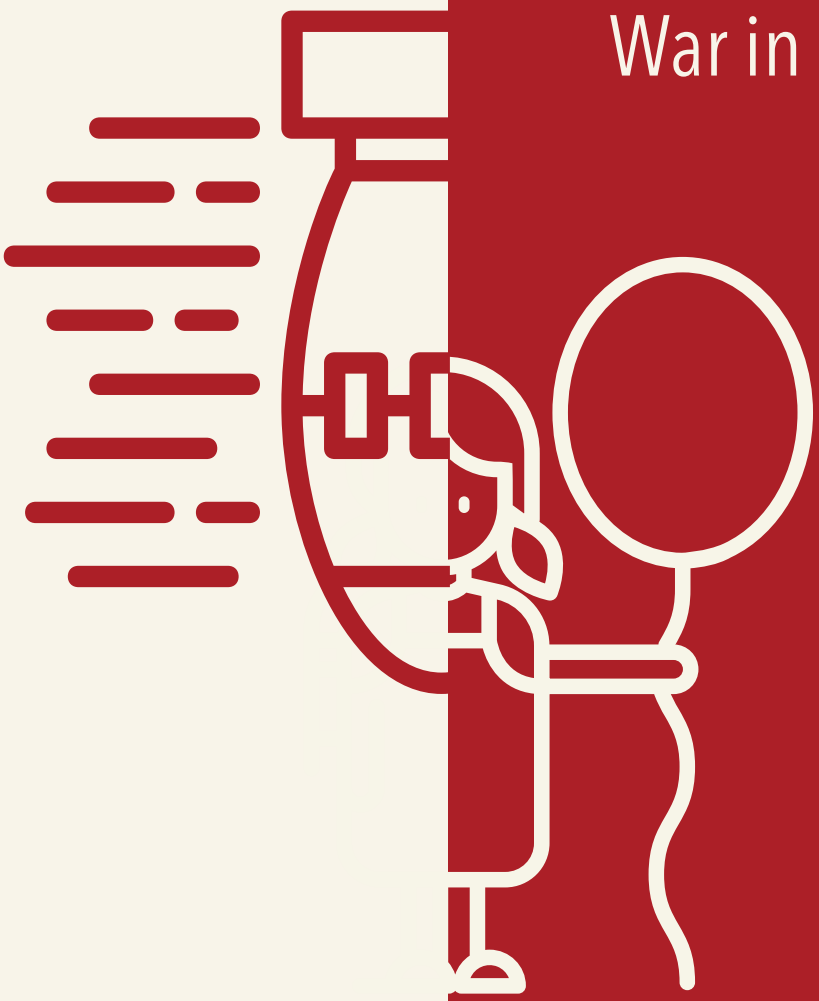
SOCIAL POLICY IN LEBANON BETWEEN

# WELFARE & WARFARE

POLICY NOTE

## Repeated Exposures: Childhood and War in Lebanon



Funded by the European Union

unicef for every child

The Centre For Social Sciences Research & Action

**Translation and copyediting**
The Language Platform

**Design**
Valerie Nseir

This policy note has been published in partnership with Unicef Lebanon, and with the financial support of the European Union. The views expressed in this publication are solely those of the author, and do not necessarily reflect the views of the European Union nor other partners.

**~1200**

244 children killed and 953 injured (between 2 March and 2 June 2026)

**150,000+**

students with disrupted education (2026)

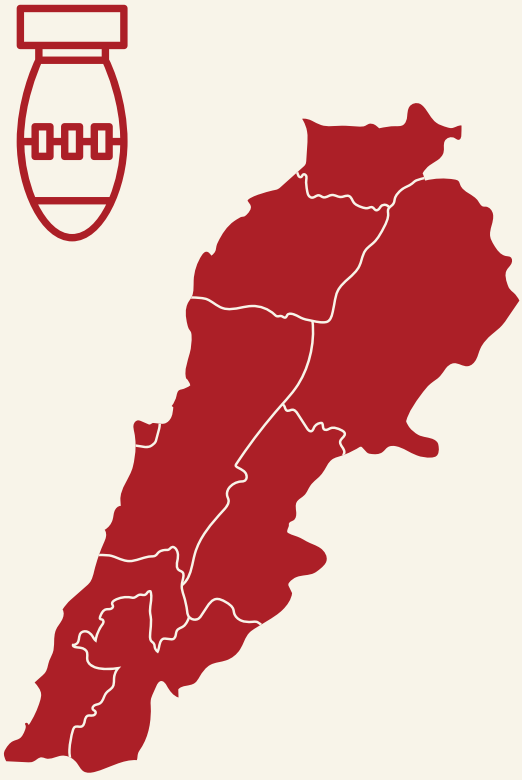
**40%**

of displaced persons are children

# BACKGROUND

This policy note draws on the roundtable discussion "Repeated Exposures: Childhood and War in Lebanon" (20 May 2026), the first session of the series "Social Policy in Lebanon Between Welfare and Warfare: Civil Society and Expert Engagement and Exchange Towards Social Justice in Lebanon", co-organised by CeSSRA and UNICEF[1]. Bringing together researchers, practitioners, and policy specialists[2], the discussion examined how recurrent conflict, displacement, economic collapse, and institutional fragility shape children's lives and future prospects.

The panel explored the cumulative and intergenerational consequences of prolonged exposure to violence, while reflecting on the capacity of Lebanon's social protection systems to respond to repeated shocks.



1. Read the full invitation here: https://socialsciences-centre.org/content/social-policy-lebanon-between-welfare-and-warfare-civil-society-and-expert-engagement-and

2. Dr. Hala Kerbage: Associate Professor of Child and Adolescent Psychiatry at the University of Montpellier and Head of the Child and Adolescent Posttraumatic Stress Unit at Montpellier University Hospital, France. Rose Habchi Daher: Representative of Himaya, Lebanon, with longstanding experience in child protection and advocacy. Dr. Peter Luigi Ragno: Chief of Social Policy at UNICEF Lebanon, working on social protection and policy reform in Lebanon. The roundtable was moderated by Sobhiya Najjar, Communication Expert at CeSSRA.

# CONTEXT AND PROBLEM STATEMENT

The Israeli wars on Lebanon have displaced over 1 million people (40% of them are children) and disrupted schooling and health care, and "*over one-quarter of households had children out of school*"[3]. Between 2 March and 2 June 2026, the escalation in Lebanon caused 3,468 deaths and 10,577 injuries, including 244 children killed and 953 injured, representing approximately 7% of fatalities and 9% of injuries[4]. These immediate impacts intersect with a longer trajectory of economic collapse, failing infrastructure, and the chronic absence of state-led investment in child well-being.

What kinds of futures are being silently engineered through this repeated and embodied exposure to violence? This rather bleak picture suggests that children's futures are shaped not only by external shocks but also by how systems respond, particularly through investments in shock-resilient social protection, education, health, child protection, and mental health services. What path forward can enhance child protection, reverse current trends, and place the next generation at the heart of national priorities?

3. UNICEF (2025), "The Future of Lebanon's Children", Authored by Stefano Visani, UNICEF Lebanon, October 2025.

4. MoPh, "Updated Total Toll of the aggression", 2 June 2026. https://www.moph.gov.lb/en/Media#/en/Media/view/85227/updated-total-toll-of-the-aggression-3468-martyrs-and-10577-wounded

# KEY FINDINGS

## 1. Psychosocial and Mental Health:
### Chronic rather than episodic trauma

The current context differs from traditional understandings of trauma as a single event with a clear beginning and end. Many Lebanese children experience continuous exposure to insecurity, displacement, economic hardship, and violence. Under such conditions, children have limited opportunities to recover psychologically and socially before being exposed to new shocks. Thus, repeated and continuous exposure to war makes violence itself a persistent condition of everyday life. In such contexts, children, parents, and even caregivers struggle not only to process trauma but also to identify and name its source clearly.

> *"When we talk about choices, we must also name the aggressor and the choices that we have are limited when we are constantly bombarded. […] So, choices are important, but choices are also embedded in structural and systemic violence, and this violence needs to be at least named." (Hala Kerbage, psychiatrist, University of Montpellier)*

Finally, emerging evidence suggests that prolonged exposure to war can produce biological and epigenetic effects that may affect future generations. For instance, recent research on Syrian refugee children exposed to war found evidence of epigenetic changes associated with cumulative exposure to conflict[5]. These biological changes appeared distinct from those observed among children exposed to other forms of violence, such as maltreatment. Thus, war may become biologically embedded in ways that affect health and development over long periods, potentially across generations.

5. Smeeth D, Ecker S, Chervova O, et al. War Exposure and DNA Methylation in Syrian Refugee Children and Adolescents. *JAMA Psychiatry*. 2025;82(2):191–200

## 2. Community Resilience and Civil Society Response:
### Intergenerational forms of harm

Discussions of children's wellbeing cannot be separated from the political realities producing harm. Traditionally, traumatic events are conceptualised as having a beginning and an end. Recovery becomes possible because the threat eventually disappears, and children can mobilise psychological and social resources to process their experiences. However, repeated war produces a different condition, "a shift of paradigm". Instead of recovering between crises, children continue developing within a constant atmosphere of threat. Under these conditions, the body and brain are repeatedly pushed into survival mode, often without sufficient opportunities for recovery.

> *"We lack studies on those children who lived through the war in the 1970s and 1980s, who became parents later on, and I am one of them. How has this impacted their parenting style? Their relational skills?" (Rose Habchi Daher, Representative of Himaya, Lebanon)*

Since 2023, one particularly striking observation in the recent wars in Lebanon concerns the changing nature of violence itself. Contemporary warfare appears increasingly oriented toward producing long-term consequences rather than solely immediate destruction. The destruction of entire urban areas and the reported use of white phosphorus are a few examples of violence whose effects extend into the future through environmental damage and impacts on future generations.

Parents and professional caregivers increasingly report exhaustion and a diminishing capacity to support children. Repeated crises might generate overprotection, family tensions, social withdrawal, and weakened coping mechanisms, making child wellbeing inseparable from the wellbeing of caregivers and communities themselves[6]. While parents remain children's primary source of protection, children also depend on supportive neighbourhoods, functioning schools, and safe communal spaces that provide continuity, belonging, and social connection. More broadly, social support also requires collective recognition of the suffering experienced by affected populations. Ignoring, minimising, or normalising violence can itself become a form of retraumatization. In this sense, the current war in Lebanon can also be understood as a "war on social support."

When social support is considered holistically, as a comprehensive ecosystem involving the widest forms of social recognition, the role of the State becomes instrumental to recognise, repair and protect what wars and displacement might have destroyed or interrupted.

6. Kerbage H, Elbejjani M, Bazzi O, El-Hage W, BouKhalil R, Corruble E, Purper-Ouakil D. 'We are all children of war': a qualitative inquiry into parenting following adolescents' recent traumatic exposure in a multiple crisis setting in Beirut, Lebanon. Eur J Psychotraumatol. 2024;15(1):2382650.

## 3. Social Protection and Policy Frameworks:
Insufficient progress in building shock-responsive social protection

> *Shocks are part of the reality of Lebanon. […] In the past seven years, there have been several shocks. So, it is something that needs to be incorporated in every planning that we do." (Peter Luigi Ragno, Chief of Social Policy at UNICEF Lebanon)*

In his intervention, Peter Luigi Ragno explained how in the early years of the Lebanese financial crisis, NGOs, UN agencies, and humanitarian actors working in the cash sector were leading on the provision of cash assistance, with limited coordination with the Government of Lebanon (GoL). The turning point was a new leadership role of the GOL in the cash sector between 2023 and 2024, through the launch of the National Social Protection Strategy, the consolidation of the NPTP and ESSN cash assistance under the Aman programme, and the launch of the National Disability Allowance (NDA). Between 2023 and 2026, government-led programmes have increasingly developed mechanisms capable of responding rapidly to crises while maintaining regular support to vulnerable households. Programmes such as Aman, the NDA, have been at the core of the cash-based emergency support, demonstrating great preparedness, improved coordination, and faster activation during recent displacement crises. According to Ragno, in the latest escalation in March 2026, the Shock-Responsive Safety Net (SRSN), the emergency arm of the Aman program, reached approximately 250,000 displaced families, representing roughly 800,000 individuals, while the NDA emergency reached approximately 15,500 families, 70,000 individuals. Both emergency programmes started delivering emergency cash assistance within one week of the start of the escalation. The SRSN also served as a platform to channel emergency cash assistance from other NGOs, therefore consolidating the response and avoiding duplication.

Despite progress in emergency responses, long-term investments in children remain inadequate. Shock responsiveness should not remain limited to cash assistance but should be expanded to include entire public systems, such as education, healthcare, disability services, and child protection.

# POLICY RECOMMENDATIONS

Policy commitments become meaningful only when reflected in budget allocations. Thus, debates around taxation, fiscal reform, and public expenditure should explicitly address investments in children, education, health, and social protection. The following policy recommendations are directed at national authorities, civil society, and international partners.

**1**

## Institutionalise child-centred shock-responsiveness

Shock responsiveness should no longer remain confined to cash assistance programmes, but should extend to education, healthcare, disability services, child protection, and mental health support. This requires long-term public investment, stronger coordination between ministries and municipalities, and predictable financing mechanisms integrated into national budgetary planning.

**2**

## Rebuild social support infrastructures

Prioritise the reconstruction and preservation of social support infrastructures, including safe schools, community centres, recreational spaces, psychosocial support services, and local care networks.

**3**

## Integrate intergenerational approaches into public policy

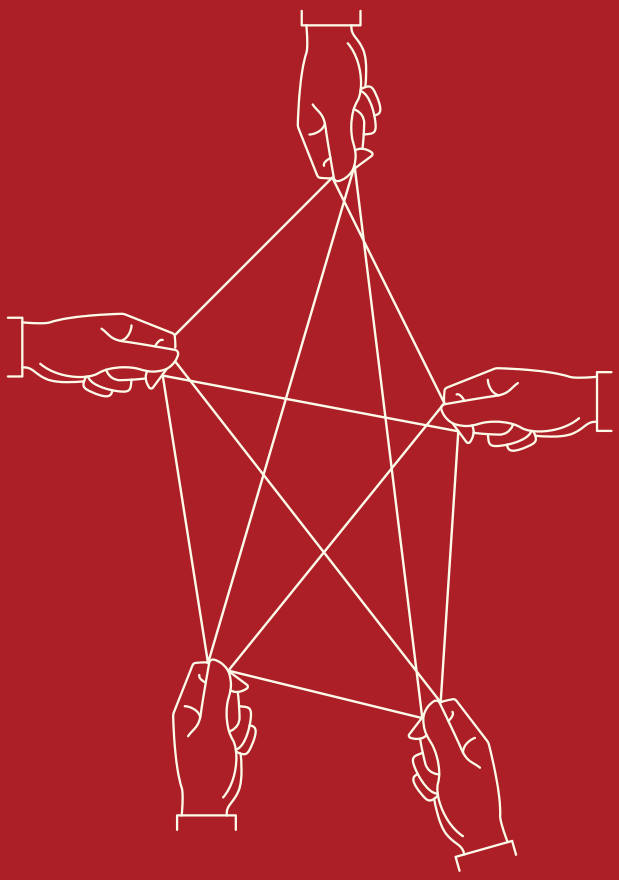
Protecting children requires supporting caregivers themselves, particularly parents, teachers, and frontline professionals experiencing cumulative exhaustion and trauma. Thus, national policies should integrate intergenerational approaches, thus investing in caregiver support, community psychosocial services, and longitudinal research on the long-term effects of war on children and families.

**4**

## Place children at the centre of national planning

Recovery, reconstruction, and fiscal reform agendas should place investments in children, education, health, disability support, and social care at the centre of national development, while systematically assessing the long-term impact of economic policies on children and future generations.

# CONCLUSION



The repeated crises affecting Lebanon's children are not isolated emergencies but cumulative processes that shape health, learning, wellbeing, and future life chances. While recent progress in developing more shock-responsive social protection mechanisms demonstrates that institutional adaptation is possible, emergency responses alone cannot compensate for the long-term consequences of war, displacement, and economic collapse. More specifically, child protection should be integrated within a wider political and institutional commitment to peacebuilding, social protection, collective care, and social stability. In this sense, rebuilding trust in public institutions depends not only on the capacity to distribute emergency aid, but also on the ability of the state to provide durable forms of protection for households and children living under conditions of chronic uncertainty. Ultimately, reducing children's exposure to repeated harm will require placing child wellbeing at the centre of national policy priorities and budgetary debates. Without such a shift, emergency responses risk remaining reactive and temporary, while the long-term social consequences of repeated war continue to accumulate across generations.