central Administration of Statistics, 2020). The LFHLCS is Lebanon's most comprehensive household survey to date, covering 39,116 households, but explicitly excludes non-residential units including refugee camps and adjacent gatherings.

² ARTICLE 19, Lebanon: Disability and Access to Information (London: ARTICLE 19, May 2015), citing Ministry of Social Affairs figures, 2014. This baseline figure of 95,618 registered individuals represents the historical data standard widely cited in previous literature. For the updated registry counts reflecting modern expansions, see Footnote 6 and Section 2

³ UNDP, cited in Context/Thomson Reuters Foundation, “In Lebanon, people with disabilities isolated, abandoned by war,” December 2024.

⁴ Lebanese Union for People with Physical Disabilities (LUPD), Submission on the Rights of Persons with Disabilities in Lebanon, Universal Periodic Review (Beirut: LUPD, 2025): President Joseph Aoun signed the ratification law covering the Convention and its Optional Protocol on 10 April 2025. See also ILO, “Lebanon scales up domestic financing for the National Disability Allowance,” April 2026, noting Lebanon's ratification of the CRPD in June 2025.

Lebanon's own Law 220/2000 on the Rights of Disabled Persons—which predates the Convention and invokes the spirit of the older UN Standard Rules—must now be thoroughly reviewed and aligned with these modern commitments. The gap between international commitment and domestic implementation is reflected throughout this paper.

The Convention on the Rights of Persons with Disabilities (CRPD), adopted by the United Nations General Assembly in December 2006, establishes a comprehensive human rights framework designed to promote, protect, and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities. The Convention marks a fundamental paradigm shift from a medical or charitable approach to a human rights-based model of disability. Article 31: Statistics and Data Collection. Pursuant to Article 31 of the Convention, States Parties undertake to collect appropriate information, including statistical and research data, to enable them to formulate and implement policies to give effect to the present Convention.

“I wish the disability card had real benefits instead of being just a card we get to have. I wish someone would ask about our actual needs, visit our homes to see whether they are accessible, and ensure we have access to the services we need, such as occupational therapy. Personally, this is something I need very much. During the war, I wished someone would ask what happened to us, whether we were displaced, what we lost, or how we were coping. No one assessed how they could help us recover. I lost my home, along with all of my assistive devices, including expensive robotic equipment that I had relied on every day. There was no compensation or support to replace what was lost. Sometimes, it feels as though I am invisible, as if I am not seen, not heard, and not recognized by the system that is supposed to support people like me.” — M.Y., an internally displaced person in Beirut since April 2026; displaced from West Bekaa, Lebanon.

2. Three Sources of Disability Data

Lebanon does not have one disability data problem so much as three, stacked on top of each other, each reflecting a different population and a different way of counting.

The first problem is the prevalence estimate itself. The widely cited figure of **10 to 15 percent** comes from surveys and humanitarian assessments, not from a census. Lebanon has not conducted a full national census since 1932. Its most comprehensive household survey to date, the Labour Force and Household Living Conditions Survey (LFHLCS), was conducted by the Central Administration of Statistics with technical support from the ILO in 2018–2019. Although the survey included questions on disability, it was designed to cover residents living in residential dwellings and therefore excluded people living in non-residential settings, including refugee

camps and adjacent gatherings. It remains the best national source available, but it cannot describe a large part of the population most likely to be missed⁵.

The second problem is the registry. The Ministry of Social Affairs' Personal Disability Card is the country's only operational source of administrative disability data. Its records have grown from **95,618 people** a decade ago to roughly **103,000** today, but the total remains far below even the lower end of the prevalence estimate. This is not simply an administrative oversight; it reflects the way the registry was designed and the population it was intended to serve^{6,7}.

The third, and most consequential, problem is exclusion. The registry was never designed to cover everyone living in Lebanon. The country continues to host one of the world's largest refugee populations per capita. An estimated **1 to 1.4 million Syrians** remained in Lebanon as of mid-2026, of whom close to **890,000** held an active UNHCR record as of June 2026⁸. Roughly **400,000 people** returned during 2025, and several hundred thousand more crossed the border during the 2026 hostilities. Around **250,000 Palestinian refugees** also live in Lebanon, alongside more than **175,000 migrant workers** from **98 countries**⁹.

Available evidence suggests that disability may be at least as prevalent among these communities as in the wider population, given their exposure to conflict, poverty, and prolonged displacement. **14 percent of Syrian refugees** in Lebanon have been identified as having at least one disability, while **32 percent of Palestinian refugee** households report at least one member with a disability. A separate population-based study using the Washington Group Short Set found a disability prevalence of **22.6 percent** among Syrian refugees in Lebanon. None of these groups is captured by the Ministry of Social Affairs' registry. The gap is produced both by the legal restriction of disability-card registration to Lebanese citizens and by the difference between the registry's medical, diagnosis-based model and the functional approach used in the Washington Group

⁵ ILO/CAS, LFHLCS 2018–2019, op. cit. The survey design explicitly notes exclusion of non-residential units, meaning data on persons with disabilities in refugee camps, informal tented settlements, and similar settings are structurally absent from Lebanon's most cited official household dataset.

⁶ Recent administrative tracking from the roll-out of the National Disability Allowance (NDA) programme by the ILO and Ministry of Social Affairs shows the digital registry has expanded marginally to hover between 103,000 and 115,000 active beneficiaries, continuing to significantly underrepresent actual national prevalence. The variance within this range depends on active vs. inactive card renewals and ongoing data cleaning efforts

⁷ This baseline figure represents the total number of active Personal Disability Card holders registered with the Ministry of Social Affairs (MoSA) as of late 2014, a figure heavily criticized by local civil society organizations for capturing less than 2% of the population.

⁸ The registration of Syrian refugees in Lebanon has been suspended by the Government since May 2015. The data refer to all Syrians who have an active record with UNHCR as of June 2026, including those who contacted UNHCR, were counselled on the suspension, and whose data were collected for humanitarian assistance. <https://data.unhcr.org/en/situations/syria/location/71>.

⁹ International Organization for Migration (IOM), Lebanon Crisis Response Plan 2024. IOM estimates indicate that over 175,000 migrants from 98 distinct nationalities reside in the country, highly vulnerable to shifting displacement crises and exclusion from local labor laws.

Questions. Using the latter would make the data more inclusive and comparable, and would better support Lebanon's obligations under the CRPD^{10,11,12,13,14,15}.

Consequently, in Lebanon, the same population is described by wildly different numbers depending on who is counting. Applying the World Health Organization's **10 to 15 percent** global prevalence rate, an estimated **600,000 Lebanese citizens** are thought to live with a disability; this figure rises to more than **900,000 people** when the denominator is expanded to encompass the entire resident population, including displaced refugees and migrant worker communities. Yet the exact figure varies heavily depending on the source. The country's only standing disability registry, the Ministry of Social Affairs' Personal Disability Card system, tracks a historical baseline of **95,618 persons** dating back to 2014, expanding to roughly **103,000 to 115,000 individuals** today, and remains strictly limited to Lebanese citizens. Each of these figures is based on a different methodology, covers a different population segment, and reflects a specific moment in time. They cannot be reconciled, and that, in itself, is the challenge.

These figures are not directly comparable: the surveys and humanitarian assessments use different definitions, cover different populations, and were designed for different purposes. They point to the same underlying problem without producing a single reliable count. No Lebanese institution can currently answer with confidence how many persons with disabilities live in the country or where they are located. The issue is not that Lebanon has never collected data; it is that the existing efforts have not been coordinated or inclusive enough to provide a dependable national picture.

¹⁰ UNHCR Lebanon, *Operational Data Portal: Refugee Situations*, data as of 30 June 2026, accessed 27 August 2026 at data.unhcr.org/en/situations/syria/location/71. Government estimates of the total Syrian presence in Lebanon have ranged from roughly 1 million to 1.4 million as returns to Syria continue. UNHCR's "active record" count, 889,625 as of this update, is broader than the pre-2025 "registered" figure often cited (roughly 716,000): it includes anyone who has contacted UNHCR, been counselled on the 2015 registration suspension, or had data collected for humanitarian assistance, and is not a like-for-like comparison with earlier years' figures.

¹¹ International Organization for Migration (IOM) and UNHCR Joint Regional Working Group, *Special Report on Post-Transition Return Dynamics to Syria, Quarter 4 Update* (December 2025). This massive spike in voluntary and spontaneous repatriations directly followed the collapse of the Assad regime in Damascus on 8 December 2024.

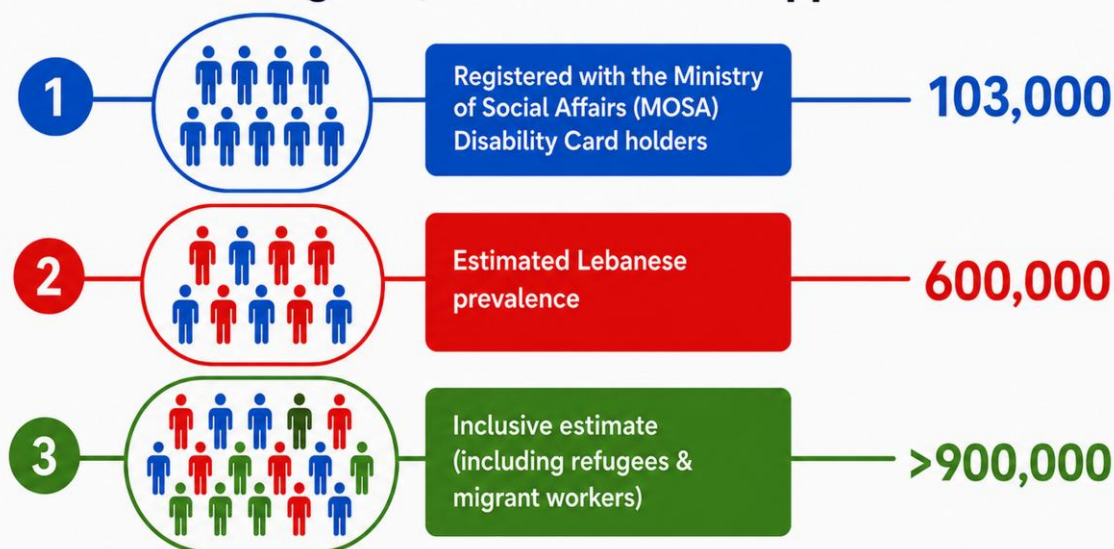
¹² United Nations Office for the Coordination of Humanitarian Affairs (OCHA), *Lebanon-Syria Border Displacement Flash Update No. 14*, May 2026. This tracks the compounding impact of escalated cross-border hostilities which dramatically accelerated departures through the first half of 2026.

¹³ United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA), *Lebanon Field Office Factsheet, 2025/2026*. While over 480,000 Palestinian refugees are historically registered on paper, UNRWA and the Lebanese Central Administration of Statistics (CAS) census projections estimate the actual, physically in-country resident population to be roughly 250,000 due to decades of onward migration.

¹⁴ Lebanese Center for Policy Studies (LCPS), *Reform Monitor: Status Review of Disability Rights in Lebanon* (Beirut: LCPS, 2024). The LCPS cites UNHCR (2023) for the figures of 14% of Syrian refugees and 32% of Palestinian refugee households.

¹⁵ The 22.6 percent figure is drawn from a population-based survey using the Washington Group Short Set of questions among Syrian refugees in Jordan and Lebanon; cited in S. Yetish et al., "Disability among Syrian refugees," *PLOS ONE* (2021), and referenced in LCPS (2024). See also <https://www.dfat.gov.au/sites/default/files/removing-barriers-the-path-towards-inclusive-access-lebanon-report.pdf>.

Lebanon's Disability Population: Three Figures, Three Different Approaches



The three figures are not competing estimates but reflect three fundamentally different approaches to counting disability: administrative registration, population prevalence, and inclusive population estimation.

The discrepancy illustrates the fragmentation of disability data systems in Lebanon rather than uncertainty over disability prevalence itself.



3. Why the Gap Exists

The gap is the result of several structural choices made over time rather than a single decision. This is not a story of complete inaction. Surveys have been conducted, humanitarian organizations have carried out needs assessments, and the State has taken steps towards social protection. Lebanon's National Social Protection Strategy, adopted by decree in November 2023, nevertheless acknowledges "the dearth of data that can be used to efficiently lead social protection programs" and identifies the absence of a unified national social registry as a major cause of ineffective targeting. Lebanon has therefore recognized the problem; what is still missing is the system needed to address it¹⁶.

The registration process relies on a medical, observation-based assessment conducted at the Ministry of Social Affairs' Social Development Centres. This approach is more likely to identify visible physical impairments than intellectual, psychosocial, or other less visible disabilities, leaving many people without a realistic route into the registry even when they want to be counted. Law 220/2000 was intended to protect the rights of persons with disabilities, but its implementation

¹⁶ National Social Protection Strategy for Lebanon: Towards a Rights-Based, Shock-Responsive and Sustainable System (Beirut: Ministry of Social Affairs / Inter-Ministerial Committee on Social Policy, adopted by Decree No. 5/2023, November 2023). The strategy itself acknowledges "the dearth of data that can be used to efficiently lead social protection programs" and identifies the absence of a unified national social registry as a root cause.

has remained weak. In practice, the system functions more as a mechanism for administering welfare entitlements than as a rights-based source of population data.

Citizenship is another gatekeeper. Lebanese citizens with disabilities can apply for a Personal Disability Card, but the law provides no equivalent route for refugees or migrant workers. They are therefore excluded from the State's only standing disability data system, regardless of their needs or how long they have lived in the country.

The National Commission for Disabled Affairs, which might otherwise have helped address these gaps, was effectively frozen for nearly a decade after its mandate expired in 2017. During that period, the national registry had no fully functioning institutional steward capable of expanding it, updating its methods, or subjecting it to regular review. In January 2026, the Ministry of Social Affairs reactivated the Commission.

Furthermore, Law 220/2000 has operated without a reliable enforcement body or a comprehensive reform plan, relying instead on ad hoc measures, tax exemptions, and committees that have often become inactive. The reactivated Commission and the National Strategy for Persons with Disabilities 2026–2030 create an opportunity for reform. The central challenge will be to overcome the political paralysis that has repeatedly prevented existing commitments from being fully implemented.

Existing data are spread across the Ministry of Social Affairs, the Ministry of Public Health, the Central Administration of Statistics, UN agencies, and a range of NGO-led assessments. These sources use different definitions, methods, and timeframes, and there is no shared framework for bringing them together. Figures from the LFHLCS, UNHCR protection monitoring, WFP disability-inclusion surveys, the Ministry of Social Affairs' registry, and humanitarian needs assessments therefore cannot be combined into a single authoritative estimate. This fragmentation does not reflect a lack of commitment among the people working in these systems. It reflects years of underinvestment in the institutional, legal, and technical infrastructure required to produce inclusive data.



Photo Caption: A living space inside the Beirut Sports City collective shelter, which hosts internally displaced people in Beirut, Lebanon. © HI/Lebanon Team

4. When Invisibility Meets Emergency

The consequences of not knowing are most severe during a crisis, and Lebanon has experienced several crises in quick succession. The headline displacement figures are alarming, but they conceal an additional burden. WFP's 2023 disability-inclusion study found that, among households with persons with disabilities already receiving humanitarian assistance, **82 percent** reported unemployment, **95 percent** had resorted to severe livelihood coping strategies, including reducing health spending and selling productive assets, and **85 percent** were living in debt. These households were already connected to the humanitarian system. Those who remained outside it were likely to face even greater hardship.

When the conflict intensified in September 2024 and displaced more than one million people, the shelter response showed how the absence of reliable data affects access to assistance. During the first week, the World Health Organization reported that only **12 of more than 500 official shelters** were equipped to accommodate persons with disabilities. Even shelters formally described as accessible often had overcrowded corridors and toilets accessible only by stairs, as well as limited electricity, lighting, and privacy. These conditions placed persons with limited mobility, older persons, and other persons with disabilities at greater risk of falls, isolation, and violence^{17,18}.

The escalation did not end the pattern. Hostilities intensified again in 2026, and more than **1.1 million people** had been displaced by early April, in addition to those who had still been unable to return home since 2024. Families were displaced repeatedly, often several times, with little opportunity to recover between waves. The exclusion documented in 2024 resurfaced: migrant domestic workers, undocumented refugees, and other migrant labourers were again turned away from shelters that prioritized Lebanese citizens or registered refugee populations. Many were left to navigate renewed bombardment with little or no support^{19,20,21}.

“During the first month of the 2026 war, I was displaced at my brother's house, where four families were living together. As a person with cerebral palsy, the overcrowded space was extremely difficult. I had no privacy, very little room to move with my wheelchair, and I depended on others to help me with circulation and daily mobility. Eventually, I decided to return to the South despite the ongoing conflict because I could no longer cope with those conditions.

¹⁷ IOM Displacement Tracking Matrix (DTM), Round 49, 29 September 2024; OCHA Lebanon Humanitarian Fund Annual Report 2024 (Geneva: OCHA, 2025).

¹⁸ WHO Lebanon, cited in Context/Thomson Reuters Foundation, “In Lebanon, people with disabilities isolated, abandoned by war,” December 2024.

¹⁹ Lebanon: Flash Update #43 - Escalation of hostilities in Lebanon (as of 13 July 2026).

Over 800,000 people remained displaced as of mid-June; new displacement orders continued to be issued into the ceasefire period, and the Ministry of Public Health recorded more than 3,700 deaths since March 2026.

²⁰ “Lebanon: Flash Update #2 – Escalation of hostilities in Lebanon, as of 6 March 2026,” OCHA Lebanon.

²¹ UNICEF Lebanon, Humanitarian Flash Update No. 6, Escalation of Hostilities in Lebanon, 2 April 2026.

Later, someone I knew connected me with a team who could give me access to an accessible collective shelter, but even reaching the location was a challenge. I could not afford the transportation cost, and travelling with a wheelchair required a specific type of vehicle and someone to accompany me. Thankfully, a colleague covered the transportation expenses, making it possible for me to access the shelter. That reminded me that during emergencies, people with disabilities need more than goodwill. We need accessible shelters with enough space to move safely, accessible transportation that we can actually use, and services that are designed to meet our needs.” — M.H., an internally displaced person staying at the Beirut Sports City collective shelter since May 2026; displaced from Beirut’s southern suburbs.

In these moments, Lebanon’s response to the needs of persons with disabilities has understandably been reactive. Humanitarian organizations conduct rapid assessments after displacement has already begun, rather than working from a standing system that can anticipate needs in advance. Humanity & Inclusion’s rehabilitation needs assessments in collective shelters across Baabda and Aley illustrate the problem: the assessments are essential, but each new wave of displacement requires much of the work to begin again. The one-off US\$100 transfer offered by the Ministry of Social Affairs to disability-card holders in late 2024 tells a similar story. It showed that the State can act quickly and provide meaningful support to those who received it, but it reached only the roughly **95,000 people** already included in a registry that was never designed to represent the full population in need²².

5. Who Falls Through Hardest

The effects of exclusion are not evenly distributed. Several factors overlap and reinforce one another, making some people much more likely than others to disappear from the data and from the services that depend on them.

Nationality and legal status are among the clearest dividing lines. Refugees and migrant workers with disabilities are outside Lebanon’s only standing disability registry, and they are also more likely to be excluded from shelters during displacement.

Gender creates another layer of vulnerability. Women and girls with disabilities face heightened risks of discrimination, violence, and abuse. Women also carry a disproportionate share of unpaid care work when formal support systems are weak, leaving many caregivers themselves uncared and unprotected.

²² ILO, “Ministry of Social Affairs announces new nationally funded emergency cash assistance,” press release, November 2024. The one-off transfer of US\$100 was offered to persons holding a valid Personal Disability Card.

The type of disability matters as well. People with intellectual or psychosocial disabilities, as well as those with other less visible conditions, are less likely to be captured by a registration process based on medical diagnosis and observation.

Geography matters too. Research, specialized services, and administrative capacity are concentrated around Beirut, leaving rural areas and the Bekaa with thinner coverage in both data and support.

Age cuts across all of these barriers. Older persons with disabilities may face the same exclusions from registration and shelter, while mobility limitations can make the journey to a registration centre difficult or impossible.

The economic dimension reinforces every other barrier. Persons with disabilities are estimated to face costs **35 to 40 percent** higher than those faced by people without disabilities in order to achieve the same standard of living. In Lebanon's collapsed economy, these additional costs can become overwhelming, especially for families whose members with disabilities are not included in a registry that could make them eligible for support²³.

“Caring for my daughter with a disability and two other young children has completely changed my life. Every day begins with providing the daily care she needs, and there is barely any time left to rest or think about myself. The financial burden is overwhelming. Between food, diapers, medicine, milk, and other basic needs, I often cannot afford the medical care needed. I constantly worry about how I will continue to provide for everyone, especially as the stress has started to affect both my physical and mental health. People who have never lived in this reality cannot understand it. Only the families of persons with disabilities truly know the weight of this responsibility. No one feels what I go through. My message is that families like ours need support. We suffer in silence, but we keep going because we have no other choice. I hope people and organizations continue to stand by us and provide financial, emotional, and psychological support. Even a little help can make it possible for us to continue.”
— F.S., resident of Burj el-Brajneh Camp.

²³ ILO, “The Ministry of Social Affairs introduces a social protection programme for people with disabilities in Lebanon,” press release, 26 April 2023; UNICEF Lebanon, National Disability Allowance programme page. The NDA was initially targeted at youth aged 18–28, later expanded to ages 15–31 and then to children and older persons aged 65 and above.

6. What's Already Being Tried (and Why It Isn't Enough Yet)

Lebanon is not starting from zero. Several important initiatives are already under way, and the effort behind them should be recognized. At the same time, these initiatives have not yet resolved the weaknesses in the country's underlying disability data system.

Humanitarian organizations have generated valuable disability-related data. UNHCR's quarterly Protection Monitoring surveys track the situation of Syrian refugees with disabilities in Lebanon. WFP's 2023 disability-inclusion study provided a detailed account of food security and livelihoods among households with persons with disabilities in its caseload. OCHA's Lebanon Humanitarian Fund has also prioritized inclusive responses in recent allocations, while the Lebanon Response Plan 2026 identifies disability as a cross-cutting issue. This work is important, but it is usually produced by individual agencies for specific operational purposes. The information is not consistently shared in a usable format and is rarely integrated into national systems in a way that survives the emergency that generated it²⁴.

National efforts have also produced some important gains. The National Disability Allowance, launched by the Ministry of Social Affairs in April 2023 with EU funding and support from UNICEF and the ILO, was Lebanon's first social grant to provide direct income support to persons with disabilities. It initially targeted **young people aged 18–28** and was later expanded in both age range and coverage. By late 2025, the programme had reached more than **33,500 persons** with disabilities. Lebanon also began financing the programme through its national budget in 2025, allocating US\$10 million and providing monthly support to approximately **30,000 people**. This represented a meaningful move towards State ownership^{25,26}.

The National Social Protection Strategy, adopted by Decree No. 5/2023 in November 2023, was another important milestone. Organizations of Persons with Disabilities (OPDs) helped bring accessibility and inclusion into the national policy framework. In late 2025, the Ministry of Social Affairs also announced the development of Lebanon's first national disability strategy through a consultative and participatory process, with proposed reforms covering education, healthcare, infrastructure, and social protection^{27,28}.

²⁴ WFP Lebanon, Towards More Disability Inclusive Programming (Beirut: WFP, September 2023). The study found an unemployment rate of 82% among assisted households with persons with disabilities, with 95% resorting to severe livelihood coping strategies including reducing health expenditure and selling productive assets, and 85% living in debt.

²⁵ UNICEF/ILO, "Minister of Social Affairs, European Union, UNICEF and ILO visited one of the Rights and Access Centres," press release, 19 September 2023. At that date, 8,506 Lebanese persons with disabilities had received the allowance; the NDA has since reached more than 33,500 persons with disabilities as of late 2025 (UN SDG, December 2025).

²⁶ ILO, "Lebanon scales up domestic financing for the National Disability Allowance," April 2026. Lebanon allocated US\$10 million from the 2025 national budget to the NDA, providing monthly support to approximately 30,000 persons with disabilities.

²⁷ National Social Protection Strategy (Decree 5/2023), op. cit.; LCPS Reform Monitor (2024), op. cit. The LCPS notes that OPDs succeeded in "introducing the accessibility and inclusion agenda to the Social Protection Strategy."

²⁸ Ministry of Social Affairs Lebanon / Enmaeya, "Lebanon Unveils Plans for National Disability Rights and Inclusion Strategy," December 2025. The strategy was announced on the International Day of Persons with Disabilities by Minister Haneen Sayed.

The most instructive recent example came in March 2026, when the emergency response under the National Disability Allowance explicitly included non-Lebanese families for the first time. Approximately **6,000 Lebanese** and **2,000 non-Lebanese families**—around **33,000 people** in total—**received a US\$100 emergency grant**. This was the kind of needs-based response that does not depend on nationality, and its implementation, even on a limited emergency basis, showed that a more inclusive approach is operationally possible²⁹.

These steps are welcome, but they still rest on the narrow, citizenship-based, medical-model data system described above. Outside the emergency response, the National Disability Allowance remains linked to the Personal Disability Card, so its reach is ultimately limited by the registry's undercount. The next generation of policy, legislation, and programmes should address that foundation directly instead of continuing to build new initiatives on top of it.

7. Recommendations

To the State of Lebanon

- Lebanon's ratification of the CRPD and its Optional Protocol in 2025 turned an existing political commitment into a binding legal obligation. The immediate priority is implementation: bringing Law 220/2000 and related policies into line with the Convention, establishing clear accountability mechanisms, and fulfilling Article 31 through inclusive, rights-based data collection. Persons with disabilities and their representative organizations should participate meaningfully in the design, implementation, and monitoring of these reforms.
- The National Commission for Disabled Affairs should receive a clear, CRPD-aligned mandate and adequate funding, with systematic consultation of Organizations of Persons with Disabilities. It should lead the reform of the Personal Disability Card system so that it reflects the CRPD's human rights model, while also supporting inclusive population-level data collection through internationally recognized tools such as the Washington Group Questions.
- Registration, or an equivalent data mechanism, should be made available to non-Lebanese residents with disabilities, building on the precedent established by the National Disability Allowance's 2026 emergency response. Disability disaggregation should also become standard across national surveys, census efforts, and emergency data systems, including shelter registration and displacement tracking.
- Lebanon should conduct a comprehensive national study of disability prevalence that includes refugees, migrant workers, and Lebanese citizens. Using internationally recognized tools such as the Washington Group Questions would help replace the current patchwork of estimates with a shared and credible evidence base.

²⁹ UNICEF/MoSA/ILO, "Ministry of Social Affairs, UNICEF and ILO Announce Emergency Cash Support for Children and Persons with Disabilities Affected by the Conflict," press release, 11 March 2026. The first phase reached approximately 6,000 Lebanese and 2,000 non-Lebanese families, totalling around 33,000 individuals.

To Humanitarian Organizations

- Disability-disaggregated data should be standard in all needs assessments and response plans, including shelter, WASH, food security, and protection programming, regardless of nationality or legal status. Data should be collected with appropriate Washington Group Questions (WGQ) and used throughout programme design, implementation, monitoring, and evaluation.
- Humanitarian organizations should invest in inclusive preparedness with Organizations of Persons with Disabilities. This should include mapping accessible mainstream and specialized services, as well as identifying barriers to evacuation, shelter, information, protection, and assistance before a crisis occurs.
- Humanitarian organizations and national authorities should establish common standards for sharing disability data safely with the Ministry of Social Affairs and other relevant actors. Any data-sharing arrangement should be based on informed consent and include strong data-protection and safeguarding measures.
- Organizations of Persons with Disabilities should be resourced and consulted systematically, in line with the CRPD principle of “nothing about us without us.” Their role should extend beyond implementation to the design, monitoring, and evaluation of programmes.

To Donors

- Donors should make disability-disaggregated data collection a standard design requirement for programmes supporting Lebanon’s social protection system and humanitarian response.
- Donors should provide direct, long-term support for the reconstitution of the National Commission for Disabled Affairs and the development of a unified disability data system. Without these foundations, other disability investments will continue to operate with limited information about who needs them and whether they are reaching the right people.
- Donor support should also extend to registration and data mechanisms that include non-citizen populations. Funding only programmes designed for Lebanese citizens risks reproducing the exclusion this paper has documented.
- Funding should be multi-year and focused on strengthening systems, alongside emergency response. This would help break the cycle of one-off, crisis-triggered assessments that are abandoned once the acute phase has passed.
- Donors should provide dedicated, direct funding for data collection and monitoring led by Organizations of Persons with Disabilities. This would help ensure that persons with disabilities are not merely subjects of the data system, but active partners in designing the systems intended to count and protect them.

8. Conclusion

Every person with a disability risks being missing from Lebanon’s data is also, in practice, missing from a shelter list, a cash transfer, an evacuation plan, or a rehabilitation service. The crises of 2024 and 2026 exposed a system that was already incomplete: a registry of fewer than 100,000 people was standing in for a population many times larger, while refugees and migrant workers—who make up a significant share of the country’s residents—were excluded altogether. There are genuine reasons for hope. The National Disability Allowance is now partly financed through the national budget and reaches tens of thousands of people. The National Social Protection Strategy has placed disability inclusion within the national policy framework. The 2026 emergency response extended the Allowance, for a limited period, to non-Lebanese families and showed that a nationality-blind approach is possible.

Lebanon does not lack people willing to be counted, or organizations willing to count them. What is missing is a system that can see everyone consistently and make the resulting information usable to humanitarian organizations and public institutions alike. Building that system is not a technical side project. It is the foundation for protecting the rights of persons with disabilities in ordinary times and during crises.

“Nothing about us should be decided without us. Persons with disabilities should be meaningfully involved from the beginning of every project—not only during implementation. Future programs must be designed with Organizations of Persons with Disabilities from the outset, so that the realities, needs, and perspectives of persons with disabilities shape services, accessibility measures, and decisions from day one.” — HaITek Association.

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Note: UN conventions, Lebanese legislation (Law 220/2000, CRPD signature), and IOM DTM displacement figures are also cited throughout.

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