



Gendered exhaustion. The erosion of women's social protection in Lebanon.

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Abstract

This paper analyzes the gendered dimension of exhaustion, by combining narrative methods and life-history research to capture gendered power relations that are central to shaping access to welfare, dignity, and autonomy in times of crisis. The analysis draws on insights from 15 interviews conducted between 2019 and 2025 (with women representing diverse socio-economic, geographic, and occupational backgrounds, including homemakers, retirees, unemployed women, and those engaged in informal or paid work). Yet, it focuses on three detailed life stories that illustrate how women experience and navigate social protection in times of crisis. Those 3 life stories provide grounded accounts of women's trajectories and shifting roles within Lebanon's rapidly transforming welfare landscape.

Keywords: Gender, Gender Gap, women, Social Protection, Social Security, Inclusive Social Security, Lebanon

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Since the 2019 crisis in Lebanon, women have disproportionately been affected by the dual burden of job loss and the disappearance of social protections linked to formal work. As shown by the latest labor force survey, even those who remain employed are often trapped in the lowest-paid sectors. In recent years, the political and economic crises have severely weakened an already fragmented and regressive social protection system. Surveys conducted in Lebanon during and before the crisis are surely essential for mapping coverage rates and identifying large-scale trends. Yet, they also point to the emergence of a gendered economy of endurance and exhaustion. Nevertheless, such surveys remain ill-equipped to narrate how women endure the erosion of their social rights while negotiating gendered dependencies and states of exhaustion. For instance, the "Unprotected. Survey Report on The Challenges of The Current Social Protection System in Lebanon Amidst The Crisis." survey published by CeSSRA in 2023 revealed that the proportion of women covered by at least one public insurance scheme has remained almost unchanged , reinforcing the illusion of gender parity while hinting at deeper and more persistent inequalities. Indeed, even when women have coverage rates comparable to those of men, they remain more exposed to insecurity and exclusion, and their effective access to formal and solidarity-based protections is often weaker. How do women navigate the contradictions between nominal coverage and effective exclusion? Why is dissatisfaction with public schemes higher in Bekaa and Baalbek-Hermel, and why does reliance on in-kind assistance dominate in the South? How do these patterns intersect with age and class?





The unequal geographies of vulnerabilities extend beyond the scope of this research, leaving many questions unresolved. This paper aims, more modestly, to show that behind the various so-called forms of "resilience" and "adaptation", women are disproportionately exposed (and, to some extent, instrumentalized) to absorb the burdens of social protection gaps, economic deterioration, and everyday exhaustion in Lebanon.

The gendered economy of endurance, depletion and exhaustion refers to the burden of dealing with overarching responsibilities in both professional and domestic settings. It connects the lived experiences of suffering with the global crises in social reproduction and care-giving. In the Lebanese literature, women have been described as being subjected (in times of war and non-war, amid crises and post-crises) to contradictory injunctions and responsibilities that would generate disruptions in the subjective construction of the self (its meaning and its identity), referring to what Suad Joseph has described as the feeling of women not being able to be as much as themselves . Moreover, endurance, depletion and exhaustion are concepts that could be framed as an analytical lens to observe the gendered implications of broader global disorders (such as the Covid-19 health crises , or the disruption of global labor markets , etc.).

Nevertheless, in this paper, the reference to the gendered economy of endurance, depletion and exhaustion is used as a descriptive tool to capture the "depletion of those who care", mainly women. By doing so, the paper aims to show that "exhaustion" connects us to our social and natural worlds, as well as to the capitalist arrangement of exploiting, depleting, and exhausting our own personal resources on which we depend to reproduce the economic conditions of our social lives.

Nancy Fraser has identified the cannibalistic tendencies of contemporary capitalism in its drive to devour the very resources on which it depends, including human capacities and nature itself. She locates reproductive practices and care relations at the heart of this dynamic. In what follows, "exhaustion" is used in both senses of Fraser's account: it refers to women's physical and emotional fatigue, but also to their instrumentalization, extraction until depletion, within an extractive system that exploits what is deemed external to the economic sphere (i.e., its own conditions of possibility): namely, "social reproduction, public power, nonhuman nature, and forms of wealth that lie outside capital's official circuits"."

This paper analyzes the gendered dimension of exhaustion, by combining narrative methods and life-history research to capture gendered power relations that are central to shaping access to welfare, dignity, and autonomy in times of crisis. The analysis draws on insights from 15 interviews conducted between 2019 and 2025 (with women representing diverse socio-economic, geographic, and occupational backgrounds, including homemakers, retirees, unemployed women, and those engaged in informal or paid work). Yet, it focuses on three detailed life stories that illustrate how women experience and navigate social protection in times of crisis. Those 3 life stories provide grounded accounts of women's trajectories and shifting roles within Lebanon's rapidly transforming welfare landscape.

I- What do we already know about the gendered gaps in Lebanon's welfare landscape





In 2023, the CeSSRA's survey showed that 39.6 percent of Lebanon's population had no insurance coverage at all, leaving them completely unprotected. While slightly more women than men were covered (62 percent compared to 58.9 percent), the regional disparities reveal the structural vulnerabilities of women. In Beirut and Mount Lebanon, where the uninsured represented only a quarter of the population, women's access to health and social protection appeared relatively more secure. Yet in the South, Baalbek-Hermel, and Nabatieh, where between 58 and 66 percent of people remained uncovered, the lack of social protection intersected with women's already limited participation in the labor market, producing sharper forms of dependency and insecurity.

Indeed, the crisis has particularly undermined the protection of homemakers and retirees, groups dominated by women. NSSF coverage for homemakers declined from 26.1 percent before 2019 to less than 20 percent today, while coverage for retirees dropped from 16.3 percent to 14.8 percent. As a result, more than half of homemakers (almost exclusively women) and more than a third of retirees were left with no form of insurance. Unpaid homecare work and inactive statuses translated into exclusion from formal protection, further reinforcing gendered hierarchies within the Lebanese welfare landscape.

The Survey also showed that women who remained insured had to face shrinking benefits. Half of those enrolled in the NSSF or state-run cooperatives did not use their services at all in the precedent year, pointing to the inadequacy of benefits and the prohibitive rise in costs. Women expressed higher levels of dissatisfaction than men, especially in peripheral regions such as Bekaa and Baalbek-Hermel. The data analysis structure showed that the problem lay in the outdated reimbursement system, which remained pegged to the pre-crisis exchange rate. What was once a scheme that covered 90 percent of medical bills had effectively reversed between 2019 and 2022: insured individuals at that time shouldered nearly 90 percent of the cost out-of-pocket. For women, whose incomes and savings are on average lower, this reversal translated into deeper exclusion from essential healthcare.

Following the financial collapse, family solidarity networks became the main buffer against risk, due to the lack of reliable public schemes. Yet solidarity-based protections are deeply gendered. Women depend far more on family assistance than men (over half rely on relatives, compared to one-third of men), and their support is often in-kind rather than monetary. Men, by contrast, tend to benefit more from cash transfers and remittances from abroad. This gendered dependency reveals how women's protection is increasingly privatized within households, reproducing existing inequalities in access to resources and decision-making power.

The erosion of formal protection is compounded by women's weaker capacity to mobilize assets or savings to confront shocks. One in three women reported having no savings at all, compared to less than one in three men. Women also had lower access to property ownership (12.6 percent compared to 19.5 percent for men), and when they do hold assets, these are more often in the form of gold jewellery than liquid savings or financial assets.

When exploring these numbers and figures, one might intuitively suspect the contours of a broader story: women's protection in Lebanon has become increasingly contingent on their family and domestic settings. The next sections turn to the lives of women themselves, to the ways they experience, negotiate, and endure this erosion of social protection in their daily lives. Through their trajectories, the





abstract figures of exclusion take on more embodied forms.

II- Sickness, ageing, and the fragility of self-reliance

Nadia, 61, lives in a coastal town in northern Lebanon, a semi-rural area between Batroun and Tripoli. She has been employed for more than three decades in the state-owned company (in Kadisha). I started visiting her regularly since the beginning of 2019, when she opened a small business, a grocery and artisanal products shop located on the main square of her village, beneath the apartment she owns. She lives with her 84-year-old mother, who depends on a live-in Ethiopian domestic worker for daily care and household tasks during Nadia's long hours away. Although she has so far maintained a living standard roughly comparable to the pre-crisis period, the multiple crises have radically restructured her sources of income, her relationship to work, and her expectations for the future.

Two major shifts define her current situation: a forced semi-retirement and a growing entanglement between work, illness, and survival. Before the financial collapse, Nadia's main source of income was her public-sector salary. The shop provided only marginal additional revenue. With the devaluation of the Lebanese pound, however, her salary lost most of its value, and the shop became the main source of household income. Her salaried job has effectively turned into a secondary activity, a symbolic employment she maintains two or three days per week, for only a few hours each time, since the state has tolerated the remote working and absenteeism in the public sector, due to the prohibitive costs of transportation.

When I interviewed her in October 2025, she confirmed that her professional life didn't change much, despite that "everyone is lying to themselves, trying to convince themselves and others that the economic situation is improving": "It's still a full-time-job, but it pays as if it was a part-time job", she says, "I work as much as I'm paid for." The meaning of formal employment has thus changed: what was once a full-time career has become a residual practice maintained out of fear rather than necessity. She keeps her position to preserve social and institutional ties built over thirty-two years of service, and above all to safeguard her eligibility for retirement pay and health insurance, however eroded these may be.

The shop, initially conceived as a long-term retirement investment and a platform for women's entrepreneurship in her village, has become the family's primary means of subsistence. With her working capital shrinking and suppliers unpaid, Nadia now operates mostly on credit. The shop's profits are largely absorbed by medical expenses for her mother, and more recently for herself. In the past, her mother's medical expenses represented a significant financial burden, partially mitigated in the past by NSSF reimbursements. In 2023, Nadia was diagnosed with breast cancer. She now faces her own mounting medical costs, particularly for radiotherapy, and foresees the imminent end of her entrepreneurial activity. She is currently seeking a manager to take over the shop in exchange for a small monthly fee, while exploring the sale of inherited land and, if necessary, her apartment. "I don't have children," she says, "so at least I don't have to worry about inheritance." The absence of descendants, once a source of social stigma, now appears to her as a form of pragmatic relief: she can liquidate her assets without the guilt of leaving debts or burdens behind.





While caring for her mother, Nadia is brutally confronted today to her own personal gendered experience of ageing in sickness and disability. Leisure has disappeared from her vocabulary. Any time gained from her public job is reinvested in the shop; any time saved from the shop is devoted to caregiving. When her mother sleeps, she might find some time for herself. Her social world has similarly contracted. She no longer participates in community events or maintains friendships beyond her immediate commercial network and her medical needs.

Illness has recently introduced a new dimension to her self-perception. During early interviews (in 2020–2021), she rarely mentioned her body. Now, since she began radiotherapy, her sense of embodiment had shifted: she is worried about her appearance, she apologizes for looking tired, and she refuses to be recorded for fear her voice would sound "too frightening." She insists that she is physically fine, but admits that her morale has collapsed. "Talking helps," she said. "Maybe you can help me think of solutions for the shop."

Her illness thus becomes inseparable from her economic struggle: the body and the enterprise collapse into a single site of vulnerability. Both are deteriorating, both are being kept alive through credit, and both depend on the uncertain hope of a future recovery, and she puts her hopes in the recovery of both the health sector and the tourism sector.

III- Patriarchy in the heart of the care economy

Like many other countries, domestic care work in Lebanon has long been perceived as a naturally feminine duty, deeply rooted in patriarchal gender norms (Abdulrahim & al. (2015). This perception has not only rendered care work socially invisible but has also contributed to its chronic undervaluation. The devaluation of care as "women's work" reflects a broader structural gender bias that ties economic worth to masculinized forms of labor while relegating care and reproduction to the private, sentimental sphere.

Before the 2019 financial collapse, most home-based care tasks in Lebanon were performed by migrant domestic workers (MDWs), employed under the *kafala* (sponsorship) system, a highly exploitative regime operating outside national labor law (Legal Agenda 2021). At that time, more than 250,000 migrant women were working in Lebanese households (ILO 2016b), living under their employers' roofs to cook, clean, and provide daily care for children and older persons. Research has shown that Lebanese families are structurally dependent on this labor, given the absence of public care services and the weakness of state-funded social policies. Before the crisis, around 20% of households employed female domestic workers to care for older persons, and 19.6% did so for children (Abdulrahim 2017).

The 2019 financial collapse and the dramatic depreciation of the Lebanese pound made their employment financially untenable for most households. Thousands of contracts were terminated abruptly, and many workers were left destitute, often abandoned in front of their embassies without pay or passports. This violence extended beyond domestic work to sectors where migrant labor was predominant (cleaning, waste management, construction, etc.).





The departure of migrant caregivers created a massive gap in the provision of home care. The sharp depreciation of the Lebanese pound drastically reduced households' capacity to hire live-in workers (Hariri & Puig 2022). What had been outsourced to migrant women was suddenly reabsorbed into the domestic sphere, intensifying the unpaid and often invisible care responsibilities. Elderly and household care either became monetized under precarious contractual arrangements (informal, hourly, or day-based) or internalized again within domestic settings, reverting to unpaid labor, usually by women. Despite these structural shifts, the feminization of care work remained intact. However, the market structure transformed radically: the collapse of formal social protection systems, including the National Social Security Fund (NSSF) and State Cooperatives, left families exposed and workers unprotected. As a result, many Lebanese, Palestinian and Syrian women entered the care labor market, while a smaller number of freelance migrant workers continued to operate informally, often paying their *kafala* fees independently or staying in Lebanon without legal residency.

This restructuring of care work occurred amid profound transformations in household gender relations. As women increasingly sought paid employment outside the home, a tension emerged: who would perform the unpaid care work traditionally assigned to them?

Sana lives in Bhamdoun, in the Lebanese mountains. I met her in 2023. She works in people's homes as a housekeeper and cleaner, occasionally babysitting or caring for older adults. As she explains:

"They expect you to clean, cook, and take care of the kids in the same way the migrant domestic worker used to do. They want you 24/7 and offer you a monthly wage of \$100 or \$150. I have been offered this kind of wages many times."

Like many women in this sector, Sana has endured humiliation and abuse from employers. For her, moving to freelance work was a form of emancipation, an attempt to reclaim dignity and control over her labor. She left her fixed job in a cleaning company to become self-employed. Like many other women in her situation, working without a work contract is considered a form of emancipation. Another worker echoed this sentiment:

"I started working as a cook 25 years ago. Now, most people want you to cook and clean. So, I started working as a housekeeper too. Then I worked in a hotel, a fixed job. My job was tiring, and there was a boss above me who controlled every single move I made. I did not accept this situation because, despite putting in a lot of effort, there was no recognition. On the contrary, I was constantly criticized and humiliated. I wanted to be my own boss. I went back to work with my individual clients as a cleaning lady. Now, I am my own boss."

For Sana, like many other care workers, informality is not merely a symptom of economic collapse but also a fragile strategy of self-determination. Yet, this freedom remains constrained by structural inequalities. The stigma surrounding care work in Lebanon is rooted in decades of racialized exploitation under the *kafala* system, and it continues to devalue local women entering this labor market. Lebanese, Palestinian and Syrian women cleaners are often paid less than their migrant counterparts: while freelance migrants from non-Arab countries in 2023 earned around \$5 per hour (plus \$2 for transport), Lebanese, Palestinian and Syrian workers were typically offered only \$3–4.





This wage discrimination shows that employers essentialize the figure of the migrant non-Arab worker as more compliant and submissive, while viewing "local" women as less "manageable." As another interviewed Lebanese cleaner put it:

"I don't know why Lebanese employers prefer migrants over Lebanese women. We accept lower pay, yet they still prefer to avoid us. Sometimes for religious issues. Some prefer not to have a Muslim woman, and others prefer not to have a Christian woman. They mock us for the way we dress, the way we eat, or if we say a religious expression or a prayer. They don't do this with migrant workers [...] I once asked my employer why she pays me less than migrant workers, and she told me that they have to send money to their parents in their home country in dollars. And me? Do I pay my rent in Lira?"

Today, Sana earns about \$7 per hour. Despite the apparent increase, her real income has declined as inflation and dollarization have eroded purchasing power. "Everything became more expensive," she says, "and my employers think I'm overpaid, more than I deserve." One employer once told her that she should consider herself lucky, "since she is paid as much as a nurse." Sana understood perfectly what that meant: in the eyes of her employer, her low social status and low educational achievements didn't allow her to hope for a better future.

IV- Between domestic duties and structural dependencies:

Malika is a public-school teacher in her late forties. She lives with her elderly parents in a modest apartment in Beirut's suburbs. She never married, never had children. Her brother, who migrated to Germany more than a decade ago, regularly sends money to support their parents (and, indirectly, herself). On paper, the arrangement looks like a gesture of solidarity across borders, a remittance for the well-being of ageing parents. In practice, however, the gendered division of labor transforms Malika's life into a form of unpaid caregiving that sustains the moral and practical economies of her entire family.

Her brother pays, and Malika delivers. He assumes the role of provider, while she assumes that of caretaker. As she puts it matter-of-factly, "My monthly wage in the public school would never be enough to sustain myself. Let alone my parents." His financial contribution makes daily survival possible, but the day-to-day, embodied labor of care (cooking, cleaning, feeding, and accompanying her parents to the doctor) falls entirely on her shoulders. In this arrangement, the unpaid work of caregiving is in fact a silent exchange where Malika's time, emotions, and autonomy are compensated indirectly through remittances, yet never recognized as labor.

Malika is an educated woman, respected in her profession, but her personal life has been almost entirely shaped by these gendered division of labor within her domestic settings among her brother and her old parents.

"How can I leave them?" she says, referring to her parents. But she never once asks, "How can my brother leave them?"





When I asked her about this differential involvement, she answered with a gentle and subtle nuance: "What he is doing is extremely important for the survival of the family." She reminds me that her brother sends money for medication, calls her privately to check on their health, and insists she take them to the doctor when needed. He is the remote manager of the family's well-being. She does not express resentment or complaint. When I finally asked, perhaps too bluntly, if she felt she was "sacrificing herself" for her parents, or instead "sacrificing herself in place of her brother," she looked at me sharply, showing me that I might have crossed some boundaries: "I am not sacrificing anything. I am just doing my duty."

Malika's story mirrors those of Nadia and Sana in another register. The various experiences show that women's social protection in Lebanon remains contingent upon their capacity to care (whether paid, unpaid, or disguised through kinship). In Malika's world, dependency is reciprocal yet unequal: she depends on her brother's money, while he depends on her time and devotion. Between the two, the state is nowhere to be found.

Conclusion

Across the various professional backgrounds (public employment, self-employment, and informal care work), each woman's experience reveals how the crisis has blurred the boundaries between paid work, domestic duty, and moral obligation.

Sana's story shows that the erosion of public protection, combined with the structural shifts in the care economy and migrant labor undermined the very foundations of exploitative and affordable care, and thus reconfigured the meaning of work, dependency, and ageing.

Nadia's experience captures this transformation in intimate terms: her later life is shaped less by intergenerational transmission than by intergenerational inversion. She becomes the caretaker rather than the cared-for, measuring her ageing not through what she will pass on but through what she must still manage for those who are even more vulnerable than herself. The question is no longer legacy but liquidation: how to sell her shop, how to spend what remains without falling into destitution, how not to fail to care for her mother, before caring about herself. In this sense, the collapse of Lebanon's social protection system has not only redistributed care; it has redefined ageing itself, shifting it from a collective horizon of continuity to an individual struggle for endurance within deepening gendered dependencies.

Finally, the story of Malika embodies a form of gendered domestic division of labor in which care for ageing parents reproduces patriarchal asymmetries within the family, where men provide income while women provide time, presence, and emotional labor. Like Nadia, later life is no longer imagined by Malika as a period of rest or intergenerational transmission but as a continuation of work: caring, earning, managing scarcity, and preserving dignity within shrinking horizons of security. What emerges is a distinctly gendered economy of endurance and exhaustion, that Nancy Fraser has framed as non-waged-social-reproductive activities that are solely bared by women, thus reflecting "the way that the capitalist economy relies on - one might say, free rides on - activities of provisioning, care-giving and





interaction that produce and maintain social bonds, although it accords them no monetized value and treats them as if they were free".

Building on the women's narratives that illuminate the everyday costs of Lebanon's fragmented welfare system, the question that follows is not only how to repair what has been lost, but how to reimagine protection itself through a feminist and intersectional lens.

A feminist and intersectional policy vision would begin by recognizing care and social reproduction as central pillars of the economy rather than peripheral, private concerns. This requires a reconfiguration of both the Labor Code and the National Social Security Fund to extend coverage to informal workers and homemakers, acknowledging their unpaid contributions as forms of labor worthy of protection.

Beyond incremental reform, the introduction of a universal, publicly funded health system and gendersensitive pension schemes could help dismantle the structural dependencies that leave women perpetually exhausted by precarity.

An often-overlooked category in Lebanon's labor statistics is that of contributing family workers — women who work in family businesses, farms, or shops without formal contracts or remuneration. Their labor sustains entire households and local economies, yet it remains invisible in both social protection policies and public discourse. Because they are not formally recognized as "workers," they are excluded from social insurance, pensions, and labor rights. Recognizing and formalizing these roles would not only correct a deep historical injustice but would also expand the notion of labor itself, anchoring women's economic participation within a broader understanding of social reproduction and interdependence.

Yet feminist alternatives must also emerge from below, from the community networks and solidarities that have long compensated for state neglect. Supporting women-led cooperatives, neighborhood care initiatives, and mutual aid networks would not only strengthen collective capacities but also redistribute the responsibility of exhausting care activities away from individual sacrifices. In this sense, the feminist response is not about restoring a broken system, but about imagining another one where care, dignity, and security are treated as social rights rather than private burdens.

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[3] Report available online here: https://civilsociety-centre.org/resource/unprotected-survey-report-chall
[4] All data and figures cited in this report draw on a nationally representative survey conducted by CESSRA, which entrusted me, together with Raymond Bou Nader, to lead the 2022–2023 study on the transformation of social protection in Lebanon, published as Nizar Hariri (2023), Unprotected. Current challenges of the social protection system in Lebanon amidst the crisis. The Centre for Social Sciences Research and Action (CeSSRA)
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