



Assessing Social Security Status of frontline workers in India & Nepal



Assessing Social Security Status of Front-Line Workers in India and Nepal

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Harshvrat Jaitli
CEO, VANI

List of Abbreviations

ASHA - Accredited Social Health Activist

BPL - Below Poverty Line

CAG - Comptroller and Auditor General of India

CSO - Civil Society Organization

ESIC - Employees' State Insurance Corporation

FCHV - Female Community Health Volunteer

ILO - International Labour Organisation

NDUW - National Database of Unorganized Workers

NHSRC - National Health Systems Resource Centre

NSAP - National Social Assistance Programme

OOP - Out-of-Pocket

PFRDA - Pension Fund Regulatory and Development Authority

PMEP - Prime Minister's Employment Programme

PM-JAY - Pradhan Mantri Jan Arogya Yojana

PMSBY - Pradhan Mantri Suraksha Bima Yojana

PM-SYM - Pradhan Mantri Shram Yogi Maandhan

SDG - Sustainable Development Goal

SSF - Social Security Fund

UAN - Universal Account Number

UNDP - United Nations Development Programme

UNICEF - United Nations Children's Fund

VANI - Voluntary Action Network India

WHO - World Health Organization

Abstract

This study examines the socio-economic conditions and social security status of frontline workers affiliated with civil society organizations (CSOs) in India and Nepal, combining a detailed policy review with empirical evidence from organizational surveys. The analysis reveals that frontline workers, predominantly women from marginalized communities, face precarious employment, low remuneration, significant health and safety risks, and widespread exclusion from formal social security benefits. Despite legal frameworks like India's Social Security Code and Nepal's Contribution-Based Social Security Act, only a minority of workers benefit from health or accident insurance, pensions, or provident funds, with volunteers and project-based staff particularly vulnerable. By analysing national schemes, coverage gaps, country-specific challenges, and collaborative opportunities, the report highlights systemic weaknesses and proposes actionable recommendations including universal minimum benefits, donor-supported social security budgets, explicit recognition for volunteers, gender-sensitive policies, and establishing a cross-border advocacy platform to enhance protection for essential but often invisibles frontline workers.

Introduction

Civil society organizations in India and Nepal play a pivotal role in delivering grassroots services ranging from health and disaster relief to education and rights advocacy, mobilizing millions of frontline workers who operate in precarious and high-risk contexts. These workers, largely women and members of marginalized social groups, face low or irregular pay, lack of formal employment contracts, and limited access to occupational protections, reflecting a broader challenge in extending social security to the vast unorganized sector. While both countries have enacted social security legislation aimed at informal workers—such as India’s Social Security Code and e-Shram portal, and Nepal’s Contribution-Based Social Security Fund—implementation remains patchy, exclusionary, and bureaucratically complex, with legal and practical ambiguities surrounding volunteer and project-based roles. Drawing on survey responses from over 80 CSOs and critical policy analysis spanning 2024–2025, this study provides a comparative snapshot of benefits accessed by frontline workers, highlights coverage gaps and barriers, documents qualitative experiences from the field, and synthesizes policy recommendations. Addressing these challenges and bridging the gap between policy ambition and lived reality is essential to achieving decent work, social inclusion, and equitable development across both countries.

Executive Summary

Frontline workers in civil society organizations (CSOs) in India and Nepal are critical actors in community development, leading initiatives such as disaster relief, health education, livelihood promotion, and rights advocacy. Operating within the unorganized sector, these workers primarily volunteers or minimally paid staff face precarious working conditions and limited legal protections. In India, 91% of the workforce (437 million) is informal, while in Nepal, 84.6% (2.7 million) falls under informal arrangements, with women forming the majority (Ministry of Labour and Employment, 2024; Central Bureau of Statistics, 2023). Within this larger informal economy, CSO-affiliated frontline workers remain among the least recognized and supported, despite their pivotal role in advancing Sustainable Development Goal 8 on decent work.

In India, CSO-affiliated frontline workers are often women from marginalized groups, working in diverse environments ranging from urban slums to remote tribal areas. They are typically engaged on short-term contracts or entirely volunteer-based arrangements, with low or irregular stipends ranging between ₹2,000–₹5,000 monthly. Many receive no formal work contracts, excluding them from protections under labor legislation such as the Minimum Wages Act. Their work exposes them to occupational hazards, for instance during disaster responses in floods or cyclones, and to burnout from extended working hours. The COVID-19 pandemic further intensified pressures, with 68% of CSO frontline workers reporting heightened stress due to inadequate mental health support (VANI, 2020; UN Women, 2022). Gender and caste hierarchies compound these vulnerabilities, limiting their access to critical institutional schemes and benefits, leaving them outside formal safety nets such as the Employees' State Insurance Corporation.

In Nepal, CSO frontline volunteers are often recruited from marginalized communities, including Dalits and ethnic minorities, and are primarily

concentrated in rural, disaster-prone regions. These workers typically operate without financial stability, with stipends ranging from NPR 1,000–3,000 per month, and in some cases, volunteers remain entirely unpaid, relying instead on subsistence agriculture for survival. The nature of their roles exposes them to risks such as landslides, flooding, and harassment during fieldwork. Discriminatory practices often exclude Dalits, women, and gender minorities from training opportunities and occupational support networks, deepening inequities. During the COVID-19 pandemic, nearly 70% of CSO frontline workers reported reduced or lost incomes, with only limited access to relief interventions. Their exclusion from legal frameworks, such as the Labour Act, 2017, means they lack pathways to social security coverage (UNICEF, 2023; World Bank, 2022).

In India, the social security setup anchored in the Code on Social Security, 2020, and platforms like the e-Shram Portal has registered over 30 crore workers, but participation by CSO volunteers remains negligible due to documentation barriers, lack of recognition, and absence of tailored provisions. While schemes such as the Pradhan Mantri Suraksha Bima Yojana offer accident insurance, CSO-affiliated frontline workers often fall through the cracks, since they are overlooked in the eligibility framework.

In Nepal, the Contribution-Based Social Security Act, 2017, extended to informal workers in 2023, provides access to health insurance and pensions. However, resource constraints and bureaucratic delays have meant little practical coverage for CSO-affiliated volunteers, who's unpaid or token-compensated status keeps them outside formal registration and contribution systems (ILO, 2024; Ministry of Labour, Employment, and Social Security, 2023).

Both India and Nepal face systemic gaps in coverage only about 6% of informal workers are protected in India and 32.9% in Nepal with CSO frontline volunteers particularly excluded. Persistent challenges include

lack of legal recognition, gender inequities, and reliance on volunteer labor without safeguards. To address these issues, governments should formally recognize CSO-affiliated frontline workers and extend a universal package of social security benefits, including health insurance, accident coverage, and pension schemes, irrespective of employment status. Ensuring gender-sensitive outreach and mandatory inclusion of social protection measures in donor-funded CSO projects are vital. A cross-border CSO forum between India and Nepal could also facilitate sharing best practices and harmonizing protections.

These frontline CSO workers are indispensable to community resilience, but their vulnerabilities demand urgent attention through comprehensive policy reform to ensure social inclusion and decent work opportunities.

Harshvrat Jaitli
CEO, VANI

Socio-Economic Conditions and Social Security Schemes for Frontline Workers in CSOs in India and Nepal

Frontline workers associated with civil society organizations (CSOs) in India and Nepal are central to grassroots development, driving vital interventions in disaster relief, health awareness, rights advocacy, environmental protection, and livelihood programs. As volunteers or low-paid employees, these frontline CSO workers are embedded in the unorganized sector, characteristically lacking formal contracts, reliable income, and substantive labor protections. In India, the unorganized sector accounts for 91% of the workforce, amounting to approximately 437 million individuals, with CSO volunteers making up a significant yet under-recognized portion (Ministry of Labour and Employment, 2024). In Nepal, informal employment covers 84.6% of the labor force, or 2.7 million workers, with women representing the predominant demographic among CSO volunteers, particularly in community outreach and disaster response roles (Central Bureau of Statistics, 2023).

For this study, frontline workers are defined as individuals directly engaging with communities to provide essential services—such as distributing relief during disasters, conducting health education campaigns, and supporting marginalized groups like Scheduled Castes and Dalits—but do not include government-deployed cadres such as Accredited Social Health Activists (ASHAs) or Female Community Health Volunteers (FCHVs). CSO frontline workers frequently operate in hazardous settings and face persistent risks, from natural disasters to exposure to social ostracism and harassment.

Social security, in this context, encompasses protections and benefits such as health and accident insurance, pension contributions, provident funds, maternity and disability provisions—necessary for reducing the

vulnerabilities of informal workers and advancing Sustainable Development Goal (SDG) 8 on decent work and economic growth (United Nations, 2015). CSO frontline workers experience unstable employment, extremely low or absent remuneration, and frequent exposure to physical, psychological, and social hazards. These challenges were amplified during the COVID-19 pandemic, as many CSO volunteers continued frontline activities distributing food, masks, and medicines—without adequate protection, pay, or institutional support (ILO, 2021).

This literature review specifically examines the working conditions of CSO-affiliated frontline workers in India and Nepal, reviewing legislative frameworks, relevant government policies, and social security programs. It draws extensively on government documents, international organization reports (ILO, World Bank, UNDP, WHO), and academic literature, assessing the reach and impact of these policies on voluntary sector workers.

The review provides a comparative analysis of social security schemes, identifying critical gaps in coverage, accessibility, and design for CSO volunteers—as opposed to government-sponsored workers.

Socio-Economic Conditions of Frontline Workers

Frontline workers in Indian civil society organizations (CSOs) distinct from government-affiliated roles like ASHAs or Anganwadi workers provide crucial services in some of the country's most difficult settings, including urban slums and isolated tribal regions. These CSO-affiliated workers and volunteers are overwhelmingly women (estimated at 70%), many from marginalized communities such as Scheduled Castes, Scheduled Tribes, and Other Backward Classes, and their engagement is marked by deep socio-economic disadvantages and barriers to opportunity. In these environments, their work often entails intensive interaction with vulnerable populations, implementing disaster relief,

health awareness drives, rights campaigns, and grassroots advocacy. Despite their frontline roles, most CSO workers receive only modest or irregular compensation, generally in the form of stipends rather than salaries, and rarely benefit from the protection of formal contracts.

This precarious financial situation is made worse by exclusion from legal protections such as the Minimum Wages Act, with many CSO workers forced to rely on supplementary income-generating activities, such as petty trade, farming, or domestic labor, to support their families. The instability of income and uncertain work arrangements means that the threat of job loss or delayed payment is ever-present, impacting both the workers' livelihoods and their ability to serve communities consistently. For instance, research from Oxfam India indicates that a significant majority of CSO workers especially women supplement their CSO income with domestic work or informal activity, exacerbating stress and deteriorating household welfare.

Occupational risks constitute a major concern for CSO volunteers, who routinely face threats to their health and physical safety, especially when responding to natural disasters, public health emergencies, or social unrest. During flood or pandemic responses, CSO workers frequently suffer injuries, stress, and even violence, particularly when navigating community resistance or hazardous environments. Mental health issues, such as anxiety and burnout, have become increasingly prevalent among these workers, who often report working long hours under severe pressure, yet lack access to structured mental health support or meaningful rest.

Systemic gender and social inequalities further compound the challenges faced by these CSO workers. Women must juggle paid and unpaid labor, balancing intense field activities with domestic care responsibilities an issue that significantly increases their physical and psychological burdens. In addition, those from marginalized groups, such as Scheduled Castes and Scheduled Tribes, frequently encounter

exclusion from skills training, resource allocation, and community support mechanisms, restricting both career advancement and personal development. Documented cases in various states highlight how entrenched caste and gender-based biases continue to act as barriers to participation, access, and recognition among CSO workers and volunteers.

Recognition remains a persistent barrier for CSO frontline workers, who are rarely counted as formal employees and are not covered by mainstream labor protection or social security schemes. Their “volunteer” status within CSOs means that, even when performing essential duties, they are routinely omitted from eligibility under programs such as the Employees’ State Insurance Corporation (ESIC) and lack clear pathways to workplace safety or employment benefits. This institutional invisibility prevents access to most official support systems and accentuates vulnerability in times of crisis.

The economic impacts of COVID-19 have dramatically strained the CSO workforce, aggravating existing inequalities and financial uncertainty. The suspension of many programs and disruptions to CSO funding have led to widespread income loss and job insecurity, without access to unemployment benefits or emergency relief schemes. Disaster relief volunteers and community workers continue to report heightened hardship, reduced stipends, and exclusion from governmental support mechanisms, underscoring the fragility of the current support structures available to the sector.

Frontline volunteers and workers in Nepal’s CSO sector separate from state-linked FCHVs carry out vital roles in rural and hazard-prone areas, including the Terai plains and mountainous regions. These workers, often from Dalit and ethnic minority backgrounds, confront layered socio-economic hardships intensified by Nepal’s challenging geography and limited infrastructure. CSO volunteers regularly engage in a wide range of activities, such as disaster response, health advocacy, and rights

campaigns, directly interacting with populations most in need of assistance and support.

Remuneration for CSO-associated workers and volunteers remains exceedingly low or absent. Instead of salaries, many receive modest stipends typically between NPR 1,000 and 3,000 per month which rarely meet subsistence needs, compelling them to rely on informal labor, small agricultural plots, or street-level trading for survival. According to studies, a large proportion of these workers, especially women, juggle multiple informal jobs alongside volunteer commitments, making their economic situation highly precarious and exposing them to cycles of poverty and deprivation.

Frontline CSO workers in Nepal regularly operate under dangerous and stressful conditions, from exposure to landslides and flooding during relief operations to the threat of harassment while advocating for land rights or gender equality. Mental health concerns including anxiety, exhaustion, and trauma are widespread, particularly during public health crises like the COVID-19 pandemic, which has seen many volunteers assigned heavy workloads (such as pandemic tracing and vaccine outreach) with little institutional protection, support, or resources.

Social exclusion, especially of Dalits and gender minorities, exacerbates the vulnerabilities of CSO workers in Nepal. Discriminatory practices restrict the participation of these groups in training and access to resources, undermining their ability to contribute to CSO programs and benefit from organizational support. Women, representing an overwhelming majority of informal sector workers, continue to face structural obstacles stemming from unpaid care duties and restrictive social norms, which limit their mobility, autonomy, and inclusion within the CSO space.

Policy structures in Nepal have yet to acknowledge CSO volunteers and workers as formal members of the workforce, leaving them outside the

ambit of legal protections and social security frameworks such as those outlined in the Labour Act, 2017. While these volunteers have played a pivotal role in achieving social gains, such as reducing maternal mortality or providing targeted disaster relief, their continued classification as “volunteers” denies them access to workplace safety, health coverage, pension schemes, and other vital benefits.

Post-COVID, the disadvantages facing CSO workers in Nepal have intensified, with widespread income disruptions, declining program support, and outright exclusion from government relief mechanisms due to their informal status. For some, participation in disaster response efforts such as those during the 2021 Melamchi floods brought added financial hardship without compensation or official recognition, further highlighting the gaps in existing protection frameworks.

Social Security in India

India’s social security architecture for workers in the unorganized sector is primarily anchored in the Unorganized Workers’ Social Security Act, 2008. This Act broadly defines unorganized workers as individuals engaged in self-employment, home-based activities, or wage work within informal settings, but not covered by the main provident fund or state insurance regulations. Recent consolidation through the Code on Social Security, 2020, aims to streamline coverage by merging nine different labor laws, introducing eligibility for newer work categories such as gig and platform workers, and allowing portability of benefits via Aadhaar-linked Universal Account Numbers. Underpinning these measures, the Indian Constitution mandates the state’s obligation to aid against unemployment, sickness, disability, and old age, establishing a constitutional foundation for welfare policies. Ancillary approaches, like the National Policy on Skill Development and Entrepreneurship and various state welfare boards, attempt to address the diversity among informal workers, but rarely extend protection to CSO volunteers unless they match narrowly defined occupational categories.

Several major national schemes target different facets of social protection for unorganized workers. The e-Shram Portal, launched in 2021, is a flagship effort to develop a comprehensive database for informal sector workers, aiming to facilitate their access to existing social welfare and disaster relief. Registration, although theoretically open to CSO volunteers and covering millions, is plagued by digital and documentation barriers: only a quarter of rural workers are aware of the scheme, and requirements like Aadhaar exclude many, especially internal migrants or those lacking formal IDs. While e-Shram has enabled some frontline CSO workers to access benefits like health and accident insurance, its reach is limited by ongoing registration and awareness issues, particularly in marginalized and remote communities.

Pension coverage is attempted through schemes such as the Pradhan Mantri Shram Yogi Maandhan (PMSYM), intended for workers with monthly incomes below ₹15,000, theoretically encompassing low-income CSO volunteers. Workers and volunteers must contribute monthly over decades to eventually receive a small pension post-retirement, but erratic and delayed incomes frequently cause dropouts or prevent enrollment altogether. Only a fraction of eligible workers has joined, reflecting the unsuitability of persistent contributory requirements for those on precarious or stipend-based incomes. Accident insurance, nominally available through Pradhan Mantri Suraksha Bima Yojana (PMSBY), suffers from similar limitations: lack of bank accounts and low enrollment rates among rural volunteers hinder impact, and the process of claim settlements is slow, with many left unresolved for extended periods. Health insurance under the Ayushman Bharat's Pradhan Mantri Jan Arogya Yojana (PM-JAY) does offer some coverage for major hospitalization but not the more frequent outpatient care. CSO volunteers and workers report persistent exclusion from the scheme due to identification barriers or because state-level implementation varies widely, leaving coverage partial and inconsistent.

Non-contributory pensions and other social assistance for elderly or

widowed informal workers are technically available under the National Social Assistance Programme (NSAP), but these offer only minimal benefits and apply to a small proportion of CSO volunteers due to strict age, income, and documentation thresholds. Other sector-specific funds, like the Building and Other Construction Workers Welfare Boards, exclude most volunteer-based work. Broader voluntary pension options such as Atal Pension Yojana exist but similarly suffer from very low uptake due to lack of awareness and the difficulty of regular contributions for those on uncertain stipends.

A series of overlapping and persistent implementation challenges continue to limit the impact of these social security measures. Coverage remains extremely limited—only about 6% of all unorganized workers, including CSO volunteers, are currently accessing any form of meaningful social security. Awareness remains a major barrier, especially among women and traditionally marginalized groups; only a small minority of eligible rural volunteers even know about flagship schemes like e-Shram. Where workers do attempt to enroll, documentation requirements such as Aadhaar or bank account ownership quickly exclude a substantial share—especially internal migrants or those in areas with weak administrative reach. Earnings instability undermines the effectiveness of contributory schemes, as many workers and volunteers cannot regularly pay premiums or sustain participation. Health care costs continue to represent a major risk, driving millions of informal sector workers into poverty every year and inflicting a disproportionate burden on those without access to insurance or state subsidies. Furthermore, administration is hampered by slow processing, unclear procedures, and the weak enforcement authority of advisory boards, leaving many registrations unprocessed or claims unsettled. Most fundamentally, the legal and social classification of CSO volunteers as “non-workers” or mere “beneficiaries” means they remain systematically excluded from key benefits such as formal insurance, provident funds, or strong anti-harassment protocols, even as they undertake hazardous frontline duties.

The consequences of these systemic gaps are profound for India's CSO workforce. Economic insecurity is endemic, forcing many volunteers to juggle multiple jobs or informal work to make ends meet, often at the expense of their health or family life. Stress, burnout, and work-related mental health challenges are widespread, exacerbated by hostile or risky field conditions especially during emergencies like the COVID-19 pandemic, when volunteers face both heightened workloads and exposure to public hostility or violence. Social marginalization, especially linked to gender and caste, persists both as a barrier to accessing available benefits and as an amplifier of daily risks and discrimination. The pandemic further deepened precarity, pushing a large proportion of CSO workers into hardship as stipends and program support evaporated, with little recourse to government relief or emergency support measures.

Social Security in Nepal

Nepal's social protection system is shaped by constitutional guarantees that mandate the right to social security and special protections for vulnerable populations, including women, Dalits, and ethnic minorities. Recent policy developments, such as the Contribution-Based Social Security Act (2017) and its associated regulations, seek to extend coverage to the wider informal workforce—constituting 84.6% of all workers—as outlined in the country's 16th National Development Plan. This plan sets ambitious targets to raise social security coverage and reduce informal employment, with an explicit focus on addressing gender disparities and strengthening shock-responsive mechanisms. The Integrated National Social Protection Framework further attempts to address systemic gaps and promote equity for women volunteers, who dominate the informal and CSO sectors. However, key legislation like the Labour Act (2017) continues to exclude many informal workers, especially those engaged in voluntary activities with civil society organizations, given their non-wage and irregular employment status.

For CSO-affiliated volunteers, access to social security remains extremely limited. The Social Security Fund (SSF) was expanded in 2023 to theoretically include informal sector workers and volunteers, yet only a fraction has enrolled due to contribution barriers, irregular or absent stipends, and low awareness. Even where registration is possible, CSOs often face practical and financial obstacles in contributing the employer share required, resulting in minimal real-world coverage for volunteers working in disaster response, rights advocacy, or community development. Health insurance programs exist to reduce out-of-pocket expenses for major hospital care, but these require annual premiums and depend on access to formal healthcare facilities barriers that frequently exclude volunteers, especially in remote or underserved areas. Most volunteers, who are working age and typically do not meet strict criteria for old age, widow, or disability assistance, are largely excluded from non-contributory cash transfer schemes distributed by local governments.

Other government efforts, such as the Prime Minister's Employment Programme, offer short-term employment opportunities for rural youth and informal workers in public works projects. However, these interventions do not include social security or insurance components and generally fail to benefit CSO volunteers, whose work is ongoing and often unpaid. The temporary nature and restricted scope of such programs mean they provide little sustainable support for volunteers facing economic insecurity in Nepal's civil society space.

Persistent implementation issues significantly diminish the effectiveness of existing social protection measures. Although Nepal has made progress in raising coverage rates, the majority of CSO volunteers along with other informal workers remain unprotected, with only about a third of the population accessing any type of formal social security. The contributory designs of key schemes create exclusion for volunteers and low-income workers, especially as CSOs are rarely able to meet financial or administrative requirements. Documentation barriers, particularly the

lack of citizenship certificates among marginalized groups, limit eligibility for many women, Dalit, and ethnic minority volunteers, further compounding inequality. Fiscal constraints, strict contribution mandates, and slow processing times add to the policy and administrative burdens, hindering outreach and the expansion of coverage. Women, who form the backbone of CSO volunteer work, experience higher rates of exclusion due to lower literacy, restricted access to documentation, and entrenched social discrimination. The continued classification of volunteers as “non-workers” prevents full recognition of their contributions and eligibility for employer-supported benefits, despite their critical roles in disaster responses and advocacy for vulnerable groups.

The socio-economic realities for CSO volunteers are marked by pronounced economic instability, as most rely on subsistence agriculture or informal work to supplement limited or unpaid volunteer activities. These circumstances result in persistent financial stress, with a majority of volunteers dedicating significant time to unpaid labor and reporting high levels of anxiety and insecurity, particularly during health crises like the COVID-19 pandemic. Social marginalization remains acute for Dalit and gender minority volunteers, who face obstacles to participating in training or accessing resources due to discrimination. The fallout from the pandemic amplified income loss, exposed gaps in government support, and highlighted the vulnerability of CSO volunteers responding to emergencies without insurance, adequate pay, or state relief.

Comparatively, both India and Nepal heavily depend on informal labor, with women dominating CSO volunteer roles and facing unique challenges related to exclusion, documentation, and social barriers. India’s legal framework is broader and integrates contributory and non-contributory schemes, whereas Nepal’s SSF remains largely contribution-based, with very limited non-contributory assistance. Coverage rates are low in both contexts just 6% in India and 32.9% in

Nepal with systemic weaknesses in implementation and little recognition for CSO volunteers. Neither country explicitly targets voluntary sector workers for social security, despite their indispensable roles in health, development, and disaster response. The ongoing exclusion and underappreciation of CSO volunteers points to an urgent need for deeper reforms and innovative models to ensure real protection, equity, and decency of work in both national contexts.

Frontline workers in civil society organizations (CSOs) in India and Nepal are vital pillars of community resilience, providing indispensable services across sectors such as disaster relief, health education, advocacy, and livelihood support. Operating in challenging circumstances often in marginalized communities, remote rural areas, or hazard-prone zones these workers and volunteers face profound socio-economic vulnerabilities that compromise their well-being and limit their effectiveness. Despite the critical nature of their roles, their earnings are typically low or nonexistent, and they endure significant health risks, occupational hazards, and societal exclusion that deepen their precarity.

India's social security framework offers a range of foundational mechanisms aimed at improving protections for informal sector workers. The unorganized Workers' Social Security Act, 2008, provides the legal basis for extending welfare to unorganized workers, complemented by innovative platforms such as the e-Shram Portal, which seeks to link workers to benefits across states through digitized registration. Schemes such as the Pradhan Mantri Shram Yogi Maandhan (PM-SYM) pension scheme and the Pradhan Mantri Jan Arogya Yojana (PM-JAY) health insurance program represent scalable attempts to provide financial security and healthcare access. However, despite these promising frameworks, actual coverage remains strikingly low, around 6% for informal workers overall and frontline CSO volunteers are regularly excluded due to their classification as non-wage or volunteer workers.

This exclusion is compounded by systemic obstacles such as documentation requirements, digital illiteracy, irregular or stipendiary incomes, and lack of formal employment contracts, which collectively prevent many volunteers from accessing existing social security mechanisms. Additionally, implementation challenges manifest as low awareness of schemes, administrative bottlenecks, and geographic disparities across India's diverse states, further limiting the reach to those most in need.

Nepal's social security system, anchored in its Constitution and legislation such as the Contribution-Based Social Security Act (2017), has undergone steps toward greater inclusion of informal sector workers, with the Social Security Fund expanding to cover some CSO volunteers since 2023. This reflects a growing recognition of volunteers' valuable contributions to community health, disaster response, and social advocacy. Complementary initiatives like the National Health Insurance program and non-contributory social assistance provide additional layers of support, particularly for vulnerable populations. Nevertheless, coverage in Nepal remains limited to approximately 32.9% of the working-age population, with a multitude of barriers impeding effective access for CSO volunteers. These include fiscal constraints restricting state subsidies, contribution requirements that many volunteers cannot meet, widespread lack of identity documentation especially among marginalized Dalit and ethnic groups, and the absence of explicit recognition of volunteer status under labor law. Consequently, many frontline CSO workers remain excluded from formal benefits, and the fragmented nature of governance across multiple local governments with limited coordination intensifies these challenges.

A shared obstacle in both countries is the systemic failure to legally recognize frontline CSO volunteers as formal workers entitled to social security benefits. This exclusion not only perpetuates economic fragility and health vulnerabilities among volunteers but also undermines the

sustainability and effectiveness of grassroots development efforts. Without adequate protection, volunteers bear disproportionate risks, from occupational injuries and mental health strains to economic shocks wrought by crises like the COVID-19 pandemic without the buffer of formal social safety nets.

Addressing these entrenched gaps requires a multifaceted approach. Simplifying registration and enrollment procedures to reduce barriers such as documentation demands and digital exclusion is critical. Tailoring social security policies to acknowledge the unique status of volunteers, including offering non-contributory or subsidized benefits, can bridge current coverage deficits. Gender-responsive outreach and capacity building are also essential to ensure equitable access for women and marginalized groups who constitute most frontline CSO workers. Moreover, fostering cross-border collaboration and creating regional forums between India and Nepal can facilitate the exchange of best practices, harmonize policy innovations, and build a shared advocacy platform for the rights of CSO volunteers.

By enhancing the accessibility, inclusivity, and responsiveness of social security frameworks for frontline CSO workers and volunteers, India and Nepal can take crucial steps toward ensuring decent work and economic security in the unorganized sector. Such reforms will be instrumental in advancing Sustainable Development Goal 8, which seeks to promote sustained, inclusive economic growth and productive employment. Ultimately, empowering these essential community actors through effective social protection not only uplifts individual livelihoods but also strengthens the resilience and equity of the societies they serve.

Social Security Status of Frontline Workers in India and Nepal – Empirical Findings and Analysis

Scope and Methodology

The civil society sector in India and Nepal plays a crucial role in delivering frontline services to diverse populations, especially those most vulnerable to social and economic marginalization. These organizations operate extensively at the grassroots level, engaging in activities that range from healthcare provision, educational outreach, and disaster response to advocacy for human rights and environmental sustainability. Despite their significant contributions to social welfare and development outcomes, the frontline workers within these CSOs remain largely excluded from formal social security frameworks. This exclusion results in a persistent lack of adequate policy support or systematic protection for these workers, many of whom endure insecure employment arrangements with minimal access to social benefits.

India's civil society landscape is both vast and complex, reflective of the country's sheer demographic and cultural diversity. National statistics estimate the existence of approximately 3.3 million NGOs within the country, of which more than 187,000 are formally registered and listed on the government's NGO Darpan portal an official platform for sector transparency and governance. These organizations operate across all regions of India, addressing a wide variety of social challenges with operational models tailored to local contexts, from urban slums to remote rural and tribal areas. Significantly, India's informal labor market encompasses over 390 million workers, accounting for roughly 90% of the national workforce. Many of these individuals, including community health workers, sanitation staff, educators, and volunteers engaged

through CSOs, work under precarious conditions that lack formal contracts, social protection, and legal safeguards. Their reliance on CSO-led interventions places civil society at the core of informal sector support, yet formal labor laws and social security provisions fail to encompass or recognize them appropriately.

In Nepal, despite its smaller demographic scale of around 30 million people, the civil society sector exhibits considerable vitality and diversity. By the late 2010s, there were approximately 50,000 registered NGOs, with a pronounced concentration of over 25,000 organizations based in the Kathmandu Valley. This urban clustering belies an extensive rural presence, where numerous community-based organizations operate in remote and often disaster-prone areas. Like India, Nepal's workforce is predominantly informal, with around 85% of workers engaged in unregulated, non-standard employment or subsistence activities. Consequently, a large portion of the population relies on CSOs to fill systemic gaps created by limited state capacity or geographic isolation. These organizations play indispensable roles in providing services and sustaining livelihoods, particularly among marginalized and vulnerable groups who would otherwise be excluded from formal welfare systems.

This study draws upon a detailed survey of over 80 civil society organizations, purposively selected to ensure broad representation from multiple Indian states and Nepalese provinces. These CSOs encompass a wide range of sectors and functional areas including health, education, disaster response, rights advocacy, and environmental conservation. The diversity of the sample provides a comprehensive panorama of operational contexts, workforce composition, and the prevailing conditions facing frontline workers who are engaged in voluntary or minimally remunerated roles. Survey instruments captured information on the types and extent of social security benefits extended by these organizations, as well as the practical and structural challenges they

face in formalizing protections for their frontline workforce. Emphasis was placed on understanding the unique vulnerabilities and gaps experienced by workers whose roles are community-facing but remain largely informal and unsupported.

Complementing the primary data, this analysis integrates an extensive review of recent government publications, academic studies, and reports from international agencies and multilateral institutions produced between 2024 and 2025. This multidimensional evidence base allows a nuanced understanding of how existing social security frameworks interact with the realities of CSO frontline workers, shedding light on systemic policy deficiencies and implementation bottlenecks. It also facilitates cross-contextual comparisons and extrapolations from organizational-level experiences to the broader sectoral landscape in both countries.

The methodological design of this research, combining qualitative and quantitative inputs with documentary analysis, equips stakeholders in the development and policy domains with robust, evidence-based insights. It supports the identification of specific barriers to social security access for frontline CSO workers and highlights the urgent need for legislative and administrative reforms. Ultimately, the study aims to inform targeted strategies that enhance social protection for this critical yet neglected segment of the labor force, thereby contributing to more equitable and resilient community-level development outcomes across India and Nepal.

Frontline Workforce – Numbers, Roles, and Social Security Status

Who are the Frontline Workers?

The frontline workforce within civil society organizations (CSOs) across India and Nepal comprises a diverse range of roles vital to community development and service provision. This workforce includes health and sanitation operatives, disaster response personnel, grassroots

organizers, educators, and counselors. Many engaged in these capacities work on a volunteer basis or receive stipends tied to specific projects, lacking the protection and stability afforded by formal employment contracts. Their roles are typically embedded within informal, temporary engagement models that expose them to considerable occupational risk and economic insecurity. These workers contribute across multiple domains—including health promotion, emergency management, community mobilization, and rights advocacy—addressing the complex and evolving needs of marginalized and underserved populations.

A key characteristic of this workforce is its overwhelming composition of women. In India, for example, data shows that women constitute more than 85% of frontline staff across various CSO activities, reflecting broader trends beyond government-linked programs. This female majority predominates within numerous civil society sectors and frontline roles, highlighting not only their centrality to service delivery but also underscoring gendered dimensions of labor that shape their experiences. Alongside gender, these workers disproportionately originate from socially and economically marginalized communities, principally Scheduled Castes and Scheduled Tribes. This demographic profile underscores the layered vulnerabilities faced by the frontline workforce where gender disparities intersect with caste-based and economic marginalization to restrict access to professional development, capacity-building initiatives, and occupational safeguards. Such systemic exclusion perpetuates structural inequities and compounds the precarity of these workers, limiting their upward mobility and reinforcing cycles of vulnerability.

The scale and distribution of frontline personnel within CSOs throughout India and Nepal are substantial and varied. Organizational reports indicate a broad spectrum in workforce size, with some CSOs managing fewer than a dozen frontline workers, while others coordinate large networks involving thousands. When aggregated across the

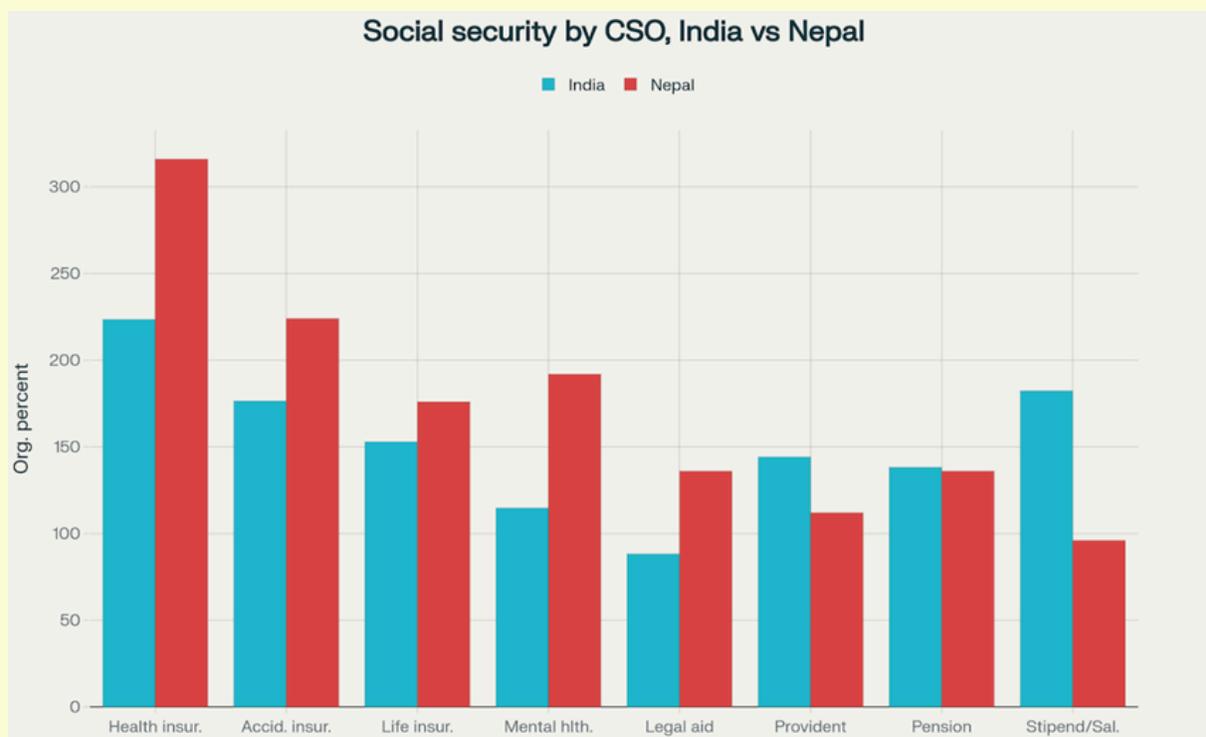
multitude of CSOs operating nationwide numbering in the hundreds of thousands to millions the total frontline workforce represents a strikingly extensive human resource pool crucial for delivering services to remote rural, tribal, and urban marginalized communities. This expansive footprint underscores the indispensable role of these workers in maintaining access to essential health services, educational outreach, disaster relief efforts, and advocacy at the grassroots level. It further emphasizes the pressing need for tailored policy frameworks that formally recognize and extend protections to this workforce, thereby enhancing the sustainability, effectiveness, and resilience of civil society interventions across the diverse sociopolitical terrains of both countries.

Types and Prevalence of Social Security Benefits

Both India and Nepal have developed official social security frameworks aimed at extending protections to informal and unorganized workers. India's portfolio includes initiatives such as the e-Shram registration portal, the Pradhan Mantri Shram Yogi Maandhan (PMSYM) pension scheme, and the Employees' State Insurance Corporation (ESIC), while Nepal operates the Social Security Fund alongside a range of targeted social protection programs. Despite their formal existence and stated objectives, the actual coverage and effective inclusion of frontline workers affiliated with civil society organizations remain limited and inconsistent. These workers frequently fall outside the practical reach of these schemes due to structural barriers such as irregular employment status, lack of formal recognition, and difficulties fulfilling contribution requirements.

To better understand the ground realities, the survey explicitly inquired about the benefits directly received by frontline CSO workers, encompassing not only health insurance and pensions but also less formal supports like monthly stipends and occupational safety provisions. This approach moved beyond assessing mere policy availability, focusing instead on actual benefit delivery as experienced

within the sector. The findings revealed a persistent disconnect between policy frameworks and frontline implementation. While some CSOs manage to extend limited forms of social protection to their workers such as basic health cover or emergency stipends these instances are often project-specific, irregular, or confined to better-resourced organizations. For the majority of CSO frontline workers, comprehensive, consistent access to social security benefits remains elusive. This gap is further compounded by administrative complexities, lack of awareness, and the absence of mechanisms to enforce employer contributions or state-supported subsidies specifically tailored to volunteer or stipend-based engagements. Consequently, the frontline workforce continues to experience significant vulnerabilities related to health risks, income instability, and absence of occupational safeguards, highlighting the urgent need for reforms that bridge the divide between formal social security schemes and the realities of civil society labor. The prevalence of each (as a share of surveyed CSOs, so directly comparable) is shown below:



Share of Organizations Providing Key Social Security Benefits to Frontline Workers (India vs Nepal, Study Sample, % of Respondents)

Key Insights:

A comprehensive survey of civil society organizations (CSOs) in India reveals that approximately 76% provide some form of health insurance coverage to their frontline staff. However, in most cases, this coverage remains basic, often limited to reimbursements for medical consultations or hospitalization expenses with minimal additional benefits. This limitation reflects broader systemic constraints within India's healthcare sector, where overstretched public facilities and prohibitively high private healthcare costs restrict comprehensive coverage options. In addition, around 60% of these organizations extend accident insurance to their employees, although such policies frequently cover only standard workplace injuries and may exclude high-risk situations common to grassroots work, or offer compensation that fails to meet the severity of potential harm. Monthly financial remuneration is more widely provided, with 62% of CSOs offering stipends or salaries, but these payments are generally modest and frequently inadequate to meet the inflation-adjusted cost of living particularly in urban centers or economically disadvantaged rural regions. This disparity between compensation and cost of living is especially concerning given the critical services CSOs deliver in sectors with limited government or private sector presence, such as healthcare, education, and social welfare.

Despite these efforts, essential benefits like life insurance, provident funds, and pension schemes remain out of reach for most CSO workers. Only a small segment of organizations can offer these protections, primarily due to financial limitations, fluctuations in donor support, and an absence of regulatory mandates compelling their provision within the non-profit sector. The lack of these long-term safety nets contributes to a pervasive sense of job insecurity, where even dedicated social sector workers endure precarious employment conditions with little assurance of future financial stability. This situation is markedly worse among smaller, grassroots organizations that often lack institutional capacity, financial resources, or bureaucratic leverage to participate effectively in

government-managed schemes such as those overseen by the Employees' Provident Fund Organization (EPFO). The dependence on donor funding exacerbates unpredictability, constraining the sustainability of comprehensive social protection offerings and placing workers at continued risk of economic hardship.

In Nepal, the provision of social protections through CSOs exhibits both parallels and contrasts. Survey data indicate that roughly 79% of Nepalese CSOs provide some level of health insurance to their frontline staff a marginally higher figure than India's but nonetheless indicative of considerable coverage gaps. Like the Indian context, these health insurance programs generally afford basic protection, typically limited to emergency care or outpatient consultations and seldom extending to chronic illness management or specialist services. The adoption of provident funds is significantly lower, with only 28% of organizations offering this form of financial security, underscoring challenges related to the country's constrained economic environment and nascent regulatory frameworks. Furthermore, just 24% of Nepalese CSOs provide monthly stipends or salaries, a pronounced difference from India that reflects Nepal's smaller economy, a heavier reliance on international aid, and a relatively informal operational model for many NGOs. Notably, though, mental health support is somewhat more prevalent in Nepal, with nearly half of surveyed organizations reporting some form of psychosocial assistance. This trend likely results from increased donor prioritization of mental health in post-conflict and disaster settings, such as following the 2015 earthquake, including advocacy by global organizations like the WHO. However, despite growing attention, mental health services within CSOs tend to be limited to awareness campaigns or basic counseling, lacking the comprehensive and sustained care necessary to address frontline workers' intense psychological burdens.

Other critical social protection components, including life insurance and pension schemes, remain scarce in Nepal's CSO sector, reflecting systemic economic constraints and underdeveloped institutional

infrastructure. This situation places additional responsibility on civil society to compensate for gaps in formal social security, intensifying operational pressures on organizations already stretched thin. The limited availability of such benefits compromises both worker welfare and organizational resilience.

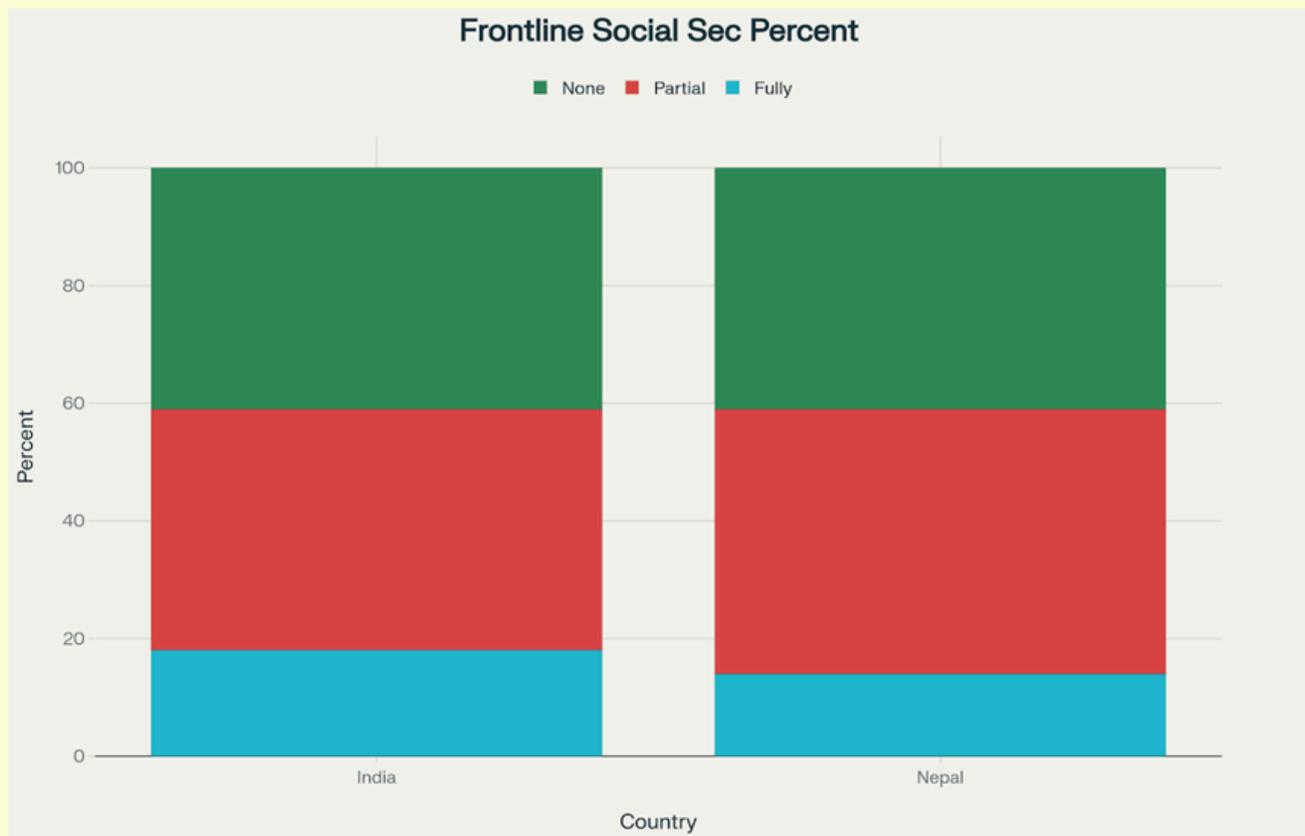
Across both countries, legal aid and mental health support represent significant areas of underdevelopment relative to other social protection dimensions, despite consistent recognition in policy dialogues and international development frameworks. Legal aid is vital for addressing workplace grievances, gender-based violence, and land rights issues; yet, CSOs frequently lack financial resources, specialized legal expertise, or networked partnerships required to deliver effective legal services to their staff or beneficiaries. In India, for example, although legal aid frameworks exist under governmental schemes such as the National Legal Services Authority (NALSA), many CSOs remain disconnected from these resources due to capacity constraints. In Nepal, access to legal support is similarly hampered by funding shortages and a scarcity of trained personnel, despite constitutional guarantees of justice and equality. Mental health services, while gradually advancing in Nepal, remain nascent overall; the combined barriers of social stigma, insufficient professional training, and limited budgeting impede substantive progress in both countries. These deficiencies are particularly alarming given the high emotional and psychological toll endured by CSO workers, who regularly engage with communities facing poverty, conflict, and disaster.

The divergence between policy aspirations and operational reality highlights an urgent need for focused, well-resourced interventions. Strengthening social security within the non-profit sector will require increased investment, enhanced capacity-building initiatives, and collaborative partnerships between CSOs, government actors, and international donors. Bolstering access to legal aid and mental health support is essential not only for improving the welfare of frontline

workers but also for enhancing the efficacy and sustainability of CSO operations in serving vulnerable populations. The evidence from India and Nepal underscores the imperative of adopting an integrated and responsive approach to social protection—one that ensures frontline civil society workers, who drive critical social change yet often occupy precarious labor positions, receive the comprehensive safety nets necessary to sustain their vital contributions.

Coverage Gaps: Fully, Partially, and Non-Covered Workers

Critically, the majority of frontline workers remain only partially covered by social security, or not covered at all, with meaningful cross-country similarities. Figure 2 summarizes the composite coverage status across the two countries (calculated as weighted averages across survey samples):



Coverage Status of Frontline Workers by Social Security: Surveyed Organizations in India and Nepal (%)

A recent survey conducted among Civil Society Organizations (CSOs) in India reveals a significant deficiency in social security coverage for frontline workers who constitute the operational backbone of the sector. Only 18% of the surveyed CSOs report that their entire frontline workforce benefits from comprehensive social security coverage, encompassing health insurance, accident protection, and pension schemes. These protections may be provided directly by the CSOs or accessed through formal government programs such as the Employees State Insurance Scheme (ESIS) or the National Pension System (NPS). In contrast, approximately 41% of organizations indicate that their workers receive partial social security benefits, with coverage often limited to basic health insurance or irregular financial stipends. More concerning is that another 41% of frontline workers remain completely excluded from any form of social security, lacking both organizational support and access to government schemes.

This disparity is alarming given the overwhelming scale of India's non-profit landscape, which includes over three million registered CSOs and employs millions of workers and volunteers across diverse and often challenging domains, such as rural healthcare delivery, disaster response, and educational outreach targeting marginalized populations. The absence of comprehensive social security leaves these frontline workers exposed to heightened economic and health risks, including income instability, absence of workplace injury compensation, and insufficient retirement provisions. The systemic barriers contributing to this exclusion include inconsistent and unpredictable funding streams within the non-profit sector, limited integration of informal workers into government social security frameworks, and the financial and administrative constraints faced particularly by smaller CSOs. These conditions collectively contribute to economic vulnerability among frontline personnel, undermining both individual welfare and the long-term sustainability of the sector as it seeks to fulfill critical developmental objectives.

In Nepal, the social security landscape for CSO workers reflects similar challenges but with even more constrained coverage. Only about 14% of surveyed civil society organizations indicate universal social security coverage for their frontline staff, encompassing full health, accident, and pension benefits. A slightly higher proportion, 45%, provide partial protections, usually limited to basic medical insurance or temporary financial support, lacking permanence or comprehensiveness. However, 41% of CSO workers in Nepal fall outside any social security framework, revealing a coverage gap equivalent to what is observed in India. The small size of Nepal's economy, its heavy reliance on donor funding for the non-profit sector, and the predominance of informal employment models exacerbate these challenges. Although constitutional provisions guarantee social security rights, their translation into effective benefits for CSO workers remains inadequate. Personnel operating in remote, geographically challenging, or post-conflict settings face particularly acute vulnerabilities, unmanaged within existing social protection mechanisms. Furthermore, the limited provision of provident funds, which only about 28% of Nepalese CSOs report offer, alongside the informal nature of employment contracts, compounds the precarity of one of the country's most critical labor pools. Given that CSOs play central roles in Nepal's ongoing challenges including disaster recovery, poverty reduction, and gender equality the absence of robust social protections for their frontline workers significantly impedes the sector's resilience and operational effectiveness.

The sheer scale of the issue across both countries driven by hundreds of thousands of CSOs employing millions of workers and volunteers brings into sharp relief the systemic nature of social security exclusion within the civil society sector. In India, the 41% of uncovered frontline workers represent an enormous workforce exposed to financial and occupational risks without adequate safety nets. Similarly, Nepal's CSO workforce, which fills vital gaps left by constrained public infrastructure, faces comparable insecure social protection statuses. The widespread absence of social security coverage threatens not only individual worker

well-being but also the sector's capacity to retain skilled and committed personnel. Without appropriate benefits and protections, burnout and economic stress contribute to high turnover and weakened organizational capacity.

Moreover, systemic issues such as inadequate and unpredictable funding, limited enforcement of labor protections for informal workers, and the lack of government schemes explicitly designed for civil society workers persistently restrict progress. The near absence of critical support structures, including access to legal aid and mental health services areas previously identified as significantly underdeveloped further compounds frontline workers' vulnerabilities. This multidimensional deficit necessitates urgent collaborative action among governments, CSOs, donors, and development partners. Priorities include designing accessible, context-specific social security frameworks, enhancing the implementation capacities of smaller CSOs, and advocating for policy reforms that acknowledge and address the distinctive employment conditions of non-profit sector workers. Ensuring comprehensive social protection for frontline civil society workers goes beyond principles of equity it is essential for bolstering the sector's long-term viability and sustaining its transformative role in advancing social development across India and Nepal.

The National Picture – Scaling Up

The Real Scale

In India, the informal workforce dominates the labor market, with over 390 million workers—roughly 90% of the total workforce—engaged in unorganized or precarious employment arrangements. This includes daily wage earners, agricultural laborers, gig economy participants, and informal sector workers who often lack formal contracts or secured income. As of August 2025, fewer than 31 crore workers have registered on the e-Shram portal, an initiative launched by the government to create a comprehensive database and facilitate social security access

for unorganized workers. However, registration on this platform does not necessarily translate into effective benefit delivery. The frontline workers within civil society organizations (CSOs), many of whom operate predominantly in rural and semi-urban areas, face compounded challenges such as limited awareness of entitlements, bureaucratic delays, and pervasive digital literacy gaps. The uneven implementation across states further compounds these problems, with delays or denials commonly reported in the disbursement of accident insurance, health coverage, and pension benefits. The absence of formal employer-employee relationships and steady income documentation makes it difficult for these workers to integrate fully with existing social security schemes, leaving them exposed to economic shocks amid inflation and job uncertainty.

The non-profit sector in India is characterized by a vast and heterogeneous ecosystem of organizations. Official figures from the NGO Darpan registry managed by NITI Aayog list approximately 2.65 to 2.94 lakh CSOs as formally registered fraction of an estimated total of around 3.3 million active entities nationwide. This discrepancy highlights significant regulatory fragmentation and the presence of many unregistered or informally operating groups that often choose to avoid formal registration requirements due to resource constraints or to evade compliance complexities. Among registered entities, cooperative societies and charitable trusts constitute a notable segment over 93,000 cooperatives and nearly 70,000 trusts focus on community welfare, poverty alleviation, and environmental conservation. The dominance of larger, urban-based NGOs in funding and operational capacity contrasts with the grassroots CSOs that rely extensively on local volunteers and informal support. This divide underscores the multifaceted nature of civil society in India, necessitating differentiated approaches to social protection and workforce support that consider organizational scale and context.

The frontline service delivery work carried out by CSOs spans critical sectors such as healthcare encompassing vaccination campaigns and maternal care education initiatives for underserved children, and disaster management during events like floods and cyclones. Frontline workers are typically volunteers, part-time contractors, or community mobilizers engaged under temporary and informal employment terms. Their exclusion from formal labor frameworks means they do not benefit from employer-sponsored protections such as minimum wage assurances or legal labor safeguards like those enshrined in the Minimum Wages Act. This informal status perpetuates income disparities and presents operational challenges for CSOs, including high turnover rates driven by financial insecurity, which can disrupt continuity and the long-term impact of development programs. Given the pivotal role played by CSOs in filling service delivery voids left by public institutions, the lack of formalized employment protections for frontline workers poses a fundamental risk to sustainable development outcomes and equitable service access.

In Nepal, the civil society sector is similarly extensive but operates within a more constrained economic and institutional environment. With over 50,000 registered NGOs and nearly 200 international NGOs active in the country, organizational structures tend to be lean, often relying on short-term hires, volunteers, and project-specific workers to navigate limited financial resources and donor-driven mandates. Formal social security schemes, such as the Social Security Fund (SSF) established in 2018, are designed around contributory models that depend on regular payroll deductions from employers and employees. This approach excludes the majority of CSO workers, primarily volunteers and project-based personnel who lack formal contracts or steady remuneration, rendering them ineligible for mandated benefits like health coverage, maternity support, or pensions. Recent adjustments to the SSF have aimed to include informal and self-employed workers, requiring monthly contributions more than Rs. 2,000, but uptake remains low due to widespread economic constraints in Nepal's largely agrarian and

remittance-reliant economy.

As a result, hundreds of thousands of frontline CSO workers provide essential services such as community health outreach in remote Himalayan villages, education in underserved areas, and reconstruction following natural disasters remain sidelined from government-mandated social security protections. These workers frequently encounter compounded vulnerabilities stemming from Nepal's post-conflict recovery phase, recurrent natural calamities, and the volatile nature of international donor funding, which limits local organizations' ability to self-finance internal social protections. The lack of stable support mechanisms weakens the capacity of CSOs to retain skilled personnel and maintain operational resilience, undermining their role in Nepal's developmental trajectory.

Across both India and Nepal, this extensive reliance on informal labor within the civil society ecosystem exposes a systemic gap in existing social security frameworks. Millions of dedicated workers and volunteers substantially contribute to socio-economic progress but remain marginalized from the very protections designed to secure their welfare. Addressing this disconnect requires comprehensive policy reforms, including incentivizing CSO participation in national social security schemes, strengthening donor requirements for worker welfare, and building organizational capacity to adopt formal employment practices. Such actions are essential to ensuring the stability and sustainability of the non-profit sector, thereby enhancing its ability to meet growing development challenges while safeguarding the economic security of its workforce.

Worker Distribution by Sector

India's unorganized workforce, which numbers over 390 million individuals, is largely concentrated in sectors such as agriculture—with more than 159 million workers engaged in various capacities—and

domestic work, involving around 28 million laborers. Other significant segments operate within construction, waste management, and diverse informal service-sector activities including street vending, transportation, and small-scale retail operations. These economic domains rely extensively on frontline labor supplied by Non-Governmental Organizations (NGOs) and Civil Society Organizations (CSOs), which are instrumental in bridging service delivery gaps in health, education, and disaster relief, particularly within regions where state infrastructure remains limited or underdeveloped.

The frontline workforce within CSOs primarily comprises volunteers or individuals engaged on short-term, often precarious contracts. Despite their critical contributions to grassroots development and community empowerment, these workers encounter substantial vulnerabilities. The informality of their employment status excludes them from formal labor protections, social security schemes, and access to stable income or workplace benefits. This precarious positioning renders them especially susceptible to economic shocks, health risks, and employment instability. The lack of enduring contractual arrangements further impedes their ability to secure continuous capacity-building opportunities or to access legal recourse and occupational safety measures. Consequently, despite being indispensable agents of social change and service provision, these frontline workers operate under constrained conditions that limit both their own well-being and the long-term efficacy of the development initiatives they support.

The Political and Legal Status Quo

Government initiatives in India, including the Unorganized Workers' Social Security Act of 2008 and the e-Shram portal established in 2021, along with schemes such as the Pradhan Mantri Shram Yogi Maandhan Yojana (PMSYM) and Employees' State Insurance Corporation (ESIC), are designed to extend social security to workers in the unorganized sector. However, these measures currently cover only a small fraction of the

approximately 390 million workers engaged in informal employment. As of August 2025, fewer than 31 crore unorganized workers have registered on the e-Shram portal. Importantly, registration does not necessarily guarantee access to substantive benefits. Many registrants face challenges in obtaining effective coverage for essential protections such as health insurance, pension schemes, or accident compensation, largely due to uneven implementation, regional disparities, and administrative inefficiencies.

Several structural and procedural obstacles impede broader inclusion. Legal ambiguities regarding the classification of workers, particularly volunteers and their eligibility under labor laws create confusion. Additionally, complex eligibility criteria, including income limits and requirements linking registration to Aadhaar identification, disproportionately disadvantage workers associated with civil society organizations (CSOs), where employment relationships tend to be informal and short-term. The cyclical nature of project funding and limited institutional resources further reduce the capacity of CSOs to support worker enrollment in long-term social security schemes. Digital barriers also contribute substantially; many frontline workers lack access to smartphones or reliable internet connectivity, especially in rural and semi-urban locales, leading to poor digital literacy and exclusion from online registration processes. Surveys with CSOs consistently report frustration with cumbersome administrative procedures and insufficient donor funding geared towards supporting worker benefits such as insurance, stipends, or contributions to the Employees' Provident Fund (EPF). Many organizations cite the temporary duration of projects as justification for not enrolling workers in formal schemes intended for permanent or formally employed staff.

Even in more proactive states with focused registration drives, including Delhi, Maharashtra, and Odisha, the proportion of frontline workers fully covered by social security rarely exceeds 20%. This leaves a vast majority of CSO frontline workers unprotected against the financial and

health risks associated with their roles, undermining both their welfare and the operational sustainability of the non-profit sector that constitutes a vital component of India's development ecosystem. Without expanded, accessible, and context-sensitive social protection, these frontline actors remain vulnerable to health emergencies, occupational injuries, and long-term economic insecurity.

In Nepal, the constitutional guarantee of social security under Article 43 establishes a formal right to social protection for all citizens. The Social Security Fund (SSF), instituted with international donor involvement, aims to provide medical, maternity, and pension benefits. However, its effective reach is limited due to a contributory design oriented towards formal, regular employment relationships. This model excludes the majority of CSO workers, many of whom work as volunteers, temporary project staff, or part-time contractors, and therefore lack eligibility under SSF's strict contribution-based criteria.

The landscape of civil society organizations in Nepal is marked by a prevalence of small-scale NGOs, many operating with minimal budgets, transient staff, and dependence on donor funding that often prioritizes programmatic goals over workforce welfare. The complexities of rural geography and decentralized administration add layers of difficulty for CSOs attempting to access and integrate with social security systems. Further, digital and bureaucratic hurdles inhibit many organizations' engagement with the SSF, particularly those based in remote areas. Government policies have yet to formally recognize volunteers as workers eligible for social security, perpetuating gaps in coverage. Consequently, only larger international non-governmental organizations (INGOs) and well-resourced platforms provide partial medical insurance, limited mental health support or emergency relief funded through crowd-sourced mechanisms. Smaller, grassroots organizations often lack the financial means or administrative capacity to extend any social benefits to their frontline workforce.

Data from the Social Security Fund underlines this exclusion, indicating that a significant majority of project workers, volunteers, and part-time staff remain uncovered. Estimates suggest that hundreds of thousands of frontline CSO workers essential for community health initiatives, education in remote Himalayan districts, and disaster recovery lack formal social security protections. This exclusion poses serious risks in Nepal's context, given the country's vulnerability to recurrent natural disasters and ongoing developmental challenges compounded by economic limitations and donor dependency.

The common thread in India and Nepal is the persistent reliance on informal, often unrecognized labor within the CSO sector, paired with systemic shortcomings in social security frameworks that fail to effectively include these workers. Addressing these critical gaps demands a multipronged approach: simplifying and standardizing registration and enrollment procedures to accommodate short-term and informal engagement; increasing commitments from governments and donors to prioritize worker welfare programs; and crafting policies that explicitly acknowledge the unique employment arrangements prevalent in the non-profit sector. Only through such targeted interventions can social security frameworks become truly inclusive, providing equitable protection and supporting the sustainability of the vital grassroots workforce driving developmental progress.

Qualitative Findings from the Field: Stress, Losses, Risks

Frontline workers in Civil Society Organizations (CSOs) in India and Nepal play an indispensable role in advancing social justice, delivering essential services, and responding to crises. Yet, the very people who support these organizations face a range of occupational risks that compromise both their well-being and the continuity of their work. Harassment and violence represent one of the most severe risks, particularly for those working in advocacy positions that confront entrenched inequalities such as gender discrimination or caste-based exclusion. Women, Dalits, and other marginalized workers often find themselves targeted by intimidation, smear campaigns, and even physical violence when challenging local power structures. For example, activists raising awareness on gender-based violence or advocating for equitable land rights frequently confront threats not just from community members but also from dominant social and political interests whose positions are destabilized by their advocacy.

Accidents and physical injuries are another pressing concern. Many CSO workers engage in activities that require travel under unsafe conditions, respond to disasters in hazardous settings, or operate in environments without basic safety measures. The absence of protective equipment or reliable infrastructure dramatically increases the risks in their daily work. A community mobilizer traveling long distances on rough rural roads for an education initiative may suffer a motorbike accident without any organizational insurance or medical cover. Similarly, during flood relief efforts or waste management initiatives, frontline workers are exposed to unsafe environments, often relying only on personal resilience to cope with risks that would ordinarily demand systemic safeguards. In many cases, those who survive accidents or injuries must depend on sporadic donations from peers or informal crowd-funding platforms,

which serve as temporary relief but lack permanence and predictability.

Alongside physical risks, mental and emotional strain should not be overlooked. Many frontline workers encounter the trauma of those they serve daily, whether through cases of domestic violence, persistent poverty, or post-disaster grief. This emotional engagement, undertaken without adequate counseling or mental health support, manifests overtime as anxiety, depression, and burnout. The problem is compounded by economic insecurity; workers are frequently underpaid, often earning less than a living wage. Contracts are typically short-term, tied to donor project cycles, and fail to ensure any continuity of employment. The sudden suspension of funding, a shift in donor priorities, or regulatory crackdowns on civil society can quickly leave workers without income or recourse. The COVID-19 pandemic starkly highlighted these vulnerabilities, as many CSOs downsized or closed operations outright, abandoning the very workers who had served during the height of the crisis.

The precarious situation of CSO workers is vividly illustrated in documented case studies. In India, a community organizer injured while assisting cyclone relief efforts was left to recover alone, without insurance or compensation, reliant only on her colleagues for financial help. In Nepal, a volunteer who suffered severe health complications during outreach received no institutional support, surviving only due to informal fundraising by neighbors and acquaintances. These stories are far from isolated. They expose a systematic neglect of worker rights, where individuals central to health, education, and disaster services are left without protection or security, undermining not just their lives but also the sustainability of frontline social interventions.

Conditions within CSOs are consistently described as poor. Surveys across India and Nepal indicate that fewer than one in five CSOs report their worker support systems to be in “good” condition. The majority acknowledge that they offer either minimal or no protection, with low

wages, unsafe working conditions, and lack of psychological or social support as the norm. Facilitators of education programs in rural India often struggle in makeshift classrooms without electricity or even functional toilets. In Nepal, disaster responders routinely take on intensive rescue or supply operations without gloves, masks, or boots. These deficits inevitably affect morale, producing high turnover and weakening the continuity required for long-term community empowerment. When frontline workers leave due to exhaustion or lack of security, entire project cycles are disrupted, eroding public trust in CSOs and weakening social resilience.

Underlying these vulnerabilities are structural barriers that prevent meaningful improvement. Funding remains one of the core challenges. The financial architecture of CSOs is largely projectized and donor-driven, with grants tailored almost exclusively toward measurable program outcomes. Worker welfare is rarely factored into budgets, relegating frontline safety, insurance, and social security to an afterthought. This budgetary neglect translates into an entrenched inability to commit resources for salaries, provident funds, health benefits, or pensions. Added to this is the bureaucratic complexity of accessing state-supported welfare schemes. In both countries, convoluted processes, excessive documentation, and limited institutional capacity within small CSOs restrict effective enrollment in available systems. Moreover, the ambiguous status of civil society workers further complicates matters. Since many are formally categorized as “volunteers,” they remain excluded from labor protections and statutory benefits, left in a legal gray zone without the ability to demand compensation or lodge grievances.

Discrimination deepens this vulnerability. Women and marginalized caste workers experience not only disproportionate exposure to violence but also systemic exclusion from leadership and resource allocation within organizations. In India, Dalit community workers report frequent sidelining, while in Nepal women activists often face threats

during outreach that men are spared from. Institutions that should protect them either lack internal grievance mechanisms or remain silent under pressure from powerful interests. Compounding these obstacles is the widespread lack of legal literacy. Many frontline workers have little awareness of their rights or eligibility under schemes such as India's Employees' State Insurance provisions or Nepal's Social Security Fund. Even administrators, lacking training, fail to navigate the eligibility criteria or guide their workforce through these processes.

To address these conditions, a comprehensive rethinking of frontline worker protection is required. This means rebalancing donor priorities to allocating specific budget lines for welfare and insurance, rather than focusing solely on program results. Social protection schemes must be made more accessible, with simplified enrollment processes and direct support for smaller CSOs. Legal frameworks should evolve to recognize the distinct contributions of volunteers and mobilizers, affording them basic rights to safety nets. Internal organizational reforms are also critical, ensuring that discrimination is addressed, grievance redressal mechanisms are functional, and mental health is incorporated into worker care. Training on rights and entitlements, coupled with legal aid support, will empower workers to claim what they are due. Above all, the dignity and security of CSO workers must be treated not as secondary to program deliverables but as fundamental to the success of civil society itself.

Comparative National and Cross-Border Dynamics

Nepal's constitutional guarantee under Article 43, which promises social security for all citizens, and the creation of the Social Security Fund (SSF) suggest a progressive vision for protecting workers. Yet in practice, the situation for frontline staff and semi-formal workers in civil society organizations (CSOs) mirrors the shortcomings observed in India. Despite the legal commitments, access to social security remains fragmented, inconsistent, and often symbolic for those working in NGOs,

grassroots organizations, and volunteer-driven initiatives. Most of these workers are engaged under short-term contracts, project-specific arrangements, or informal volunteering structures, which effectively exclude them from state schemes. Coverage exists in narrow areas, such as limited health or accident insurance, but these are more often organized by the employing CSO through group policies with private insurers than through robust state mechanisms like India's Employees' State Insurance Corporation (ESIC) or Nepal's SSF.

Health and accident coverage, where available, tends to be patchy. A CSO in India might offer a hospitalization policy covering basic care, while donor-driven projects in Nepal sometimes provide temporary accident cover for field-based staff. However, such policies typically carry low ceilings for claims, exclude pre-existing conditions, and end as soon as a project cycle closes, leaving workers exposed to catastrophic out-of-pocket costs if a serious illness or injury occurs. In both countries, the protective net is weakest when it comes to more sustainable forms of social security such as pensions and provident funds. Sustaining such mechanisms often falls beyond the financial capacity of small and mid-sized CSOs, especially as donor funding is largely programmed toward measurable activities rather than staff welfare. In Nepal, only around 28% of CSOs provide any form of provident fund support, and a similar pattern is observed in India where only large, well-established NGOs have the scale to maintain structured retirement or savings benefits for employees. Legal aid, which could play a crucial role in protecting workers against harassment, violence, or workplace disputes, is rarely available. Organizations cite funding constraints and lack of access to qualified legal expertise as the primary reasons, leaving staff to fend for themselves in the face of exploitative or hostile circumstances.

Volunteers, who constitute a major portion of civil society's active workforce, face an even deeper exclusion. Despite being consistently acknowledged in both nations' policy discourse and post-disaster frameworks as key agents of social development, they are systematically

left outside formal protection systems. In India, the National Policy on the Voluntary Sector (2007) lauds volunteers as the backbone of community initiatives, but actual schemes such as the e-Shram portal demand proof of salaried employment or income history, effectively disqualifying them. In Nepal, the SSF's contributory model is based on salary deductions and employer contributions, which by design excludes non-salaried volunteers. This leaves millions of individuals, many of them at the very frontline of risky work such as disaster response, land rights campaigns, or rural health outreach without even minimal accident or health insurance. When crises strike, they rely almost exclusively on informal networks of support, occasional donor relief, or local-level crowdfunding, all of which are short-lived and unsustainable.

The vulnerabilities of frontline CSO workers are further compounded by the intersections of gender and caste-based inequalities. Women engaged in this sector, particularly those involved in rights advocacy or community mobilization in rural areas, face intensified risks of harassment, hostility, and violence. They often work against entrenched patriarchal and caste hierarchies, and in doing so, become prime targets of threats and intimidation campaigns. Reporting mechanisms within CSOs remain weak, and legal redress is rarely accessible in practice. Many women workers endure not only external hostility but also marginalization within their organizations, where they face limited opportunities for leadership roles and are more frequently employed under insecure forms of engagement. The lack of institutional safeguards such as clear gender-sensitive grievance redressal channels, access to legal aid, or counseling support leaves them doubly vulnerable. Case after case from both countries illustrates how these exclusions leave female frontline workers bearing the heaviest burdens while receiving the least institutional protection.

The patterns are clear. Despite constitutional mandates, policy rhetoric, and international donor support, the lived reality for CSO workers in India and Nepal is one of fragmented security and fragile protections.

Health and accident coverage, where it exists, is narrow and temporary. Pensions, provident funds, and legal aid are almost entirely absent outside a small cluster of larger NGOs. Volunteers, despite being celebrated in theory, remain categorically outside the reach of structured protection. Women and marginalized caste workers encounter systemic neglect alongside targeted harassment.

Addressing these challenges requires a fundamental shift in priorities and practices. Social security frameworks in both countries must evolve to formally recognize and include volunteers and semi-formal workers, not as peripheral actors but as vital contributors to national and local development. Registration processes under schemes like SSF in Nepal or e-Shram in India need simplification and adaptations to accommodate informal categories of work typically seen in CSOs. Donors, who wield significant influence over civil society resourcing, must prioritize welfare and protection as integral to program sustainability, ensuring that budget lines for insurance, provident funds, and legal aid are routine rather than exceptional. Finally, the development of gender-responsive interventions is essential this means setting up safe reporting systems, integrating legal and psychosocial support, and proactively addressing power asymmetries within organizations themselves. For the CSO sector to remain a resilient, credible, and ethical force in community development, the well-being and protection of its frontline workforce can no longer remain an afterthought.

Aspirational Collaboration

Nearly half of the organizations consulted in India and Nepal emphasize the need for stronger mechanisms of cross-border learning and collaboration. For them, social security for frontline CSO workers is not only a domestic concern but also a shared regional challenge that requires creative, collective approaches. Many organizations see value in structured opportunities for joint training, allowing staff to learn from models piloted across the border and adapt them to local realities. For

example, initiatives around cooperative insurance models or grassroots mental health interventions hold potential for replication, but they remain confined to small pockets without platforms for exchange. Advocacy is another area where cross-border collaboration is seen as crucial. National schemes in both countries continue to face design and accessibility challenges, and organizations believe that coordinated regional advocacy could amplify their voices, making it harder for governments and donors to ignore systemic gaps. Respondents also frequently pointed to the importance of coordinated emergency relief collaboration. In situations of trafficking across borders, or natural disasters like floods and earthquakes that affect vulnerable populations in both countries simultaneously, cross-border partnerships are perceived as vital for timely action and worker protection.

At the same time, several challenges limit the feasibility of such collaboration. Legal and financial barriers represent perhaps the most significant hurdle. Cross-border fund transfers are tightly regulated, with small CSOs struggling with compliance documentation, taxation implications, or foreign contribution restrictions. These barriers not only slow down partnerships but, in some cases, prevent them altogether, leaving collaborations dependent on larger international intermediaries that can manage compliance. Beyond financial constraints, cultural and linguistic differences also create hurdles. While India and Nepal share a long history of people-to-people connections, differences in administrative language, sectoral jargon, and cultural reference points often complicate training programs or shared advocacy campaigns. Addressing these requires deliberate effort to design inclusive processes that adapt to local contexts rather than replicating one-size-fits-all solutions.

Resource limitations underscore all other challenges. Most small and medium-sized CSOs, particularly those rooted in rural areas, lack the funds to spare staff for regional exchanges or to sustain joint platforms. Even when enthusiasm exists, the demands of day-to-day survival

running projects, dealing with funding gaps, and meeting programmatic targets—leave little scope for active engagement in cross-border initiatives. For organizations already struggling to provide minimal social protection to their own frontline workers, regional collaboration becomes an additional layer of work requiring dedicated resources, which they often do not have.

The interest in linking learning, advocacy, and relief between CSOs in India and Nepal reflects an important recognition: that frontline workers across the region face strikingly similar vulnerabilities, and solutions developed in isolation are too fragile to withstand recurring crises. Yet without addressing the legal, financial, and resource barriers that hinder cooperation, the opportunities for impactful engagement will remain limited. Building opportunities for structured exchange, either through donor-supported consortia or independent regional networks, could help bridge this gap by pooling expertise, reducing duplication, and strengthening the case for frontline workers' rights across borders.

Recent Policy Developments and Expert Guidance (2024–2025)

In India, the Social Security Code 2020 was introduced with the stated ambition of consolidating and streamlining various labor laws, while expanding the scope of coverage to include more categories of workers. By mid-2025, however, the draft rules presented by the Delhi government highlight that the promise of expanded protection for frontline and semi-formal workers in the CSO sector remains limited in practice. The language of the draft leaves unresolved questions about how non-salaried workers, volunteers, and project-specific staff in NGOs will be defined and treated under the framework. For instance, while contractual wage employees are addressed in implementation guidelines, informal or “voluntary” staff who make up the bulk of CSO frontline workers are left in a gray zone. Without explicit clarity, many risk standing outside the reach of statutory protections such as pensions, provident funds, accident cover, or maternity support, despite being directly involved in high-risk service delivery at the grassroots level.

Nepal’s recent reforms expanding the Social Security Fund (SSF) reflect a parallel challenge. While the SSF has broadened contributory mechanisms for salaried employees in both public and private sectors, it does not yet extend comprehensive protection to volunteers or semi-formal CSO staff. The contributory model requires both employer and employee input, which is not feasible for staff on project-based honoraria or for those working informally without defined contracts. Volunteers who are highly visible in disaster response, health outreach, and rights-based work remain excluded not because of their lack of relevance, but because the system has not found a way to account for their contributions. This exclusion reveals a gap between policy ambition and the reality of grassroots labor practices in the voluntary sector.

Both countries' frameworks reveal an important commonality: the formal legal language of "coverage for all" tends to break down in practice at the margins, precisely where CSO and voluntary sector workers are located. Here, international best practices offer critical guidance. The recommendations of the International Labour Organization (ILO), the World Bank's social protection studies, and more recently the Overseas Development Institute's Humanitarian Practice Network (HPN) converge on the importance of non-contributory, floor-level security frameworks. The key principle is that workers who are not in salaried, contributory systems yet who consistently perform essential services for society must still have guaranteed access to safety nets. These include baseline health cover, accident insurance, disability protection, and some form of income support or pension in older age. Such schemes need not depend exclusively on employer-employee contributions but can instead be sustained by pooled public funding, international development assistance, or dedicated solidarity funds supported by a mix of stakeholders.

For India and Nepal, this means that volunteer and semi-formal CSO staff could be included under a ring-fenced non-contributory model, rather than left to navigate contributory schemes designed for regular employees. Moving in this direction would require policy innovation: for example, creating registration portals specifically tailored to CSO workers that do not hinge on proof of fixed wages, or embedding social protection lines within donor program budgets as mandatory, non-negotiable features. Practically, these models could borrow from existing global experiments, such as universal accident insurance for disaster responders, or community-risk pools subsidized by public funds to cover volunteers engaged in frontline work.

If India and Nepal are to realize their stated objectives of inclusive social security, they will need to move beyond contributory logics that exclude many CSO-linked workers. As the global evidence base suggests, building a floor-level, non-contributory model of protection is not just

feasible but necessary for sustaining the voluntary sector as a credible, resilient pillar of social support. For both countries, the challenge lies less in conceptual commitment, both already project values of inclusion in their rhetoric and more in regulatory clarity, resource allocation, and willingness to recognize frontline workers outside formal boundaries of employment as deserving of robust protection.

The case studies from Brazil and Ghana can provide important insights into how countries with large informal and voluntary labor forces have expanded social protection. Brazil's Bolsa Família program, while initially conceptualized as a conditional cash transfer for low-income households, has evolved into a flexible, state-financed safety net that extends beyond the traditional employer-employee framework. By linking income transfers to access to health and education services, the program created a foundational level of security for millions of individuals surviving on informal and precarious work. Over time, it adapted to include broader forms of insurance coverage and demonstrated crisis-responsiveness during economic shocks and the COVID-19 pandemic. What is most relevant for India and Nepal is that Brazil's approach bases entitlement on household vulnerability and social contribution rather than formal employment status. This orientation provides a useful blueprint for extending non-contributory protections to CSO workers and volunteers, who are similarly excluded from contributory mechanisms despite their essential role in sustaining community services.

Ghana's National Health Insurance Scheme (NHIS) offers another constructive reference point, particularly about addressing health security for informal and non-salaried groups. Recognizing that most of its workforce does not participate in formal wage systems, the NHIS was designed as a flexible, partly subsidized pool into which informal workers such as farmers, traders, and community mobilizers could enroll. Although modest premiums are required, the scheme is heavily underwritten by government subsidies, ensuring that access to medical

care is not foreclosed for vulnerable groups. For the civil society workforce in India and Nepal, where hazardous outreach and disaster response place workers at persistent health risk, such a hybrid financing approach could help to institutionalize medical and accident coverage. By combining public subsidy, donor support, and minimal worker contributions, both countries could move beyond the limited, project-based health insurance currently available through NGOs, toward a more durable national system of risk protection.

The lessons from Brazil and Ghana underscore that inclusive social security for frontline and voluntary actors is both possible and practical, even in resource-constrained environments. They demonstrate that broad, non-contributory protections need not be aspirational, but can be designed around vulnerability, role, and contribution to social welfare. For India and Nepal, adapting these principles would mean formally acknowledging CSO-linked frontline staff and volunteers as a category of essential workers entitled to minimum levels of health, accident, and income security. Embedding such protections through national schemes complemented by donor-supported solidarity funds or regional community insurance models would provide the continuity and sustainability that current project-based arrangements lack. In doing so, both countries would not only safeguard the lives and livelihoods of their civil society workforce but also strengthen the overall resilience and credibility of the sector.

Policy Gaps and Their Real-World Consequences

Despite gradual policy reform, more than 40 percent of frontline workers affiliated with CSOs in India and Nepal continue to remain outside any form of social security, while another 40–45 percent experience only partial protections through short-term or group-based insurance. These temporary measures often arranged by CSOs themselves via private insurers offer limited hospitalization or accident coverage but fall far short of comprehensive protection available through state schemes like India's Employees' State Insurance Corporation (ESIC) or Nepal's Social Security Fund (SSF). For millions of mobilizers and volunteers engaged in disaster relief, rural outreach, gender justice advocacy, or community health work, the result is not just inadequate social security but systemic exposure to harassment, injury, or economic collapse during crises such as floods, pandemics, or political disruptions. Voluntary work, which forms the bedrock of both countries' social sector contributions, remains entirely invisible, as contributory designs under e-Shram or the SSF exclude non-salaried workers altogether. This exclusion leaves volunteers without safeguards, despite their direct involvement in protecting communities during emergencies.

Here, international experiences provide practical lessons to inform systemic reform. Brazil's Bolsa Família program illustrates how a non-contributory, state-financed social protection floor can be designed to include populations beyond wage employment. Although initially launched as a conditional cash transfer for vulnerable households, Bolsa Família evolved to ensure a minimum level of income and service access for those in informal work arrangements. Its structure anchored on vulnerability criteria rather than employment status demonstrates how India and Nepal could integrate CSO and volunteer workers into national

frameworks by recognizing their social role and contributions. Similarly, Ghana's National Health Insurance Scheme (NHIS) provides a compelling example of extending coverage to informal workers through a pooled, subsidized model that reduces costs for individuals while ensuring consistent healthcare access. By tailoring Ghana's hybrid subsidy-premium approach to their own contexts, India and Nepal could establish national health and accident insurance pools specifically designed for CSO-linked workers, stabilizing support beyond the erratic timelines of donor projects.

Drawing from these models, governments in both countries could systematically reform their frameworks for informal and voluntary sector protection. First, non-contributory social protection floors could be institutionalized through national legislation, guaranteeing minimum levels of accident, health, and income support regardless of employment status. This would require reorienting schemes like the Social Security Code in India and the SSF in Nepal to explicitly recognize volunteers and semi-formal staff as eligible categories, supported through public subsidies and donor-mandated welfare allocations. Second, sustainable financing mechanisms must be developed: in addition to state allocations, donors could be required to earmark a proportion of project funds toward mandatory insurance or provident contributions, creating predictable welfare budgets within CSOs. Finally, registration and access mechanisms must be simplified, shifting away from wage-based criteria to vulnerability- and role-based identification that reflects the realities of CSO work. Such measures, if modeled after the adaptability of Brazil and the inclusivity of Ghana, would anchor frontline workers in durable protection systems, ensuring their continued ability to sustain essential social initiatives without bearing the brunt of systemic neglect.

Recommendations

The assessment of social security among frontline workers associated with civil society organizations (CSOs) and non-governmental organizations (NGOs) in India and Nepal reveals structural exclusions that continue to deny these workers meaningful protection. Despite their central role in advancing health, education, disaster response, rights mobilization, and community resilience, these workers remain situated outside the institutional boundaries of formal labor law. A reorientation of policy and practice is therefore imperative, particularly in the context of constitutional guarantees and international commitments toward universal social protection. The following recommendations are developed as integrated interventions that address legal reform, financial restructuring, institutional recognition, and cross-border cooperation. These proposals also embed the lessons of international experiences such as Brazil's Bolsa Família and Ghana's National Health Insurance Scheme (NHIS), demonstrating concrete pathways for India and Nepal to expand protection for informal and volunteer-based workers in the social sector.

One of the most fundamental reforms required is a deliberate expansion of the legal frameworks that govern social security to formally recognize and include categories of workers who have so far been excluded. Both India's Social Security Code of 2020 and Nepal's Social Security Fund (SSF) reflect a vision of comprehensive coverage, yet their designs continue to privilege formal wage employment. Volunteers, part-time staff engaged for specific project activities, or community mobilizers working without standardized contracts remain categorically outside these protections, not because of lack of contribution but because of their non-salaried status. This gap can only be addressed through explicit legislative commitments to non-discrimination in access to social security. In India, the current process of drafting rules for the Social Security Code provides a critical opportunity to insert

clarifications that include project-based, and volunteer staff linked to CSOs as a distinct category entitled to minimum protections. Similarly, in Nepal, the scope of the SSF should be redefined to accommodate two parallel tracks of enrolment: contributory access for salaried staff and non-contributory enrolment for semi-formal and volunteer workers. Such recognition would ensure that frontline workers associated with CSOs can no longer be dismissed as outside the definition of “employee” and thus undeserving of protection.

Legal reform alone, however, is insufficient unless accompanied by a clear commitment to provide a universal floor of benefits that secures at least the minimum needs of all workers, regardless of contractual arrangement. International frameworks from the International Labour Organization (ILO) and the World Bank consistently emphasize the establishment of social protection floors that guarantee baseline levels of security across essential dimensions of risk. For the voluntary and civil society sector in India and Nepal, this means institutionalizing a universal package consisting of comprehensive health insurance covering hospitalization and outpatient care, mandatory accident coverage given the high-risk environments where many of these workers operate, pension or income support mechanisms that provide protection against destitution in later life, and structured provisions for mental health support, recognizing the psychosocial burdens borne by those working on sensitive rights issues or with vulnerable populations. Such a universal package should not replicate contributory schemes designed for regular salaried employees but instead function as a publicly guaranteed entitlement financed through hybrid models that blend state subsidy, donor support, and modest contributions where feasible. Implementing such a floor would replace the current fragmentation of protections provided through inconsistent, short-term group insurance schemes, bringing stability and predictability to workers’ lives.

Financing mechanisms holds the key to institutionalizing such a

universal package, and therefore the creation of dedicated budget lines for social security in all projects funded by public or international sources becomes essential. At present, most CSOs are unable to provide meaningful benefits primarily because their funding is restricted to programmatic outcomes. Donors and governments typically view social security contributions, provident funds, or even health insurance premiums as “overheads” that cannot be billed to project budgets. Reconfiguring this structure requires donors to mandate explicit allocations to worker social security, integrated as a non-negotiable component of every project. Practical implementation of this mandate can be facilitated by tying project funding to mandatory registration of all CSO-linked workers with schemes such as India’s e-Shram or Nepal’s SSF. A digital central registry, maintained and monitored by governments in partnership with CSO federations, would allow precise accountability by tracking enrolments and entitlements. Through this mechanism, welfare investment would cease to be discretionary and would instead become an integral part of financing cycles, thereby transforming the culture of resource allocation within civil society interventions.

Reforms must also consider how gender and caste hierarchies intersect with occupational vulnerability in the CSO sector, compounding the risks faced by many frontline workers. Women engaged in mobilization for gender equality or rural development often face not only physical violence in communities resistant to change but also structural marginalization within their organizations. Workers from marginalized castes and indigenous communities confront similar forms of exclusion, with fewer opportunities for secure contracts and protection. Addressing these inequities requires gender- and caste-inclusive social security policies that prioritize the extension of protections to sectors and activities where vulnerability is most acute. Governments could design targeted expansions of protections for CSO outreach programs confronting entrenched patriarchal and caste norms, while donors should be encouraged to fund grievance redressal mechanisms, counseling services, and leadership pathways for women and

marginalized workers. Recognition must therefore be substantive, translating not just into enrolment schemes but also into measures that enable equitable participation and leadership across generations.

The regional dimension of CSO work in India and Nepal further underscores the need for coordinated cross-border responses. Disasters, gender-based violence, trafficking, and migration are all phenomena that transcend borders, placing frontline workers in both countries within shared contexts of risk. A cross-border coordination platform in the form of an India-Nepal Frontline Worker Forum would provide a structure for joint advocacy, rapid dissemination of legal and policy resources, and pooled support during emergencies. Anchored by networks such as FKDF in India and KIRDARC in Nepal, this platform could enable the production of bilingual training materials, cross-learning visits, and a repository of standardized legal aid templates to reduce barriers faced by frontline workers navigating complex legal environments. During transboundary disasters or shared crises, it could facilitate joint mobilization of resources, minimizing the fragmentation seen in ad hoc relief initiatives. Beyond immediate crisis response, such a forum would be instrumental in strengthening collective advocacy around volunteer inclusion, making the case to both governments as a unified regional front.

Strengthening partnerships between government, private sector, and donors offers another critical pathway to building sustainable social security for CSO-linked workers. Governments must actively negotiate with private insurers to design affordable group policies that can be extended even to small and mid-sized organizations that cannot negotiate individually. Donors should integrate compliance with minimum welfare standards into their grant conditions, ensuring that organizations cannot bypass obligations to support their workers. The private sector, including corporate social responsibility initiatives, should be encouraged to dedicate portions of their mandated CSR allocations to solidarity funds that cover informal NGO workers engaged

in high-risk tasks such as disaster response or rights-based advocacy. Such an institutionalized triangular partnership model would ensure that social protection is not diffused across fragmented obligations but integrated as part of an aligned effort recognizing the centrality of CSO contributions to social development.

The absence of clarity over who qualifies as a frontline worker remains one of the principal institutional barriers to extending protections. At present, definitions across both India and Nepal are inconsistent, leading to the exclusion of precisely those categories that the schemes claim to address. Establishing a clear, formal definition of frontline workers in policy instruments is therefore imperative. This definition must include salaried staff employed by CSOs, workers on time-bound project contracts, part-time community mobilizers, and volunteers formally affiliated with organizations through registries. Such recognition should be codified in the rules under India's Social Security Code and in the operational guidelines of Nepal's SSF. By formally defining and acknowledging these categories, policy frameworks would prevent neglect driven by definitional ambiguity and create a legitimate foundation for all further reforms.

Awareness and legal literacy remain equally critical in ensuring that existing and expanded protection can be accessed effectively. The study reveals that even in cases where benefits are theoretically available, workers and CSO administrators lack the knowledge and expertise to navigate registration systems, documentation procedures, or grievance redressal mechanisms. Governments should therefore finance and coordinate capacity-building programs delivered at district or provincial levels, specifically targeted at educating CSO workers on their rights, eligibility criteria, and application processes for social security. Dialogue spaces between CSOs and government agencies should be institutionalized through recurring forums where policy updates are disseminated in accessible formats, ensuring that the information gap does not perpetuate exclusion. In practice, this would mean a sustained

shift from delivering information on an ad hoc basis to building a culture of entitlement-based awareness where frontline workers view protection not as discretionary charity, but as their statutory right.

The sustainability of social protection reforms in the CSO sector also require investment in generational leadership and knowledge transfer. Many younger mobilizers entering the sector lack awareness of legal provisions or institutional negotiation strategies, perpetuating cycles of vulnerability. Governments and donors could support fellowships, mentorship platforms, and training programs that specifically target young CSO workers, equipping them with legal literacy and advocacy skills. By preparing a new generation of leaders able to negotiate more effectively with donors and policymakers, reforms can achieve continuity and not remain confined to episodic program cycles. Embedding leadership programs within the social security framework ensure smoother generational transition, prevents knowledge loss, and instills long-term sustainability in efforts to institutionalize protections.

Documentation of lived experiences from the field must occupy a central place in shaping both policy and public advocacy. Personal accounts of exclusion, injury without compensation, or lack of organizational support provide compelling evidence that resonates beyond statistical surveys. CSOs should therefore maintain continuous field documentation into their programming, systematically recording stories from frontline workers and translating them into policy-relevant case studies. Donors and governments, for their part, must fund knowledge platforms dedicated to transforming these narratives into actionable policy insights. By giving voice to the everyday realities of frontline workers, such documentation can sustain momentum for reform and prevent the erosion of political, and public will.

Finally, enforcement and monitoring mechanisms are essential to ensure that reforms move beyond aspiration to practical implementation. Governments should establish independent monitoring authorities

linked to registries such as e-Shram in India and SSF in Nepal, tasked with verifying that all registered workers are receiving scheduled benefits. Oversight could be further strengthened by requiring CSOs receiving public or donor funding to sign Memoranda of Action committing to compliance with coverage standards, monitored through periodic audits. Civil society networks must be empowered to participate in co-designing these oversight systems to guarantee legitimacy and prevent bureaucratic opacity. Such arrangements would formalize the accountability framework, institutionalize active participation by CSOs, and ensure that frontline workers are not left at the mercy of organizational discretion.

Addressing the alarming gaps in social security for workers associated with CSOs and NGOs in India and Nepal requires a comprehensive reform agenda that treats their inclusion as non-negotiable. By legislating non-discrimination, institutionalizing universal protection floors, mandating welfare budget allocations, adopting gender and caste inclusive policies, strengthening partnerships, clarifying definitions, building awareness, investing in leadership, continuously documenting realities from the field, and ensuring robust monitoring mechanisms, both countries can systematically correct the exclusions that underpin current frameworks. Drawing from successful adaptations in Brazil and Ghana, India and Nepal are well-placed to design hybrid non-contributory models that respond to the unique realities of informal and volunteer labor. What remains necessary is not further piloting of temporary stop-gap arrangements, but the political resolve and coordinated institutional will to recognize and legitimize the contributions of the civil society workforce as essential to national resilience and community development.

Towards Inclusive Social Protection for CSO Frontline Workers in India and Nepal

With thousands of civil society organizations (CSOs) and millions of frontline workers operating across India and Nepal, the distance between policy ambition and the lived experiences of these workers remains substantial and structurally entrenched. While both countries have made significant constitutional and statutory commitments to broaden social security, frontline workers who sustain grassroots programs continue to face neglect in practice. Civil society has repeatedly demonstrated its resilience and indispensability whether during the COVID-19 pandemic, successive floods, earthquakes, epidemics, or social movements yet the institutional, legal, and financial frameworks remain insufficient to protect those who carry out this work. Bridging this gap will require much more than incremental reform. It calls for a paradigmatic shift in how governments, donors, and policy planners value finance, and recognize the contributions of voluntary and semi-formal workers who put themselves at risk to sustain essential services.

At the core of this challenge is the failure of existing social protection systems to recognize the diversity of labor arrangements within the civil society sector. In India, the consolidation of labor laws through the Social Security Code of 2020 was intended to streamline protections and broaden coverage, yet ambiguities in its draft rules continue to exclude volunteers and project-based staff from clear entitlements. Nepal's Social Security Fund (SSF), while more expansive in principle, has not addressed the categorical exclusion of non-contributory workers, particularly volunteers engaged in high-risk roles without fixed salaries or contracts. The persistence of narrowly defined "employee" categories within both frameworks has left many of the CSO-affiliated frontline workers legally invisible. Formal recognition within national policy is therefore the necessary first step to any durable reform. Without

defining this workforce and acknowledging its role, social protection will remain aspiration rather than practice.

The recommendation chapter of this study outlined a comprehensive reform agenda built upon legal recognition, establishment of universal protection floors, financing restructuring, gender and caste inclusion, and cross-border collaboration. To recap, the first policy imperative is to expand legal definitions of eligible workers to explicitly cover CSO-linked staff: including volunteers, part-time facilitators, and project staff. A universal minimum package of benefits should then be institutionalized, encompassing health insurance, accident coverage, pensions, and mental health support. This package must be anchored not in contributory logic which automatically disqualifies volunteers but in non-contributory frameworks funded through hybrid mechanisms combining government subsidy, donor allocations, and modest worker contributions for those with capacity. Dedicated budget lines in every donor-funded or public-funded project must be mandated to cover social security overheads, with compliance tied to project approval and monitored through central registries such as India's e-Shram and Nepal's SSF.

Equally significant is the integration of inclusive practices that account for structural vulnerabilities based on gender, caste, and community status. Women and Dalit or marginalized workers are not only more likely to occupy less secure forms of civil society work but also disproportionately targeted by harassment, discrimination, and violence in the course of their work. Social protection policies must therefore incorporate grievance redressal mechanisms, legal and psychosocial support, and targeted funding for risk-prone sectors such as rights advocacy, gender equality campaigns, and disaster outreach. These measures must be designed to provide both immediate protection and long-term empowerment, ensuring greater participation of women and marginalized groups in leadership and organizational decision-making. Field research also highlighted the need for institutionalized cross-

border collaboration. The vulnerabilities faced by CSO workers in India and Nepal do not stop at national boundaries; floods, health epidemics, and trafficking networks operate across borders. Establishing a formal platform for bilateral coordination an India-Nepal Frontline Worker Forum would help standardize legal tools, facilitate multilingual training, and create pooled emergency support mechanisms. Such a forum could also strengthen joint advocacy, presenting volunteers' claims for inclusion in social security to both governments with the weight of regional solidarity. Thus, cross-border mechanisms become both a practical solution for immediate crises and a long-term strategy for amplifying the voice of civil society workers who are too often unheard in policy-making processes.

The financial architecture underpinning current CSO operations has emerged as perhaps the most critical barrier to worker welfare. Donors and governments typically allocate funds exclusively for programmatic outcomes, viewing staff welfare as an overhead cost to be minimized rather than as a prerequisite for effective delivery. This structural bias has left millions of CSO workers dependent on project-specific, temporary insurance schemes that vanish as soon as funding cycles end. The shift required here is not marginal adjustments but a fundamental redefinition of accountability in project finance. Just as monitoring indicators track deliverables in education, health, or disaster relief, projects must equally be held accountable for registering all staff and volunteers in recognized social protection systems. This requires donors to earmark specific budget lines for worker protection and governments to enforce compliance through registration and audits. Worker welfare must be normalized as a non-negotiable component of development programming rather than an optional extra.

International experiences reinforce the feasibility of these proposals. Brazil's Bolsa Família demonstrates how non-contributory social protection models can be both inclusive and sustainable, even in economies with significant informal sectors. By linking entitlement not

to employer–employee relationships but to household vulnerabilities, Bolsa Família provided a stable safety net for millions of individuals in precarious, informal, or unpaid work. Its flexibility in responding to crises, including through expanded coverage during the COVID-19 pandemic, demonstrates how social security can adapt to protect those outside traditional labor arrangements. For India and Nepal, the relevant lesson is that eligibility frameworks should prioritize contribution to social welfare and vulnerability indicators, rather than contractual employment status. This orientation would immediately bring CSO workers and volunteers currently excluded by design within the scope of protection.

Ghana’s National Health Insurance Scheme (NHIS) offers another compelling model, particularly for health security. Recognizing that most of its workforce operates informally, Ghana designed NHIS as a subsidized scheme accessible to farmers, traders, and informal workers, blending modest premiums with significant public subsidy. The result has been a national pool that provides affordable entry into health coverage for categories systematically excluded by contributory systems. Replicating such models in India and Nepal would allow CSO and volunteer workers many of whom face daily occupational hazards in rural or crisis environments to rely on durable health and accident cover instead of fragile, project-based insurance. Borrowing from Ghana’s hybrid financing model, governments in both countries could leverage donor funds and state budgets to subsidize CSO-specific health pools, with affordability designed to maximize participation.

These international examples challenge the perception that extending protection to informal and volunteer workers is financially or administratively unworkable. Rather, they illustrate that political will and structural design choices determine inclusivity. Brazil and Ghana succeeded not because they had fundamentally different economic constraints, but because they recognized vulnerability and informal labor as central to their societies and designed protections accordingly.

India and Nepal, facing similar realities, can adopt parallel approaches tailored to their contexts.

Beyond legal, financial, and institutional measures, the recommendations in this study also emphasize awareness, leadership, and documentation. Many CSO workers remain excluded not because entitlements do not exist but because information barriers prevent access. Governments and donors must therefore fund systematic awareness programs and capacity-building initiatives to ensure workers have clarity over their rights and the tools to claim them. Simultaneously, investment is required in leadership development, especially among the younger generation of mobilizers, to build continuity and resilience in worker-led negotiation. Equally vital is the continuous documentation of frontline experiences through stories from the field. These narratives serve not only to humanize statistics but also to sustain advocacy campaigns and provide policymakers with concrete insights into the real effects of exclusion.

Each of these recommendations are pointing towards a broader paradigm shift: a reevaluation of how society views the contributions of civil society workers. Today, many CSO-linked frontline workers remain in positions of systemic neglect, considered external to the structures of formal employment and thus underserving of protection. This framing must change. The ability of CSOs to safeguard lives during disasters, sustain development programs in rural areas, or mobilize citizens for social justice struggles has been consistently proven. Workers providing these services are not peripheral but essential. Protecting them is not only a question of ethical responsibility but also of ensuring the sustainability and effectiveness of civil society itself.

In this sense, bridging the current gap between policy ambition and lived reality requires both institutional reform and a shift in perception. Legal systems must extend the definition of eligibility, financial architecture must normalize worker welfare as mandatory, and monitoring systems

must hold organizations accountable. But equally, donors and governments must begin to regard the civil society workforce as indispensable contributors to national resilience, comparable to public-sector employees in their importance. The reforms proposed in this study are not radical innovations, but grounded extensions of global best practice adapted to address the vulnerabilities of CSO and volunteer workers in India and Nepal.

If adopted, these reforms would transform the current conditions of neglect into an integrated, rights-based system of protection, modeled on non-contributory principles proven effective in contexts such as Brazil and Ghana. In doing so, India and Nepal would not only secure the professional and personal well-being of millions of frontline workers but also ensure the credibility and resilience of their civil society sectors in advancing social change.

References

- Central Bureau of Statistics, Nepal. (2023). Nepal Labour Force Survey 2022–23.
- Central Statistical Institute of India. (2025). National NGO/CSO Registry Data.
- Comptroller and Auditor General of India (CAG). (2023). Performance Audit on Social Security Schemes.
- Comptroller and Auditor General of India (CAG). (2024). Report on Welfare Boards.
- Constitution of India. (1950). Directive Principles of State Policy.
- Drishti IAS. (2025). State of Social Protection Report 2025.
- Government of India. (2008). Unorganised Workers' Social Security Act, 2008.
- Government of Nepal. (2015). Constitution of Nepal.
- Government of Nepal. (2017). Contribution-Based Social Security Act, 2017.
- Government of Nepal. (2018). Social Security Schemes Operation Directives, 2018.
- Human Rights Watch. (2022). No Protection: Social Security Exclusions in Nepal's Informal Sector.
- Human Rights Watch. (2023). India: Challenges for Informal Workers.
- International Labour Organization (ILO). (2021). COVID-19 and Informal Workers in Asia.
- International Labour Organization (ILO). (2023). Social Protection in Nepal: Progress and Challenges.
- International Labour Organization (ILO). (2024). Social Security for Informal Workers in Asia.
- Law Alpine. (2025). Social Security in Nepal: Schemes and Practice.
- Ministry of Finance, Nepal. (2023). Economic Survey 2022–23.
- Ministry of Health, Nepal. (2023). Annual Report on National Health Insurance Program.

- Ministry of Home Affairs, Nepal. (2023). Social Assistance Programmes: Annual Report.
- Ministry of Labour and Employment, India. (2019). Pradhan Mantri Shram Yogi Maandhan Scheme.
- Ministry of Labour and Employment, India. (2020). Code on Social Security, 2020.
- Ministry of Labour and Employment, India. (2024). Annual Report 2023–24.
- Ministry of Labour, Employment and Social Security, Nepal. (2023). Prime Minister's Employment Programme: Progress Report.
- Ministry of Rural Development, India. (2023). National Social Assistance Programme: Guidelines.
- Ministry of Skill Development and Entrepreneurship, India. (2015). National Policy on Skill Development and Entrepreneurship.
- National Health Systems Resource Centre (NHSRC). (2023). ASHA Programme: Status and Challenges.
- National Planning Commission, Nepal. (2022). 16th National Development Plan 2022/23–2026/27.
- National Sample Survey Organization. (2024). Labour and Social Security Survey India.
- NITI Aayog. (2023). Ayushman Bharat: Progress and Gaps.
- ODI Humanitarian Practice Network. (2025). Frontline Workforce: Global Policy Guidance.
- Oxfam India. (2021). Inequality Report 2021: India's Unequal Healthcare Story.
- Pension Fund Regulatory and Development Authority (PFRDA). (2024). Atal Pension Yojana: Annual Report 2023–24.
- Social Welfare Council Nepal. (2025). NGO Registry and Sectoral Analysis.
- Statista. (2025). Registered Unorganized Workers by Sector: India.
- The CSR universe. (2025). State wise NGO Registration Data – India.
- United Nations Development Programme (UNDP). (2022). Social Protection in South Asia: A Review.

- United Nations Development Programme (UNDP). (2023). Gender and Social Protection in Nepal.
- United Nations. (2015). Sustainable Development Goals.
- UNICEF. (2022). Impact of COVID-19 on Community Health Volunteers in Nepal.
- UNICEF. (2023). Female Community Health Volunteers: Contributions and Challenges.
- Voluntary Action Network India (VANI). (2020). Frontline Activists in India: A Study on Their Role and Challenges.
- World Bank. (2022). Nepal Social Protection Review.
- World Bank. (2023). India's Social Security Framework: Opportunities and Challenges.
- World Health Organization (WHO). (2023). Health Financing in India and Nepal: A Comparative Study.

Appendix

List of Organizations Supported

- NGO Federation of Nepal
- Freed Kamalari Development Forum (FKDF)
- DDS Salyan
- Dalit Social Development Center Kapilvastu
- Justice and rights institution nepal (JuRI Nepal)
- Yuwalaya
- Community Self Reliance Centre (CSRC)
- KIRDARC Nepal
- Dhanusad public welfare society
- Creative Society Nepal
- Research Empowerment and Support
- Sya Syah samaj yala
- CCD kailali Dhangadhi
- National Society for Earthquake Technology-Nepal (NSET)
- Social Access and yeoman service for Awareness Legalize Centre (SAYAL) Nepal, Doti
- NEEDS NEPAL
- प्रगतिशील महिला तथा बालकल्याण समाज
- CLEAN UP NEPAL
- CIUD
- Centre for the integrated Society Development, Nepal
- FECOFUN
- Lumanti (Samjhana)
- SOSEC Nepal
- NAMUNA Integrated Development Council (NAMUNA)
- Sahyogini
- Native Medicare Charitable Trust
- Sadayanodai Ilaigar Narpani Mandram- SINAM
- SWATI
- Sahas sewa sansthan

- Utkal Sevak Samaj
- Jagruti
- Mount Valley Development Association
- Jagruti
- Jan Sahyog Kendra
- National Institute for Development Innovation (NIDI)
- Anmol Foundation
- Maa Hinjalakshya Mahila Samiti (mahimas)
- rajmeru sanstha
- Medical mission sisters
- Johar Pagina Foundation
- मानव सेवा समिति
- Purwanchal sewa Sansthan
- Sahas sewa sansthan
- RURAL EDUCATION AND ACTION DEVELOPMENT (READ)
- ashavmedh samjic sanstha nashik
- Seva Mandir
- Associated Social Service Agency (ASSA)
- Gaon Gathana Samiti
- Prakriti Sewa Sansthan
- vichar vikas samajik sanstha ,warora
- 100Vikalpajeevika Foundation
- GAON MUKTI SANGATHAN
- Social Economical Volunteer Association (SEVA)
- छत्तीसगढ़ शबरी सेवा संस्थान
- Meenakshi Mission Hospital and Research Centre
- AMBELAL HEINRICH MEMORIAL TRUST
- Samarpan Association
- PARAYAS, Society